** PUBLIC DISCLOSURE COPY **

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

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

Department of the Treasury Internal Revenue Service

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

A I	or the	e 2020 calendar year, or tax year beginning JU	ль 1 , 2020 and	ending J	UN 30, 20	21	
	Check if applicable	C Name of organization			D Employ	er identifi	ication number
Г	Addre						
F	Name chang				23-	7353532	
F	Initial return		livered to street address)	Room/suite	E Telepho		
F	Final	2831 N 31ST AVE	ivored to street address;	1100111/3uito) 242-36	
_	⊥return termir ated		7IP or foreign postal code		G Gross rec		271,088,739.
Г	∏Amen	ded PHOENTY NO 85000	Zii oi loreigii postal code		H(a) Is this		
F	return Applic		KERTIS		1 ` ′	bordinates	
	tion pendi	SAME AS C ABOVE			1		ncluded? Yes No
$\overline{}$	Γαν αν		◀ (insert no.) 4947(a)(1)	or 527	1 ` ´		list. See instructions
		te: WWW.STMARYSFOODBANK.ORG	(πισειτ πο.) - 4547 (α)(1)	01 321	1	•	on number
			ssociation Other	I Vear	of formation:	'	M State of legal domicile: AZ
		Summary	00000000	L 16ai	oi ioiiiiatioii.		VI State of legal dominione,
	_	Briefly describe the organization's mission or most	significant activities: ALLEVI	ATE HUNGE	R THROUGH	THE	
Governance	'	GATHERING AND DISTRIBUTION OF FOOD.	significant activities.				
ř	2	Check this box if the organization discor	·	sed of more	than 25% o	f its net as	1
ŏ	3	Number of voting members of the governing body					15
	1 .	Number of independent voting members of the gov					14
es		Total number of individuals employed in calendar y					253
ĬĖ		Total number of volunteers (estimate if necessary)					44807
Activities &		Total unrelated business revenue from Part VIII, col					
_	b	Net unrelated business taxable income from Form	990-T, Part I, line 11	<u></u>		7b	0.
					Prior Y		Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)				114,570.	269,492,832.
nue	9	Program service revenue (Part VIII, line 2g)			4,	094,906.	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4,	and 7d)			36,302.	<u> </u>
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,	, 9c, 10c, and 11e)			129,500.	223,702.
	12	Total revenue - add lines 8 through 11 (must equal	Part VIII, column (A), line 12)		198,	375,278.	270,368,241.
	13	Grants and similar amounts paid (Part IX, column (A	A), lines 1-3)		163,	537,017.	233,531,565.
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.
S	15	Salaries, other compensation, employee benefits (F	Part IX, column (A), lines 5-10)		13,8	394,481.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), li	ne 11e)		1,:	220,481.	1,644,320.
ž Š	b	Total fundraising expenses (Part IX, column (D), line	e 25) > 7,696,	427.			
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d,	11f-24e)		15,	735,227.	18,677,830.
	18	Total expenses. Add lines 13-17 (must equal Part IX	X, column (A), line 25)			387,206.	
	19	Revenue less expenses. Subtract line 18 from line	12		3,5	988,072.	1,227,553.
Net Assets or				Ве	ginning of Cu		End of Year
sets	20	Total assets (Part X, line 16)				051,551.	45,304,868.
t As	21	Total liabilities (Part X, line 26)				937,723.	3,026,846.
2	22	Net assets or fund balances. Subtract line 21 from	line 20		40,3	113,828.	42,278,022.
	art II	Signature Block					
		alties of perjury, I declare that I have examined this return,					y knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than office	r) is based on all information of wh	nich preparer	has any know	rledge.	
		2:					
Sig	n	Signature of officer			Da	te	
Her	е	TOM KERTIS, PRESIDENT & CEO					
		Type or print name and title		Ι.)-t-	I	
		Print/Type preparer's name	Preparer's signature		Date	Check L	PTIN
Paid		AMY A. O'LOUGHLIN		0	3/16/22	self-emplo	
	oarer	Firm's name CBIZ MHM, LLC			Fir	m's EIN 📐	34-1884125
Use	Only	Firm's address 4722 N 24TH ST, STE 300					
		PHOENIX, AZ 85016			Ph	one no.602	2-264-6835
May	/ the II	RS discuss this return with the preparer shown above	ve? See instructions				X Yes No

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	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 measu	red by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$244,813,552. including grants of \$26,313,772.) (Revenue \$	586,856.
	ST. MARY'S FOOD BANK DISTRIBUTES EMERGENCY FOOD BOXES (EFBS), AT NO	
	COST, TO INDIVIDUALS AND FAMILIES IN NEED. EFBS ARE DESIGNED TO PROVIDE	
	TEMPORARY FOOD ASSISTANCE FOR PEOPLE WHO ARE IN THE MIDST OF, OR	
	RECOVERING FROM, A CRISIS, SUCH AS A FIRE, FLOOD, UNEXPECTED JOB	
	LAYOFF, SERIOUS INJURY OR ILLNESS, OR THOSE WHO CONTINUE TO BE IMPACTED	
	BY COVID-19. A MAJORITY OF THOSE RECEIVING EFBS ARE LOW-INCOME	
	INDIVIDUALS AND FAMILIES, INCLUDING THOSE WHO ELDERLY AND HOMELESS,	
	BECAUSE THEY DO NOT HAVE FINANCIAL SAVINGS TO HELP THEM WHILE THEY	
	RECOVER, ST. MARY'S 932 PARTNER AGENCIES RECEIVE THE EFBS AND	
	DISTRIBUTE THEM TO PEOPLE IN NEED WITHIN THEIR COMMUNITIES. EACH EFB	
	PROVIDES A THREE-DAY SUPPLY OF NUTRITIOUS FOOD, WHICH PROVIDES A	
41:	HELPING HAND WHILE PEOPLE RECOVER AND NO LONGER NEED FOOD ASSISTANCE.	
4b	(Code:) (Expenses \$7,533,982. including grants of \$7,079,363.) (Revenue \$ THE COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) IS A FEDERALLY FUNDED	
	PROGRAM THAT WORKS TO IMPROVE THE HEALTH OF LOW-INCOME ELDERLY PEOPLE	
	(AGED 60+) BY SUPPLEMENTING THEIR DIETS WITH NUTRITIOUS USDA COMMODITY	
	FOODS. ST. MARY'S DISTRIBUTED 128,493 OF THESE BOXES DURING THE FISCAL	
	YEAR.	
4c	(Code:) (Expenses \$5,272,292. including grants of \$138,430.) (Revenue \$	
	ALLEVIATE CHILDHOOD HUNGER IN ARIZONA BY PROVIDING NUTRITIOUS MEALS TO	
	CHILDREN AT RISK OF HUNGER. ST. MARY'S DISTRIBUTED 1,267,030 MEALS FOR	
	FOOD-INSECURE YOUTH AT 219 KIDS CAFE AFTER-SCHOOL AND SUMMER MEAL SITES	
	THAT ARE SAFE, ACCESSIBLE, AND NURTURING ENVIRONMENTS. ST. MARY'S	
	CONTINUED TO PARTNER WITH NEW AGENCIES CULTIVATED DURING THE HEIGHT OF	
	THE PANDEMIC WHILE RE-CONNECTING WITH PARTNER AGENCIES THAT PREVIOUSLY	
	HAD CLOSED DUE TO COVID. TODAY, ST. MARY'S IS SERVING MORE THAN 4,600	
	MEALS PER DAY DURING THE SCHOOL YEAR AND SERVED MORE THAN 7,600 MEALS	
	PER DAY DURING THE SUMMER 2021. KIDS CAFES OFTEN ARE PART OF AN	
	AFTER-SCHOOL PROGRAM THAT INCLUDES TUTORING, HOMEWORK STUDY GROUPS AND	
A -1	ATHLETIC ACTIVITIES. KIDS CAFE PARTNERS INCLUDE CHURCHES, SCHOOLS,	
40	Other program services (Describe on Schedule O.)	6,320.)
40	(Expenses \$ 808,015. including grants of \$) (Revenue \$ Total program service expenses ▶ 258,427,841.	-,-2)
70	Total program solving expenses	Form 990 (2020

12570316 143399 188296

Form 990 (2020) ST MARY'S FOOD BAY 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		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
Ū	•	8		x
9	Schedule D, Part III 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?			
		9		x
10	If "Yes," complete Schedule D, Part IV			
10		10		x
44	or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
11				
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
L	Part VI	11a	21	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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			x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		x
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401	v	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	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		Δ.
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			
		441.		x
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
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	4-		x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		x
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		v	
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		v	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	I

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Form 990 (2020) 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	<u></u>
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	24c		
ч	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			l
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see 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? If	28a		х
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
	"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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		х	
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
J	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	335		
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	The first hamber reported in Box 6 of 1 of in 1666. Enter 6 in 16th applicable	-		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
U	(gambling) winnings to prize winners?	1c	Х	
032004	4 12-23-20		990	(2020)

Form 990 (2020) ST MARY'S FOOD BANK ALLIANCE Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 253			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		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		
	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	account)?	4a		Х
b	If "Yes," enter the name of the foreign country ▶				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e organization solicit			
			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons or gifts			
	were not tax deductible?		6b		
	Organizations that may receive deductible contributions under section 170(c).				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		Х
			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		l _		
	to file Form 8282?	1 1	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	+		v
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		
_	If the organization received a contribution of qualified intellectual property, did the organization file Fo If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza		7g 7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		/11		
	on an animal and the state of t	•	8		
	Sponsoring organizations maintaining donor advised funds.				
	D. I.		9a		
			9b		
	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
	Section 501(c)(12) organizations. Enter:	•			
а	Gross income from members or shareholders	11a			
	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	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
	Enter the amount of reserves the organization is required to maintain by the states in which the	1 1			
	organization is licensed to issue qualified health plans	13b	-		
	Enter the amount of reserves on hand	13c			
			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		1		
			15		X
	excess parachute payment(s) during the year?				
	If "Yes," see instructions and file Form 4720, Schedule N.		46		v
16			16		х

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.

<u>C</u>	·					X
Sec	tion A. Governing Body and Management				1	
		ı	I		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	1	텔		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	1	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	anv other			
	officer, director, trustee, or key employee?			2		х
3	Did the organization delegate control over management duties customarily performed by or under the					
3	of officers disables to the state of the sta					x
			- 41-40	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 95		s filed?	4		
5	Did the organization become aware during the year of a significant diversion of the organization's asso			5		X
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or			
	more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or			
	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?			8a	Х	
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 read	ched a	it the			
	organization's mailing address? If "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 Re					
	(This section 2 requests information asset policies for required by the information				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such characteristics.					
			,,,	10b	х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			116		
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
				12b	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			120		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	, -		400	х	
40	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	+	
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	i by in	aependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a	Х	<u> </u>
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nent w	rith 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	e its p	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	izatior	า'ร			
	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	nd 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 S	chedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		•	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 boo	ks an	d 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)	(B)			((C)			(D)	(E)	(F)
Name and title	Average		not c		more	than o		Reportable	Reportable	Estimated
	hours per					s both		compensation	compensation	amount of
	week (list any	<u> </u>	<u> </u>				T	from the	from related organizations	other compensation
	hours for	direct				,		organization	(W-2/1099-MISC)	from the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(** = ** * * * * * * * * * * * * * * * *	organization
	organizations	Itrus	nal trı		oyee	om pe				and related
	below	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
-	line)	lnd	Inst	ij,	Ke	e Hig	For			
(1) TOM KERTIS	40.00	-							_	
PRESIDENT & CEO	2.00	Х		Х				264,593.	0.	25,175.
(2) SARAH STUCKEY	40.00	-								
CFO	2.00			Х				183,670.	0.	21,634.
(3) LISA NOTARO	40.00	-								
CHIEF DEVELOPMENT OFFICER					Х			179,929.	0.	23,068.
(4) DUANE LAWSON	40.00									
CHIEF OPERATING OFFICER					Х			177,270.	0.	9,631.
(5) BRITT KNAPP	40.00									
SR. DIRECTOR OF FOOD & SUPPLY CHAIN						Х		171,694.	0.	14,902.
(6) MARCOS GAUCIN	40.00	-								
CHIEF PROGRAM OFFICER					Х			151,018.	0.	19,638.
(7) LAURA BRILL	40.00	-								
SR DIR OF CULINARY & NUTRITION						Х		106,717.	0.	17,530.
(8) CHAD MURPHY	40.00	-								
CHIEF HUMAN RESOURCES OFFICER						Х		111,779.	0.	6,406.
(9) MARC ISAACS	2.00	-								
CHAIRMAN	1.00	Х		Х				0.	0.	0.
(10) DOUGLAS CURRAULT	2.00	-								
SECRETARY		Х		Х				0.	0.	0.
(11) JOHN GINTY	2.00	1								
TREASURER (LEFT 1/21)		Х		Х				0.	0.	0.
(12) BOB BEAKE	2.00	-								
VICE CHAIR (LEFT 6/21)		Х		Х				0.	0.	0.
(13) JACKIE ASKIN	2.00	1								
DIRECTOR		Х						0.	0.	0.
(14) TOM CLARK	1.00									
DIRECTOR (LEFT 6/21)		Х						0.	0.	0.
(15) ARNOTT DUNCAN	1.00									
DIRECTOR (LEFT 9/20)		Х						0.	0.	0.
(16) SHERYL HILDEBRAND	1.00	1								
DIRECTOR (LEFT 6/21)		Х						0.	0.	0.
(17) PETER LARSON	1.00	1								
DIRECTOR	1.00	Х						0.	0.	0.
										Earm 990 (2020)

Part VII Section A. Officers, Director	(B)		,	((,	(F)
(A)	Average			Posi				(D)	(E)	
Name and title	hours per		not c	heck i	more	than c		Reportable	Reportable	Estimated
	week		, unles cer an					compensation	compensation	amount of
	(list any	or						from the	from related organizations	other compensation
	hours for	lirect				_		organization	(W-2/1099-MISC)	from the
	related	e or (stee			satec		(W-2/1099-MISC)	(** 27 1033 141100)	organization
	organizations	ndividual trustee or director	nstitutional trustee		ee/	m per		(** 2/ 1000 111100)		and related
	below	dual	ution	Ji.	key employee	st co oyee	ы			organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			
(18) TERRY MORRISON	1.00									
DIRECTOR		Х						0.	0.	0
(19) JUDD NORRIS	1.00									
DIRECTOR		Х						0.	0.	0
(20) ERIK OLSSON	1.00									
DIRECTOR	1.00	Х						0.	0.	0
(21) GRAEME PARKES	1.00									
DIRECTOR		Х						0.	0.	0
(22) GENE PETERSON	1.00									
DIRECTOR (LEFT 6/21)		Х						0.	0.	0
(23) JOHN ROUSSEL	1.00									
DIRECTOR		Х						0.	0.	0
(24) BECKY WINTERSCHEIDT	1.00									
DIRECTOR		Х						0.	0.	0
(25) JOE CLANCY	1.00									
DIRECTOR	1.00	Х						0.	0.	0
(26) WILL FELIZ	1.00									
DIRECTOR		Х						0.	0.	0
1b Subtotal							▶	1,346,670.	0.	137,984
c Total from continuation sheets to	Part VII, Section A							0.	0.	0
d Total (add lines 1b and 1c)							•	1,346,670.	0.	137,984

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) Name and business address	(B) Description of services	(C) Compensation
	Description of services	Compensation
RKD ALPHA DOG MARKETING		
8001 S 13TH STREET, LINCOLN, NE 68512	MARKETING AND ADVERTISING	1,950,146.
THINK TANK MEDIA & MARKETING, 8877 N 107TH		
AVE STE 302 #108, PEORIA, AZ 85345	MARKETING AND ADVERTISING	940,932.
TERRA SERVICES		
10851 N BLACK CANYON HWY, PHOENIX, AZ 85029	TEMP LABOR	424,644.
PSC OF ARIZONA INC		
5327 W PARADISE LN, GLENDALE, AZ 85306	POLICE TRAFFIC CONTROL	301,350.
UNITED SECURITY		
PO BOX 5923, PEORIA, AZ 85385	SECURITY GUARDS	234,558.
2 Total number of independent contractors (including but not limited to	o those listed above) who received more than	
\$100,000 of compensation from the organization	9	
GDD DADE WIT GDGETON A GOVERNMENTON GUDDEG		- 000 ()

SEE PART VII, SECTION A CONTINUATION SHEETS

	OOD BANK ALL								23-73535	32
Part VII Section A. Officers, Directors, T	rustees, Key Er	nplo	yee	s, aı	nd H	ligh	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average						Reportable	Reportable	Estimated	
	hours per week	(c	heck	all ·	that		ly)	compensation from the	compensation from related organizations	amount of other compensation
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(27) DARYL MELVIN DIRECTOR	1.00	x						0.	0.	(
(28) LAURA WORZELLA	1.00								••	
DIRECTOR		х						0.	0.	(
		1								
		1								
		-								

Form 990 (2020) ST MARY'S 1
Part VIII Statement of Revenue

		Check if Schedule O	ontains	s a response	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	159,664.				
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues							
جَ جَ		Fundraising events							
ffs,		Related organizations							
ية إق					13,385,594.				
Sir		Government grants (contri			13,303,334.				
utio	T	All other contributions, gifts,		I I	255 947 574				
ë		similar amounts not included			255,947,574.				
o d	_	Noncash contributions included in I			203,641,309.	260 402 832			
O a	<u>n</u>	Total. Add lines 1a-1f			Business Code	269,492,832.			
		COURGE PROGRAM			900099	E22 0E6	E22 0E6		
<u>:</u>	2 a					523,056.	523,056.		
er v	b	CK CATERING			624210	6,320.	6,320.		
n S	С								
Je S	d								
Program Service Revenue	е								
۵.		All other program service							
\longrightarrow	g	Total. Add lines 2a-2f				529,376.			
	3	Investment income (include	-						
		other similar amounts)				152,258.			152,258.
	4	Income from investment o	f tax-ex	empt bond p	roceeds				
	5	Royalties	·····						
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a	63,800.					
	b	Less: rental expenses	6b	0.					
	С	Rental income or (loss)	6с	63,800.					
	d	Net rental income or (loss)				63,800.	63,800.		
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	7a	683,021.	7,550.				
	b	Less: cost or other basis							
e		and sales expenses	7b	627,532.	92,966.				
Revenue	С	Gain or (loss)	7c	55,489.	-85,416.				
Re	d	Net gain or (loss)		<u></u>	_	-29,927.			-29,927.
her		Gross income from fundraisir							
₹		including \$		of					
		contributions reported on	line 1c)	. See					
		Part IV, line 18		8a					
	b	Less: direct expenses		I					
	С	Net income or (loss) from	undrais	sing events					
		Gross income from gamin							
		Part IV, line 19		9a					
	b	Less: direct expenses		I					
		Net income or (loss) from							
		Gross sales of inventory, le							
		and allowances		I					
	b	Less: cost of goods sold							
		Net income or (loss) from			•				
					Business Code				
snc	11 a	OTHER			900099	159,902.			159,902.
ine Due	b								-
Miscellaneous Revenue	c								
SS B	d	All other revenue							
Σ	e	Total. Add lines 11a-11d				159,902.			
	12	Total revenue. See instruction				270,368,241.	593,176.	0.	282,233.

032009 12-23-20

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	182,542,707.	182,542,707.		
2	Grants and other assistance to domestic	50 000 050	50 000 050		
	individuals. See Part IV, line 22	50,988,858.	50,988,858.		
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,	020 074	600 065	100 500	100 11
	trustees, and key employees	930,974.	688,267.	120,592.	122,115
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	11 241 011	0 204 201	1 460 041	1 400 500
7	Other salaries and wages	11,341,011.	8,384,391.	1,469,041.	1,487,579
8	Pension plan accruals and contributions (include	447 505	220 040	E7 067	F0 C00
_	section 401(k) and 403(b) employer contributions)	447,505.	330,840.	57,967.	58,698
9	Other employee benefits	1,766,664.	1,306,092.	228,842.	231,730
0	Payroll taxes	800,819.	592,044.	103,733.	105,042
1	Fees for services (nonemployees):				
a	Management	20 472		20 472	
b	Legal	38,472.		38,472.	
С	Accounting	59,550.		59,550.	
d	Lobbying	1 644 220			1 644 320
e	Professional fundraising services. See Part IV, line 17	1,644,320.		22 707	1,644,320
f	Investment management fees	32,767.		32,787.	
g	Other. (If line 11g amount exceeds 10% of line 25,	1 427 640	270 724	106 005	070 021
	column (A) amount, list line 11g expenses on Sch O.)	1,427,640.	270,724.	186,895.	970,021
12	Advertising and promotion	247,624.	22 070	38,873.	207 003
13	Office expenses	586,243.	32,070. 154,494.	7,561. 425,365.	207,993 6,384
14	Information technology	300,243.	131,131.	423,303.	0,30
15	Royalties	1,671,107.	1,659,901.	10,630.	576
16	Occupancy	1,010,491.	979,331.	20,950.	10,210
7	Travel	1,010,491.	373,331.	20,330.	10,210
18	Payments of travel or entertainment expenses				
^	for any federal, state, or local public officials	39,109.	28,097.	2,164.	8,848
9	Conferences, conventions, and meetings	68,498.	20,057.	68,498.	0,040
20	Interest	00,400.		00,400.	
21	Payments to affiliates	2,058,589.	2,020,020.	38,569.	
2	I	337,618.	228,352.	102,766.	6,500
23	Other expenses. Itemize expenses not covered	337,010.	220,332.	102,700.	0,500
24	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.) FOOD PURCHASES	4,621,606.	4,475,994.		145,612
a	RENTAL/LEASE	1,443,152.	1,440,051.	3,101.	143,012
b	PACKAGING PRODUCTS	812,378.	785,114.	3,101.	27,264
q	VEHICLE EXPENSE	774,023.	773,981.	42.	27,20
d		3,410,070.	746,513.	22.	2,663,535
е 5	All other expenses	269,140,688.	258,427,841.	3,016,420.	7,696,427
<u>:5</u> :6	Joint costs. Complete this line only if the organization	200,110,000.	250, 427, 041.	5,010,420.	7,000,42
,O	· · · · · · · · · · · · · · · · · · ·				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Form 990 (2020) Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	4,240,838.	1	5,692,753		
	2	Savings and temporary cash investments			145,178.	2	76,10
	3	Pledges and grants receivable, net			763,155.	3	170,00
	4	Accounts receivable, net			2,260,782.	4	1,606,89
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial c	ontributor, or 35%			
		controlled entity or family member of any of th	ese perso	ons		5	
	6	Loans and other receivables from other disqua	alified per	sons (as defined			
		under section 4958(f)(1)), and persons describ	ed in sect	ion 4958(c)(3)(B)		6	
ပ္ပ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			10,766,333.	8	11,809,37
¥	9	Donat and a company of the state of the stat			243,153.	9	344,48
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	. 10a	37,468,316.			
	b	Less: accumulated depreciation	. 10b	18,176,147.	19,476,186.	10c	19,292,16
	11	Investments - publicly traded securities			5,155,926.	11	5,359,19
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, lin	e 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			0.	15	953,90
	16	Total assets. Add lines 1 through 15 (must ed		1	43,051,551.	16	45,304,86
	17	Accounts payable and accrued expenses			1,767,438.	17	2,202,92
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet		1		21	
္ပ	22	Loans and other payables to any current or fo	rmer offic	er, director,			
≅		trustee, key employee, creator or founder, sub	stantial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of the	ese perso	ons		22	
ן כ	23	Secured mortgages and notes payable to unre	elated thir	d parties	902,657.	23	544,67
	24	Unsecured notes and loans payable to unrelate	ed third p	arties		24	
	25	Other liabilities (including federal income tax,	oayables t	o related third			
		parties, and other liabilities not included on lin	es 17-24).	Complete Part X			
		of Schedule D			267,628.	25	279,25
	26	9			2,937,723.	26	3,026,84
		Organizations that follow FASB ASC 958, c	heck here	x			
Ses		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27	Net assets without donor restrictions			39,490,841.	27	40,826,20
g	28	Net assets with donor restrictions		<u></u>	622,987.	28	1,451,81
밀		Organizations that do not follow FASB ASC	958, che	ck here 🕨 🗌			
던		and complete lines 29 through 33.					
S	29	Capital stock or trust principal, or current fund	ls			29	
Sel	30	Paid-in or capital surplus, or land, building, or	equipmer	nt fund		30	
As	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			40,113,828.	32	42,278,022
	33	Total liabilities and net assets/fund balances			43,051,551.	33	45,304,868

Pai	TEXT RECONCILIATION OF NET ASSETS				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	270,	368,	241.
2	Total expenses (must equal Part IX, column (A), line 25)	2	269,	140,	688.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,	227,	553.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	40,	113,	828.
5	Net unrealized gains (losses) on investments	5		-17,	260.
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		953,	901.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	42,	278,	022.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			
				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	Э.			
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	basis,			
	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	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a	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	
			Form	990 ((2020)

032012 12-23-20

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

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonempt 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

2020

Open to Public Inspection

Name of the organization

ST MARY'S FOOD BANK ALLIANCE

Employer identification number 23-7353532

Pa	rt I	Reason for Public (Charity Status. (All organizations must c	omplete th	nis part.) S	ee instructions.	_
Γhe	organ	zation is not a private found	ation because it is: (F	or lines 1 through 12, cl	heck only	one box.)		
1		A church, convention of chi)(A)(i).	
2	\Box	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)						
3	一	A hospital or a cooperative		•			i).	
4	一	A medical research organization	•					the hospital's name.
		city, and state:	,	,				1
5		An organization operated for	or the benefit of a col	lege or university owned	or operat	ed by a go	vernmental unit describe	ed in
Ŭ		section 170(b)(1)(A)(iv). (C		logo or armonomy omnoc	or operat	-		
6		A federal, state, or local gov	•	ental unit described in	section 17	70/h)/1)/A)	(v)	
7	Х	An organization that norma	-				•	oublic described in
•		section 170(b)(1)(A)(vi). (C	•	itiai part of its support if	om a gove	on in Critary	anit of from the general p	dablic described in
8		A community trust describe		1)(A)(vi) (Complete Part	+ II \			
9	H	An agricultural research org				nd in conju	unction with a land grant	collogo
9	ш	•				-	-	-
		or university or a non-land-g	grant college of agrict	ulture (see instructions).	Enter the i	name, city	, and state of the college	; OI
10		university: An organization that norma	lly receives (1) more t	than 33 1/30/ of its supp	ort from o	ontribution	ne momborship foos and	d gross receipts from
10	ш	activities related to its exem						
				•	` '		• •	· ·
		income and unrelated busin		(less section 511 tax) iro	iiii busiiles	ses acquii	red by the organization a	inter June 30, 1975.
44		See section 509(a)(2). (Con	•	volv to toot for public oof	fatu Caa	aaatian EC)O(a)(4)	
11 12	H	An organization organized a	•	•	•			nurnasas of one or
12	ш	An organization organized a more publicly supported organization	•	•	•		· · · · · · · · · · · · · · · · · · ·	
		lines 12a through 12d that	-					DIRECK THE DOX III
_		Type I. A supporting orga	* *					aivina
а		the supported organization	•		•	-		
		organization. You must o			majority C	n the direc	tors or trustees or the st	apporting
b		Type II. A supporting org			ion with it	e cupporto	d organization(s), by bay	ina
b		control or management o	· ·					-
		organization(s). You mus			arrie perso	iis iiiai coi	ittor or manage the supp	Jorted
С		Type III functionally inte			in connect	tion with a	and functionally integrate	ad with
·		its supported organization	- '				• •	with,
d		Type III non-functionally						zation(s)
u		that is not functionally int					· · · · · · · · · · · · · · · · · · ·	* *
		requirement (see instructi	-	• •	•		='	7011000
е		Check this box if the orga	•	•	•			
·		functionally integrated, or					1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	
f	Fnte	r the number of supported o	* *	any magnata support	.9 0.94			
a		ride the following information		d organization(s).				
) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
				,				
Γota	ıl							i

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						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	160,559,103.	165,318,611.	167,505,484.	194,114,570.	266,397,830.	953,895,598.
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	160,559,103.	165,318,611.	167,505,484.	194,114,570.	266,397,830.	953,895,598.
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)						45,509,778.
6	Public support. Subtract line 5 from line 4.						908,385,820.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	160,559,103.	165,318,611.	167,505,484.	194,114,570.	266,397,830.	953,895,598.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	194,381.	193,189.	187,145.	223,956.	216,058.	1,014,729.
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.)	124,117.	178,209.	195,578.	59,700.	159,902.	717,506.
11	Total support. Add lines 7 through 10						955,627,833.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	20,071,982.
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third, f	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop						>
Sec	tion C. Computation of Publi						
14	Public support percentage for 2020 (I					14	95.06 %
15	Public support percentage from 2019					15	94.85 %
16a	33 1/3% support test - 2020. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies		~				
b	33 1/3% support test - 2019. If the o	organization did no	t check a box on li	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
17a	10% -facts-and-circumstances test	- 2020. If the org	anization did not c	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	· ·	•				
b	10% -facts-and-circumstances test	- 2019. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	<u> </u>

Schedule A (Form 990 or 990-EZ) 2020

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	ļ					
	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	ļ					
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-	ļ					
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to	ļ					
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to	ļ					
	the organization without charge	ļ					
6	Total. Add lines 1 through 5						
	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.)						
	ction B. Total Support				•		
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,	ļ					
	and income from similar sources	ļ					
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on	ļ					
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third,	fourth, or fifth tax y	year as a section 5	01(c)(3) organization	on,
	check this box and stop here						>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2020 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2019					16	%
Se	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20)20 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
19a	a 33 1/3% support tests - 2020. If the	organization did n	not check the box	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization quali	fies as a publicly s	upported organiza	tion	>
k	33 1/3% support tests - 2019. If the	organization did n	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	ınd
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	as a publicly suppo	rted organization	
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	tructions	

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Schedule A (Form 990 or 990-EZ) 2020

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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 line 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		
	_		
	За		
	- Oa		
	26		
	3b		
	3c		
	_		
	4a		
	4b		
	4c		
	5a		
	- Gu		
	5b		
	5c		
	50		
	_		
	6		
	_		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
_	_		

Pa	rt IV Supporting Organizations (continued)			J
			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 lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<u>Sac</u>	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
500	ation 6. Type it Supporting Organizations		V	NI -
_			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	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	•		
	<i>y</i>		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
	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 line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
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 governmental entity (see in	struction	l' I	
2	Activities Test. Answer lines 2a and 2b 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 line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	Oh.		
3	these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3h below.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		
~	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.					
	All other Type III non-functionally integrated supporting organizations must	st complete S	Sections 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):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	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 0.015 of line 3 (for greater amount,					
	see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by 0.035.	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
4	Enter greater of line 2 or line 3.	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functional	ally integrated	d Type III supporting orga	nization (see		
	instructions).	-				

Schedule A (Form 990 or 990-EZ) 2020

Fai	t v Type III Non-Functionally integrated 509(a)(3) Supporting Orga	ilizations (continu	<u>iea) </u>	
<u>Secti</u>	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	1	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ıs	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
С	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
ī	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7:				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	2.0000 HOIT 2020				

Schedule A (Form 990 or 990-EZ) 2020

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

ST MARY'S FOOD BANK ALLIANCE

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.

OMB No. 1545-0047

23-7353532

Go to www.irs.gov/Form990 for the latest information. **Employer identification number**

Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 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 Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______ > \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1		\$ 46,874,758. 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		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
3		Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 4	Name, address, and ZIP + 4	Total contributions Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 5	Name, address, and ZIP + 4	Total contributions Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 6	Name, address, and ZIP + 4	Total contributions Person X Payroll Noncash X (Complete Part II for noncash contributions.)

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	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
140.	Hame, address, and Zir + +	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
110.	Humo, address, and Zif T T	\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4	\$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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							
		\$\$6,874,758.	06/30/21				
(a)		(c)					
No. from	(b)	FMV (or estimate)	(d)				
Part I	Description of noncash property given	(See instructions.)	Date received				
	FOOD DONATIONS						
2							
		\$ 7,991,490.	06/30/21				
(2)							
(a) No.	(b)	(c)	(d)				
from	Description of noncash property given	FMV (or estimate)	Date received				
Part I		(See instructions.)					
	FOOD DONATIONS						
3	-	_					
		_ 0 241 540	06/30/21				
	-	\$ 9,241,540.					
(a)							
No.	(b)	(c) FMV (or estimate)	(d)				
from	Description of noncash property given	(See instructions.)	Date received				
Part I	EOOD DOMATIONS	, ,					
4	FOOD DONATIONS	—					
		—					
			06/30/21				
(a)		(c)					
No. from	(b)	FMV (or estimate)	(d)				
Part I	Description of noncash property given	(See instructions.)	Date received				
	FOOD DONATIONS						
5							
		\$6,609,149.	06/30/21				
(a) No.	(b)	(c)	(d)				
from	Description of noncash property given	FMV (or estimate)	Date received				
Part I		(See instructions.)					
	FOOD DONATIONS	_					
6		_					
			06/20/21				
		\$7,708,544.	06/30/21				

ı artı	(see instructions). Ose duplicate copies of Fart	. Il II 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		
7	-		
		\$\$	06/30/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	-		
			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		—	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of or	rganization		Employer identification number
ST MARY'	S FOOD BANK ALLIANCE		23-7353532
Part III	Exclusively religious, charitable, etc., contributi 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 ent charitable, etc., contributions of \$1,000 or	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year ry. 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 gift	
_	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 gift	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 gift	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 gift	
-	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

ST MARY'S FOOD BANK ALLTANCE

Employer identification number

Schedule D (Form 990) 2020

Pai	t I Organizations Maintaining Donor Advised		s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		Complete if the
	organization answered Tes On Form 990, Fait IV, line	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year	(a) Bollet davised failes	(b) I alias alia suloi assealle
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		I seed from the
5	Did the organization inform all donors and donor advisors in w	-	
_	are the organization's property, subject to the organization's ea		
6	Did the organization inform all grantees, donors, and donor ad		-
	for charitable purposes and not for the benefit of the donor or	, , , , ,	
Pai	impermissible private benefit?		Yes No
			, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	`	
	Preservation of land for public use (for example, recreation	· —	of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the forn	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic structure	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired aff	ter 7/25/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by the	e organization during the tax
	year >		
4	Number of states where property subject to conservation ease	ement is located	_
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling o	†
	violations, and enforcement of the conservation easements it $\ensuremath{^{\text{h}}}$	nolds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing co	nservation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enforcing conserv	ation easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expens	e statement and
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial stater	nents that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of		other Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for publi	ic exhibition, education, or research in	furtherance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these ite	ms.
b	If the organization elected, as permitted under FASB ASC 958	, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research in fur	therance of public 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 treas		
	the following amounts required to be reported under FASB AS	•	
а	Revenue included on Form 990, Part VIII, line 1	-	> \$
	Assets included in Form 990, Part X		

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

Pai	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, or	Other S	Similar Ass	sets	continu	ed)	agc —
3	Using the organization's acquisition, accession										
	collection items (check all that apply):										
а	Public exhibition	c	i	Loan or exc	hange progra	ım					
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	ey further th	ne organizatio	n's exemp	t purpose in I	Part XII	l.		
5	During the year, did the organization solicit o	r receive donations	of art, his	storical treas	sures, or othe	r similar as	sets				
	to be sold to raise funds rather than to be ma	aintained as part of t	he orgar	ization's co	llection?				⁄es		No
Pai	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered "	Yes" on Fo	orm 990, Parl	IV, line	9, or		
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodi								_		٦
	on Form 990, Part X?							ш,	es/		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:							
								A	mount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance								_	_	
2a	Did the organization include an amount on Fo					•	?	. Ш Ү	/ es		No
Pai	If "Yes," explain the arrangement in Part XIII.										
ı aı	t V Endowment Funds. Complete i								\ F - · · · · ·		la a a la
		(a) Current year	(b) ⊦	rior year	(c) Two year	s back (d) Three years b	ack (e	e) Four y	ears	раск
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g	j, column (a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С		%									
	The percentages on lines 2a, 2b, and 2c sho	•									
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	t are held ar	nd administer	ed for the	organization		_		
	by:							Г		es	No
	(i) Unrelated organizations							·····	3a(i)	\dashv	
	(ii) Related organizations								3a(ii)	\dashv	
b	If "Yes" on line 3a(ii), are the related organiza	·						L	3b		
4 Dat	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment f	unds.							
Fai	Complete if the organization answered		Dort IV	line 11e C	'aa Farm 000	Dort V lin	o 10				
		(a) Cost or o						1.1	N Daale		
	Description of property	basis (investr			or other (other)	` '	umulated eciation	(0) Book	value	Е
	Land	,	riciti)		,202,865.	асрі	Colation		2 2	0.2	865.
_	Land				,553,341.	11	1,306,756.		12,2		
b	Buildings				, , , , , , , , , , , , , , , , , , , ,	1.	.,300,730.		14,4	±0,	
	Leasehold improvements			11	,152,959.		5,869,391.		Δ ?	83	568.
d	Equipment				559,151.		.,005,051.				151.
	Other		V 1	··· (D) !' · · · · ·					19,2	-	
ıola	. Add lines 1a through 1e. (Column (d) must e	quai Form 990, Part	A, COIUM	<u>ш (В). IIne 1</u>	UC.)			dule D			

	Complete if the erganization answered "Vec"	on Form 000 Dort IV line	11h Soo Form 000 Part V line 1	2
(a) Descri	Complete if the organization answered "Yes" option of security or category (including name of security)	(b) Book value	•	z. st or end-of-year market value
.,		(27 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	(0,000000000000000000000000000000000000	
•	y held equity interests			
3) Other	, riola equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
	I Investments - Program Related.			
	_	on Form 000 Port IV line	11a Saa Farm 000 Dort V line 1	2
	Complete if the organization answered "Yes" (a) Description of investment	(b) Book value		st or end-of-year market value
(4)	(a) Becompact of investment	(b) Book value	(e) meaned or valuation: ee	or or or your market value
(1) (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(0)				
(8)				
(9) [otal . (Col.	(b) must equal Form 990, Part X, col. (B) line 13.)			
(9) [otal . (Col.	Other Assets. Complete if the organization answered "Yes" (11d. See Form 990, Part X, line 1	
(9) [otal . (Col.	Other Assets. Complete if the organization answered "Yes" (on Form 990, Part IV, line Description	11d. See Form 990, Part X, line 1	5. (b) Book value
(9) Fotal. (Col.	Other Assets. Complete if the organization answered "Yes" (11d. See Form 990, Part X, line 1	
(9) Fotal. (Col. Part IX	Other Assets. Complete if the organization answered "Yes" (11d. See Form 990, Part X, line 1	
(9) Fotal. (Col. Part IX	Other Assets. Complete if the organization answered "Yes" (11d. See Form 990, Part X, line 1	
(9) Fotal. (Col. Part IX (1) (2)	Other Assets. Complete if the organization answered "Yes" (11d. See Form 990, Part X, line 1	
(9) Total. (Col. Part IX (1) (2) (3)	Other Assets. Complete if the organization answered "Yes" (11d. See Form 990, Part X, line 1	
(9) Fotal. (Col. Part IX (1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" (11d. See Form 990, Part X, line 1	
(9) Fotal. (Col. Part IX (1) (2) (3) (4) (5)	Other Assets. Complete if the organization answered "Yes" (11d. See Form 990, Part X, line 1	
(9) Fotal. (Col. Part IX (1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" (11d. See Form 990, Part X, line 1	
(9) Fotal. (Col. Part IX (1) (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" (11d. See Form 990, Part X, line 1	
(9) Fotal. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Col.	Other Assets. Complete if the organization answered "Yes" (Description		
(9) Fotal. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" (a) (a) umn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a)	Description 15.)		(b) Book value
(9) Total. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. Part X	Other Assets. Complete if the organization answered "Yes" (a) (a) (a) umn (b) must equal Form 990, Part X, col. (B) line Other Liabilities.	Description 15.)		(b) Book value
(9) Total. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. Part X	Other Assets. Complete if the organization answered "Yes" (a) (a) umn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a)	Description 15.)		(b) Book value
(9) Fotal. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Col. Part X 1. (1) Fe	Other Assets. Complete if the organization answered "Yes" (a) (a) wmn (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description 15.)		(b) Book value
(9) Fotal. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Col. Part X I. (1) Fe	Other Assets. Complete if the organization answered "Yes" (a) (a) (a) (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability deral income taxes	Description 15.)		(b) Book value
(9) Total. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. Part X I. (1) Fee (2) CH	Other Assets. Complete if the organization answered "Yes" (a) (a) (a) (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability deral income taxes	Description 15.)		(b) Book value
(9) Fotal. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Col. Part X 1. (1) Fe (2) CH (3)	Other Assets. Complete if the organization answered "Yes" (a) (a) (a) (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability deral income taxes	Description 15.)		(b) Book value
(9) Fotal. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Col. Part X I. (1) Fe (2) CH (3) (4)	Other Assets. Complete if the organization answered "Yes" (a) (a) (a) (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability deral income taxes	Description 15.)		(b) Book value
(9) Total. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. Part X I. (1) Fe (2) CH (3) (4) (5)	Other Assets. Complete if the organization answered "Yes" (a) (a) (a) (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability deral income taxes	Description 15.)		(b) Book value
(9) Total. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. Part X I. (1) Fee (2) CH (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" (a) (a) (a) (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability deral income taxes	Description 15.)		(b) Book value
(9) Total. (Col. Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Col. Part X I. (1) Fe (2) CH (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" (a) (a) (a) (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability deral income taxes	Description 15.)		(b) Book value

032053 12-01-20

Schedule D (Form 990) 2020

Par	t XI Reconciliation of Revenue per Audited Financial Stateme		Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a			270 005 507
1				1	278,895,507.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ء ا	_17 260		
a	Net unrealized gains (losses) on investments		-17,260. 505,740.		
b	Donated services and use of facilities		303,740.		
c	Recoveries of prior year grants Other (Describe in Bort VIII.)		39,771,573.		
d	Other (Describe in Part XIII.) Add lines 2a through 2d			2e	40,260,053.
е 3	•			3	238,635,454.
4	Subtract line 2e from line 1 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	32,787.		
b	Other (Describe in Part XIII.)		31,700,000.		
	Add lines 4a and 4b			4c	31,732,787.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)			5	270,368,241.
Pai	t XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per P		, ,
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total expenses and losses per audited financial statements			1	238,009,961.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	505,740.		
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)		96,320.		
е	Add lines 2a through 2d			2e	602,060.
3	Subtract line 2e from line 1			3	237,407,901.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	32,787.		
b	Other (Describe in Part XIII.)	4b	31,700,000.		
С	Add lines 4a and 4b			4c	31,732,787.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	269,140,688.
Pai	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	•		; Part X,	line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	ditional inforn	nation.		
D3.D#	V LIND 2				
PART	X, LINE 2:				
сm	MARY'S QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 5	:01/C\/3\			
51.	MARI S QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION S	01(0)(3)			
OF T	HE INTERNAL REVENUE CODE (THE "CODE") AND, ACCORDINGLY, THERE	T TO NO			
<u> </u>	HE INTERNAL REVENUE CODE (THE CODE) AND, ACCORDINGLE, THERE	15 NO			
PROV	ISION FOR INCOME TAXES FOR THIS ORGANIZATION. IN ADDITION, TH	IE.			
	TELON TON THOUSE HAND TON THIS ONCE TENTON, IN INSULTION, IT				
ORGA	NIZATION QUALIFIES FOR THE CHARITABLE CONTRIBUTION DEDUCTION	UNDER			
SECT	TION 170 OF THE CODE AND HAS BEEN CLASSIFIED AS AN ORGANIZATIO	N THAT IS			
A NO	T PRIVATE FOUNDATION. INCOME DETERMINED TO BE UNRELATED BUSIN	IESS			
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,			
2021	, MANAGEMENT BELIEVES ST. MARY'S DID NOT HAVE ANY UNCERTAIN T	'AX			

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

2020

Open to Public Inspection

Name of the organization							ntification number
	FOOD BANK ALLIANCE					23-735353	
Part I Fundraising Activities required to complete this par	 Complete if the organization answer t. 	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
Indicate whether the organization rais	sed funds through any of the following with a solicitar of the following with a solicitar or oral agreement with any individual cart VII) or entity in connection with providuals or entities (fundraisers) pursuant	tion of tion of fundra (includ	non-g gover aising ding of onal fo	overnment grants nment grants events fficers, directors, trus undraising services?	,	X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	tò (d	Amount paid or retained by) fundraiser ted 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	10,776,784.		1,587,320.	9,189,464.
KELLY HART AND ASSOCIATES - 2831 N 31ST AVE, PHOENIX, AZ	FUNDRAISING/GRANT WRITING		х	726,124.		57,000.	669,124.
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit		▶ utions	11,502,908.	it is e	1,644,320. exempt from req	9 , 858 , 588 . gistration
AZ							

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

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2020

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
						(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
Revenue						
Ž L	1	Gross receipts				
	2	Less: Contributions				
_	3_	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
SHISES	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
_ [8	Entertainment				
	9	Other direct expenses				
-	10	Direct expense summary. Add lines 4 through				
_	11	Net income summary. Subtract line 10 from li				
ar	t I		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
_		\$15,000 on Form 990-EZ, line 6a.	ı	1	T	
- 1				(b) Pull tabs/instant		
			(a) Bingo	bingo/progressive bingo	(c) Other gaming	
שחושאם	1	Gross revenue	(a) Bingo		(c) Other gaming	
	<u>1</u>	Gross revenue	(a) Bingo		(c) Other gaming	
	2	Cash prizes	(a) Bingo		(c) Other gaming	
			(a) Bingo		(c) Other gaming	
	2	Cash prizes			(c) Other gaming	
Direct Expenses	2 3 4	Cash prizes Noncash prizes			(c) Other gaming	(d) Total gaming (add col. (a) through col. (c
Direct Expenses	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses		bingo/progressive bingo	(c) Other gaming Yes%	col. (a) through col. (d
Ulrect Expenses	2 3 4 <u>5</u>	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes %	bingo/progressive bingo Yes% No	☐ Yes% ☐ No	col. (a) through col. (d
Direct Expenses	2 3 4 5 7	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	Yes % No 5 in column (d)	yes%	☐ Yes% ☐ No	col. (a) through col. (d
Direct Expenses	2 3 4 5 7	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes % No 5 in column (d)	yes%	☐ Yes% ☐ No	col. (a) through col. (d
Direct Expenses	2 3 4 5 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	Yes% No 1.5 in column (d) from line 1, column (d)	Yes% No	☐ Yes% ☐ No	col. (a) through col. (a
Direct Expenses	2 3 4 5 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 er the state(s) in which the organization condu	Yes % No 15 in column (d) from line 1, column (d) acts gaming activities:	Yes% No	Yes% No	col. (a) through col. (a
a Direct Expenses	2 3 4 5 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 er the state(s) in which the organization conducte organization licensed to conduct gaming according to the conduct gaming to the conduct gaming to the conduct gaming to the conduct gaming to the conduct	Yes% No 15 in column (d) from line 1, column (d) acts gaming activities:ctivities in each of these	Yes% No	Yes% No	col. (a) through col. (d
a Direct Expenses	2 3 4 5 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 er the state(s) in which the organization condu	Yes% No 15 in column (d) from line 1, column (d) acts gaming activities:ctivities in each of these	Yes% No	Yes% No	col. (a) through col. (d
a Direct Expenses	2 3 4 5 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 er the state(s) in which the organization conducte organization licensed to conduct gaming according to the conduct gaming to the conduct gaming to the conduct gaming to the conduct gaming to the conduct	Yes% No 15 in column (d) from line 1, column (d) acts gaming activities:ctivities in each of these	Yes% No	Yes% No	col. (a) through col. (d
d a d	2 3 4 5 6 7 8 =nt s ti f "!	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 er the state(s) in which the organization conducte organization licensed to conduct gaming according to the conduct gaming to the conduct gaming to the conduct gaming to the conduct gaming to the conduct	Yes % No 15 in column (d) from line 1, column (d) acts gaming activities: ctivities in each of these	Yes% No states?	Yes% No	col. (a) through col. (d
a b a	2 3 4 5 6 7 8 =nt s ti f "!	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 er the state(s) in which the organization conduct organization licensed to conduct gaming act No," explain: Te any of the organization's gaming licenses recommended.	Yes % No 15 in column (d) from line 1, column (d) acts gaming activities: ctivities in each of these	Yes% No states?	Yes% No	col. (a) through col. (d

Sch	edule G (Form 990 or 990-EZ) 2020 ST MARY'S FOOD BANK ALLIANCE	23-7353532	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
	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	%
	o An outside facility		——————————————————————————————————————
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
17	the the hame and address of the person who prepares the organization's gaming/special events books and records.		
	Name ►		
	Name		
	Address ►		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
ŀ	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	t	
	of gaming revenue retained by the third party \$\bigs\\$		
	Figure 1 is a second se		
	· · · · · · · · · · · · · · · · · · ·		
	Name ▶		
	Address >		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
á	s the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ie	
	organization's own exempt activities during the tax year > \$		
Pa	IT IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	d Part III, lines 9,	9b, 10b,
	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:		
(I)	NAME OF FUNDRAISER: RKD ALPHA DOG MARKETING		
(I)	ADDRESS OF FUNDRAISER: 8001 S 13TH ST, LINCOLN, NE 68512		
(I)	NAME OF FUNDRAISER: KELLY HART AND ASSOCIATES		
(I)	ADDRESS OF FUNDRAISER: 2831 N 31ST AVE, PHOENIX, AZ 85009		
PAR	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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

ST MARY'S FOOI	BANK ALLIANO	CE					2	3-7353532
Part I General Information on Grants a	nd Assistance							
1 Does the organization maintain records t	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?						Х	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	omplete if the org	ganization answered "	Yes" on Form 990, Part	IV, line 21, for a	any
recipient that received more than \$	5,000. Part II can	be duplicated if addit	ional space is need	ed.				
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 noncash assistance	, , ,	ose of grant ssistance
					FEEDING			
AAAA ALCOHOL AND ADDICTION					AMERICA			
316 N 11TH WAY					VALUATION			
PHOENIX, AZ 85006	86-0267826	501(C)(3)	0.	134,785.	REPORT	FOOD	COMMUNITY F	OOD ASSISTANCE
					FEEDING			
AAAA ALCOHOL AND ADDICTION					AMERICA			
4430 N 23RD AVE					VALUATION			
PHOENIX, AZ 85015	86-0267826	501(C)(3)	0.	181,313.	REPORT	FOOD	COMMUNITY F	OOD ASSISTANCE
					FEEDING			
AGUA FRIA FOOD AND CLOTHING BANK					AMERICA			
(AVONDALE) - 405 E HARRISON -					VALUATION			
AVONDALE, AZ 85323	56-2515365	501(C)(3)	0.	1,404,063.		FOOD	COMMUNITY F	OOD 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.	1,543,988.	+	FOOD	COMMUNITY F	OOD ASSISTANCE
					FEEDING			
AGUA FRIA FOOD AND CLOTHING BANK					AMERICA			
(TONOPAH) - 36827 W INDIAN SCHOOL					VALUATION			
RD - TONOPAH, AZ 85354	56-2515365	501(C)(3)	0.	46,625.		FOOD	COMMUNITY F	OOD ASSISTANCE
					FEEDING			
AIM RIGHT MINISTRIES					AMERICA			
1013 N 13TH ST					VALUATION			
PHOENIX, AZ 85006	86-0821440		0.	216,199.	REPORT	FOOD	COMMUNITY FO	OOD ASSISTANCE
2 Enter total number of section 501(c)(3) ar	•	•	e line 1 table				> _	356.
3 Enter total number of other organizations							>	
LHA For Paperwork Reduction Act Notice,	see the Instructi	ons for Form 990.					Schedule I	(Form 990) 2020

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 if applicable valuation or assistance organization or government cash grant non-cash non-cash assistance (book, FMV, assistance appraisal, other) FEEDING ALHAMBRA ESD 68 FAMILY RESOURCE AMERICA CENTER - 4432 W MARYLAND AVE -VALUATION 86-6000510 501(C)(3) 40,915, REPORT GLENDALE, AZ 85301 0. FOOD COMMUNITY FOOD ASSISTANCE ALL FAITH COMM SERVICES AT FEEDING LIGHTHOUSE FELLOWSHIP - 3015 N AMERICA 195TH AVE - LITCHFIELD PARK AZ VALUATION 85340 54-2160931 501(C)(3) 0 181,713, 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. 2,656,695, 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) 0 168,360, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA ANDRE HOUSE OF AZ INC VALUATION 213 S 11TH AVE 86-0717841 501(C)(3) 130,307, REPORT PHOENIX, AZ 85007 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING APOSTOLIC ASSEMBLY OF THE FAITH IN AMERICA CHRIST JESUS - 2526 N 36TH AVE -VALUATION 33,066, REPORT PHOENIX AZ 85009 95-6087955 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING ARIZONA BAPTIST CHILDREN'S AMERICA SERVICES (TEFAP PA) - 2632 W VALUATION 34,564. REPORT AUGUSTA AVE - PHOENIX AZ 85051 86-6053028 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING ARIZONA CALL A TEEN YOUTH AMERICA VALUATION RESOURCES INC - 649 N 6TH AVE -14,290. REPORT PHOENIX, AZ 85003 95-3239788 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING ARIZONA ODD FELLOW (REBEKAH) AMERICA VALUATION (CSFP) - 222 E INDIANOLA AVE -68,016. REPORT PHOENIX, AZ 85012 86-0217129 501(C)(3) COMMUNITY FOOD ASSISTANCE 0. FOOD

ST MARY'S FOOD BANK ALLIANCE

Schedule I (Form 990)

Schedule I (Form 990)

Page 1

(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	(b) Liiv	if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
					FEEDING		
ARIZONA RETIREMENT HOME OF					AMERICA		
SCOTTSDALE - 7310 E PALM LN -					VALUATION		
SCOTTSDALE, AZ 85257	86-0711505	501(C)(3)	0.	18,169.	REPORT	FOOD	COMMUNITY FOOD ASSISTANC
					FEEDING		
ASH FORK FOURSQUARE CHURCH PATHWAY					AMERICA		
CHAPEL - 2400 N DOUBLE A RANCH RD					VALUATION		
- ASH FORK, AZ 86320	86-0938376	501(C)(3)	0.	112,321.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ASTER AGENCY					AMERICA		
7550 E ADOBE ST					VALUATION		
MESA, AZ 85207	94-2596075	501(C)(3)	0.	7,897.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
BALSZ ELEM SCHOOL DISTRICT					AMERICA		
BRUNSON LEE SCHOOL - 1350 N 48TH					VALUATION		
ST - PHOENIX, AZ 85008	86-6000495	501(C)(3)	0.	102,026.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
BANNER HEALTH					AMERICA		
11250 N 107TH AVE					VALUATION		
SUN CITY, AZ 85351	94-2745413	501(C)(3)	0.	1,699,209.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
BEAVER CREEK SCHOOL					AMERICA		
4810 E BEAVER CREEK RD					VALUATION		
RIMROCK, AZ 86335		GOVERNMENT	0.	242,184.	REPORT	FOOD	COMMUNITY FOOD ASSISTANC
					FEEDING		
BLACK FAMILY CHILD SERVICES					AMERICA		
1522 E SOUTHERN AVE STE 1					VALUATION		
PHOENIX, AZ 85040	86-0480412	501(C)(3)	0.	281,883.	REPORT	FOOD	COMMUNITY FOOD ASSISTANC
					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.	163,394.	REPORT	FOOD	COMMUNITY FOOD ASSISTANC
					FEEDING		
BODAWAY GAP CHAPTER					AMERICA		
HIGHWAY 89 MP 498 AT IR N 20					VALUATION		
CAMERON, AZ 86020	86-0913511	501(C)(3)	0.	21,093.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Page 1

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	art 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		
BREAD OF LIFE MISSIONS CAMP VERDE					AMERICA		
1575 S SULLIVAN LN 28					VALUATION		
CAMP VERDE, AZ 86322	86-0814302	501(C)(3)	0.	1,745,529.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CALVARY UNITED METHODIST CHURCH					AMERICA		
7949 W INDIAN SCHOOL RD					VALUATION		
PHOENIX, AZ 85033	86-0193155	501(C)(3)	0.	107,929.	, REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CAMERON ASSEMBLY OF GOD					AMERICA		
1MI SW OF CAMERON TRADING POST					VALUATION		
CAMERON, AZ 86020	86-0441521	501(C)(3)	0.	173,515.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
·					FEEDING		
CARE AND SHARE FOOD BANK					AMERICA		
2605 PREAMBLE POINT					VALUATION		
COLORADO SPRINGS, CO 80915	84-0731930	501(C)(3)	0.	145,308.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
•				,	FEEDING		
CARING HANDS OF PINAL COUNTY					AMERICA		
702 E COTTONWOOD					VALUATION		
CASA GRANDE, AZ 85122	86-6000556	501(C)(3)	0.	120,671.		FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
CARTWRIGHT SD WELCOME CENTER					AMERICA		
4308 N 51ST AVE STE 103					VALUATION		
PHOENIX, AZ 85031	86-6000517	501(C)(3)	0.	259,308.		FOOD	COMMUNITY FOOD ASSISTANCE
industri, in datas	30 0000317	501(0)(0)	•	233,300.	FEEDING	1002	COLUMNITI 1002 INSTITUTOS
CASA GRANDE FOOD BANK					AMERICA		
235 EAST 4TH STREET					VALUATION		
CASA GRANDE, AZ 85122	94-2525394	501/0\/3\	0.	33 520	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
CASA GRANDE, AZ 03122	94-2323394	501(0)(3)	1	33,329.	FEEDING	FOOD	COMMONITI FOOD ASSISTANCE
CATHOLIC CHARITIES AT AVONDALE					AMERICA		
BAPTIST CHURCH - 1001 N CENTRAL	06 0222000	E01/G\/3\		0 221	VALUATION	ECOD	COMMINITAL FOOD AGGIGMANGE
AVE - AVONDALE, AZ 85323	86-0223999	DOT(C)(3)	0.	9,221.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
CAMUOLIC CUARTETES COLOR CORNES					FEEDING		
CATHOLIC CHARITIES COMM SERVICES					AMERICA		
OF AZ - 1594 N OATMAN RD -	0.5 0	504 (5) (2)	_		VALUATION		
BULLHEAD CITY, AZ 86442	86-0223999	pu1(C)(3)	0.	37,291.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	1 ago 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		
CATHOLIC CHARITIES COMM SVCS					AMERICA		
(ROSEWOOD COURT) - 1825 W NORTHERN					VALUATION		
AVE - PHOENIX, AZ 85021	86-0223999	501(C)(3)	0.	201,421.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CATHOLIC CHARITIES COMMUNITY					AMERICA		
SERVICES OF ARIZONA - 6738 N 45TH					VALUATION		
AVE - GLENDALE, AZ 85301	86-0223999	501(C)(3)	0.	128,837.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CENTRAL CHRISTIAN CHURCH (KINGMAN)					AMERICA		
112 N 4TH STREET					VALUATION		
KINGMAN, AZ 86401	88-0118790	501(C)(3)	0.	99,365.	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	GOVERNMENT	0.	78,125.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
CHILDHELP INC					AMERICA		
2120 N CENTRAL AVE SUITE 130					VALUATION		
PHOENIX, AZ 85004	95-2884608	501(C)(3)	0.	8.352.	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.	533,525.		FOOD	COMMUNITY FOOD ASSISTANCE
iivonziiiz, iiz ooozo	00 0031032	501(0)(5)		333,323.	FEEDING	1002	
CHRIST EVANGELICAL LUTHERAN CHURCH					AMERICA		
918 S LITCHFIELD					VALUATION		
GOODYEAR, AZ 85338	86-0476656	501/0\/3\	0.	115,779.		FOOD	COMMUNITY FOOD ASSISTANCE
GOODIEAR, AZ 03330	00-04/0030	501(0)(3)	1	113,773.	FEEDING	FOOD	COMMONTIT FOOD ASSISTANCE
CHRIST LUTHERAN CHURCH					AMERICA		
3901 E INDIAN SCHOOL RD	06 0124466	E01/G\/2\		F4F 1F4	VALUATION	TOOD	GOMESTICAL TOOL AGGIGENING
PHOENIX, AZ 85018	86-0134466	DOT(C)(3)	0.	545,154.		FOOD	COMMUNITY FOOD ASSISTANCE
GUDIAM MUD WIAMAD TUMWIDIN GUTT					FEEDING		
CHRIST THE VICTOR LUTHERAN CHURCH					AMERICA		
330 N PINAL ST	48 000-05-	504 (5) (2)	_		VALUATION		
FLORENCE, AZ 85132	47-0987895	pu1(C)(3)	0.	54,410.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	ırt II.)	1 ago 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		
CHURCH FOR THE NATIONS					AMERICA		
6225 N CENTRAL AVE					VALUATION		
PHOENIX, AZ 85012	75-3114849	501(C)(3)	0.	188,418.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CIRCLE OF PAGE					AMERICA		
801 AQUA AVE					VALUATION		
PAGE, AZ 86040	30-0170553	501(C)(3)	0.	732,914.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CIRCLE OF PAGE					AMERICA		
100 E WOODHILL RD					VALUATION		
PAGE, AZ 86040	30-0170553	501(C)(3)	0.	9,708.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CIRCLE THE CITY					AMERICA		
333 W INDIAN SCHOOL RD					VALUATION		
PHOENIX, AZ 85013	26-2420730	501(C)(3)	0.	170,326.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CIRCLE THE CITY					AMERICA		
210 S 12TH AVE					VALUATION		
PHOENIX, AZ 85007	26-2420730	501(C)(3)	0.	106,643.	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.	2,641,707.		FOOD	COMMUNITY FOOD ASSISTANCE
,				, , -	FEEDING		
CITY OF AVONDALE (MP)					AMERICA		
995 E RILEY DR					VALUATION		
AVONDALE, AZ 85323	86-6000233	GOVERNMENT	0.	247,515.		FOOD	COMMUNITY FOOD ASSISTANCE
,					FEEDING		
CITY OF PHOENIX HOUSING SUPPORTIVE					AMERICA		
SERVICES PROG - 1725 E MCKINLEY ST					VALUATION		
- PHOENIX, AZ 85006	86-6000256	COVERNMENT	0.	165,031.		FOOD	COMMUNITY FOOD ASSISTANCE
THOMATH, HE 05000	00 0000250	OOVER THE TOTAL OF		100,001.	FEEDING	1002	COLUMN TO THE PROPERTY OF THE
CITY OF SURPRISE RESOURCE CENTER					AMERICA		
12425 W BELL RD STE 124					VALUATION		
SURPRISE, AZ 85388		GOVERNMENT	0.	19,666.		FOOD	COMMUNITY FOOD ASSISTANCE
DOMINISE, AL 03300		GO A EVINLEN I	1 0.	13,000.	KEFOKI	E 00D	PORTIONITI FOOD ASSISTANCE

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	ırt II.)	1 ugo 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		
CITY OF TOLLESON CAP (TEFAP PA)					AMERICA		
9555 W VAN BUREN					VALUATION		
TOLLESON, AZ 85353	86-6000264	GOVERNMENT	0.	252,949.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CIVITAN FOUNDATION INC					AMERICA		
12635 N 42ND ST					VALUATION		
PHOENIX, AZ 85032	23-7036797	501(C)(3)	0.	44,516.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
COLORADO RIVER FOOD BANK					AMERICA		
590 HANCOCK RD					VALUATION		
BULLHEAD CITY, AZ 86442	88-0345703	GOVERNMENT	0.	1,244,602.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
COMMUNITY FB OF EASTERN OKLAHOMA					AMERICA		
1304 N KENOSHA AVE					VALUATION		
TULSA, OK 74106	73-1184980	501(C)(3)	0.	68,000.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
COMMUNITY FOOD BANK (NOGALES)					AMERICA		
2636 N DONNA AVE					VALUATION		
NOGALES, AZ 85621	51-0192519	501(C)(3)	0.	648,978.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
·					FEEDING		
COMMUNITY FOOD BANK (TUCSON)					AMERICA		
3003 S COUNTRY CLUB RD					VALUATION		
TUCSON, AZ 85713	51-0192519	501(C)(3)	0.	1,819,733.		FOOD	COMMUNITY FOOD ASSISTANCE
•				, , -	FEEDING		
COMMUNITY HOPE CENTERS (GR)					AMERICA		
14185 N 83RD AVE					VALUATION		
PEORIA, AZ 85381	27-0957157	501(C)(3)	0.	377,869.		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.	251,268.		FOOD	COMMUNITY FOOD ASSISTANCE
	22 2410242		ļ	231,200.	FEEDING	1 202	TOOL MODIFIES
CONCERNED CITIZENS FOR COMMUNITY					AMERICA		
HEALTH - 1700 N GRANITE REEF RD -					VALUATION		
SCOTTSDALE, AZ 85257	95-3416943	501(C)(3)	0.	129,787.		FOOD	COMMUNITY FOOD ASSISTANCE
SCOTISDADE, AZ 03Z3/	33-3410343	Por(c)(3)	1 0.	143,101.	KEFOKI	E 00D	PORTIONITI FOOD ASSISTANCE

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	rage i
(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		
CONGRESS COMMUNITY CHURCH INC					AMERICA		
27400 SANTA FE					VALUATION		
CONGRESS, AZ 85332	86-0558310	501(C)(3)	0.	204,131.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CONGRESS SENIOR CENTER					AMERICA		
26733 SANTA FE RD					VALUATION		
CONGRESS, AZ 85332	94-2882535	501(C)(3)	0.	201,240.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
COP HOUSING DEPT (MARYVALE PKWY)					AMERICA		
4545 N MARYVALE PARKWAY					VALUATION		
PHOENIX, AZ 85031	86-6000256	501(C)(3)	0.	26,704.	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.	258,446.	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.	18,974.	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.	53,088.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
CORNERSTONE MISSION PROJECT					AMERICA		
3049 SYCAMORE ST					VALUATION		
KINGMAN, AZ 86409	86-0960036	501(C)(3)	0.	304,698.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
COVE CHAPTER					AMERICA		
IR 33					VALUATION		
RED VALLEY, AZ 86544		GOVERNMENT	0.	226,156.		FOOD	COMMUNITY FOOD ASSISTANCE
, 55511			· ·	220,130.	FEEDING		
CPLC (CHICANO POR LA CAUSA)					AMERICA		
6850 W INDIAN SCHOOL RD					VALUATION		
PHOENIX, AZ 85033	86-0227210	501 (C) (3)	0.	412,951.		FOOD	COMMUNITY FOOD ASSISTANCE
INCHRIA, RE 03033	00 022/210	DOT (C) (3)	1 0.	=12,331.	KUI OKI	F 00D	COLLIGITITI FOOD ASSISTANCE

Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	nedule 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		
CPLC (CHICANOS POR LA CAUSA)					AMERICA		
CONFIDENTIAL					VALUATION		
PHOENIX, AZ 85009	86-0227210	501(C)(3)	0.	437,429.		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.	126,444.	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.	252,365.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CREIGHTON COMMUNITY FOUNDATION					AMERICA		
501 N 36TH ST					VALUATION		
PHOENIX, AZ 85008	46-2275877	501(C)(3)	0.	381,883.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CREIGHTON FAMILY RESOURCE CENTER					AMERICA		
2052 N 36TH ST					VALUATION		
PHOENIX, AZ 85008	86-6000474	501(C)(3)	0.	49,021.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CREIGHTON SCHOOLS CHILD NUTRITION					AMERICA		
AND WELLNESS - 2801 E MCDOWELL RD					VALUATION		
- PHOENIX, AZ 85008	86-6000474	501(C)(3)	0.	14,229.	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.	173,046.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
CUSD CHINLE COMMUNITY CTR					AMERICA		
US HWY 191 AND S OF IR 7					VALUATION		
CHINLE, AZ 86503	86-6006232	501(C)(3)	0.	104,754.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
-				,	FEEDING		
CUSD MANY FARMS PUBLIC SCHL					AMERICA		
US 191 AND S IR59					VALUATION		
MANY FARMS, AZ 86538	86-6006232	501(C)(3)	0.	6 554.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	ırt II.)	T ugo 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		
CUSD TSAILE PUBLIC SCHL					AMERICA		
HWY 12 AND HWY 64					VALUATION		
TSAILE, AZ 86556	86-6006232	501(C)(3)	0.	49,640.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
DAMION GOSA MEMORIAL FOUNDATION					AMERICA		
INC - 2102 E ALTA VISTA RD -					VALUATION		
PHOENIX, AZ 85042	45-5441868	501(C)(3)	0.	276,209.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
DEER VALLEY UNIFIED SCHOOL					AMERICA		
DISTRICT - 18440 N 15TH AVE -					VALUATION		
PHOENIX, AZ 85023	86-6004178	501(C)(3)	0.	230,024.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
DESERT CHRISTIAN FELLOWSHIP					AMERICA		
1445 W NORTHERN AVE					VALUATION		
PHOENIX, AZ 85021	86-0731548	501(C)(3)	0.	309,996.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
DESERT MISSION ANGLICAN CHURCH INC					AMERICA		
234 E ALICE AVE					VALUATION		
PHOENIX, AZ 85020	51-0546916	501(C)(3)	0.	9 656.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
		(-,(-,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FEEDING		
DESERT MISSION INC					AMERICA		
9229 N 4TH ST					VALUATION		
PHOENIX, AZ 85020	88-0096941	501 (C) (3)	0.	4,361,827 .		FOOD	COMMUNITY FOOD ASSISTANCE
INGERTA, NZ 030Z0	00 0030341	501(0)(3)	· · ·	4,301,027.	FEEDING	1002	COMMONITY TOOD MEDITIMACE
DILCON COMMUNITY SCHOOL					AMERICA		
5 MILES E OF STATE ROUTE 87					VALUATION		
DILCON, AZ 86047	86-0955436	COMEDIMENT	0.	102,569.		FOOD	COMMUNITY FOOD ASSISTANCE
DIECON, AZ 80047	00-0333430	GOVERNMENT	0.	102,509.		FOOD	COMMONITY FOOD ASSISTANCE
DDEAN GIMY GUIDIGMIN GGUGGI					FEEDING		
DREAM CITY CHRISTIAN SCHOOL					AMERICA		
21000 N 75TH AVE	20 4425242	E01/G)/3\		202 442	VALUATION	TOOD	GOINGTHU HOCK LOCKET
GLENDALE, AZ 85308	20-4405949	DUI(C)(3)	0.	209,413.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
DYSART COMMUNITY CENTER					AMERICA		
14414 N EL MIRAGE RD					VALUATION		
EL MIRAGE, AZ 85335	86-6031134	GOVERNMENT	0.	8,163.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	raye i
(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		
DYSART UNIFIED SCHOOL DISTRICT					AMERICA		
7300 N DYSART RD					VALUATION		
GLENDALE, AZ 85307	86-6000520	GOVERNMENT	0.	5,083.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
EL PASOANS FIGHTING HUNGER					AMERICA		
9541 PLAZA CIRCLE					VALUATION		
EL PASO, TX 79927	45-2893839	501(C)(3)	0.	3,501,210.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
EPWORTH UNITED METHODIST CHURCH					AMERICA		
4802 N 59TH AVE					VALUATION		
PHOENIX, AZ 85033	86-6007719	501(C)(3)	0.	234,254.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
EXTENDED HANDS FOOD BANK					AMERICA		
16548 E LASER DR SUITE 6					VALUATION		
FOUNTAIN HILLS, AZ 85268	20-0873646	501(C)(3)	0.	86,489.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
EZRAS CHOLIM OF ARIZONA					AMERICA		
7118 N 7TH ST					VALUATION		
PHOENIX, AZ 85020	47-5645369	501(C)(3)	0.	414,707.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
FIBCO FAMILY SVCS INC					AMERICA		
1141 E JEFFERSON ST					VALUATION		
PHOENIX, AZ 85034	86-0434933	501(C)(3)	0.	65,440.		FOOD	COMMUNITY FOOD ASSISTANCE
Industry, III does I	00 0101333	301(0)(3)	**	03,110.	FEEDING	1002	
FIRE AND WATER INTERNATIONAL					AMERICA		
CHURCH - 1937 E DIAMOND ST -					VALUATION		
PHOENIX, AZ 85006	86-0928650	501/0\/3\	0.	6 608	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
PHOENIX, AZ 03000	00-0920030	501(0)(3)	· · ·	0,000.	FEEDING	FOOD	COMMONITI FOOD ASSISTANCE
FIRE HOUSE MINISTRIES					AMERICA		
809 BUSH ST	02 2554000	E01 (G) (2)		1 045 005	VALUATION	7007	CONTRACTOR DOOR DESCRIPTION
NEEDLES, CA 92363	83-3754020	DOT(C)(2)	0.	1,045,297.		FOOD	COMMUNITY FOOD ASSISTANCE
TIRGE DIRECT CHURCH OF CITY					FEEDING		
FIRST BAPTIST CHURCH OF CASA					AMERICA		
GRANDE - 222 E 8TH STREET - CASA					VALUATION	L	
GRANDE, AZ 85122	86-0507565	por(G)(3)	0.	73,648.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	art II.)	raye i
(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		
FIRST BAPTIST CHURCH OF STANFIELD					AMERICA		
615 S STANFIELD RD					VALUATION		
STANFIELD, AZ 85172	82-5336682	501(C)(3)	0.	297,968.	+	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
FIRST UNITED METHODIST CHURCH OF					AMERICA		
GLENDALE - 7102 N 58TH DR -					VALUATION		
GLENDALE, AZ 85301	86-6000614	501(C)(3)	0.	30,435.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
FLAGSTAFF FAMILY FOOD CTR					AMERICA		
2625 N KING ST					VALUATION		
FLAGSTAFF, AZ 86004	86-0754044	501(C)(3)	0.	26,808.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
FLAGSTAFF FAMILY FOOD CTR					AMERICA		
3805 E HUNTINGTON DR					VALUATION		
FLAGSTAFF, AZ 86004	86-0754044	501(C)(3)	0.	9,675,680.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
FLAGSTAFF FAMILY FOOD CTR					AMERICA		
3805 E HUNTINGTON DR					VALUATION		
FLAGSTAFF, AZ 86004	86-0754044	501(C)(3)	0.	1,639,664.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
FOOD FOR FAMILIES BULLHEAD CITY					AMERICA		
FOOD BANK INC - 590 HANCOCK RD -					VALUATION		
BULLHEAD CITY, AZ 86442	47-4838008	501(C)(3)	0.	3,546,543.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
FOOD FOR FAMILIES GOLDEN VALLEY					AMERICA		
590 HANCOCK RD					VALUATION		
BULLHEAD CITY, AZ 86442	86-0693439	501(C)(3)	0.	307,954.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
·					FEEDING		
FOOTHILLS FOOD BANK					AMERICA		
6038 E HIDDEN VALLEY DR					VALUATION		
CAVE CREEK, AZ 85331	86-0619725	501(C)(3)	0.	2,268,755.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
•				, , , , ,	FEEDING		
FOOTHILLS FOOD BANK					AMERICA		
34550 S OLD BLACK CANYON HWY					VALUATION		
BLACK CANYON CITY, AZ 85324	86-0619725	501(C)(3)	0.	14,834.		FOOD	COMMUNITY FOOD ASSISTANCE

ST MARY'S FOOD BANK ALLIANCE

(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		
FOR MARICOPA					AMERICA		
19428 N MARICOPA RD					VALUATION		
MARICOPA, AZ 85139	26-0527262	501(C)(3)	0.	9,041.	REPORT	FOOD	COMMUNITY FOOD ASSISTANC
					FEEDING		
FOUNDATION FOR SENIOR LIVING					AMERICA		
8335 W JEFFERSON					VALUATION		
PEORIA, AZ 85345	86-0298945	501(C)(3)	0.	450,669.	REPORT	FOOD	COMMUNITY FOOD ASSISTANC
					FEEDING		
FOUNDATION FOR SENIOR LIVING					AMERICA		
ROESER (PA) - 454 E ROESER RD -					VALUATION		
PHOENIX, AZ 85040	86-0411904	501(C)(3)	0.	24,437.	REPORT	FOOD	COMMUNITY FOOD ASSISTANC
FOUNDATION FOR SENIOR LIVING					FEEDING		
WICKENBURG (CSFP) - 466 W					AMERICA		
WICKENBURG WAY - WICKENBURG, AZ					VALUATION		
85390	86-0298945	501(C)(3)	0.	93,523.		FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
FOUNDATION FOR SENIOR LIVING 29					AMERICA		
PALMS - 4901 E HOLLY ST -					VALUATION		
PHOENIX, AZ 85008	86-0298945	501(C)(3)	0.	65,599.	REPORT	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.	1,423,744.		FOOD	COMMUNITY FOOD ASSISTANC
***************************************			1	_,===,	FEEDING		
GAP MINISTRIES					AMERICA		
2861 N FLOWING WELLS RD STE 161					VALUATION		
TUCSON, AZ 85705	86-0999503	501(C)(3)	0.	563,006.		FOOD	COMMUNITY FOOD ASSISTANC
100001, 111 00,00	00 0333303	301(0)(3)	1	303,000.	FEEDING	1002	
GENERATION CHURCH (GR)					AMERICA		
11832 S WARNER ELLIOT LOOP					VALUATION		
PHOENIX, AZ 85044	86-0633920	501(C)(3)	0.	976,822.		FOOD	COMMUNITY FOOD ASSISTANC
THOUSETA, AS 03044	00 0033320	501(0/(3/	1	570,022.	FEEDING	1 200	COMMONTH FOOD ASSISTANCE
GILA BEND CAP ON EUCLID					AMERICA		
202 N EUCLID AVE	06.0100060	E01/G)/3)		700 470	VALUATION	TOOD	GONDANITEN HOOD LEGISTING
GILA BEND, AZ 85337	86-0180960	DOT(C)(3)	0.	799,172.	KEPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	1 ago 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		
GILA COMMUNITY FOOD BANK CSFP					AMERICA		
317 HACKNEY AVE					VALUATION		
GLOBE, AZ 85501	86-0340833	501(C)(3)	0.	112,957.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
GILA RIVER INDIAN COMMUNITY					AMERICA		
300 OCOTILLO RD					VALUATION		
SACATON, AZ 85147	86-0107023	GOVERNMENT	0.	16,330.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
GLENDALE ELEM SCHOOL DISTRICT					AMERICA		
7301 N 58TH AVE					VALUATION		
GLENDALE, AZ 85301	23-7353532	GOVERNMENT	0.	197,124.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
GLENDALE WILLIAM C JACK BP					AMERICA		
6600 W MISSOURI AVE					VALUATION		
GLENDALE, AZ 85301		GOVERNMENT	0.	22,766.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
GLOBAL TRANSITIONS INC					AMERICA		
906 W PEORIA AVE					VALUATION		
PHOENIX, AZ 85051	14-1945912	501(C)(3)	0.	406,726.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
•				,	FEEDING		
GOLDEN RULE CHARITIES					AMERICA		
2573 E 7TH AVE					VALUATION		
FLAGSTAFF, AZ 86004	83-2525483	501(C)(3)	0.	78,977.		FOOD	COMMUNITY FOOD ASSISTANCE
,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FEEDING		
GOLDEN SHORES COMMUNITY BAPTIST					AMERICA		
CHURCH - 5084 CIBOLA - TOPOCK, AZ					VALUATION		
86436	86-0465724	501(C)(3)	0.	91,977.		FOOD	COMMUNITY FOOD ASSISTANCE
	00 0103721	501(0)(0)	**	31,377.	FEEDING	1002	
GOLDEN VALLEY ASSEMBLY OF GOD INC					AMERICA		
3355 N MAGMA RD					VALUATION		
	86-0804563	501/0\/3\	0.	Q1 Q1Q		FOOD	COMMUNITY FOOD ASSISTANCE
GOLDEN VALLEY, AZ 86413	00-0004303	501(0/(3/	1	81,819.	FEEDING	E 00D	COMMONTH FOOD ASSISTANCE
COCDEL OF EVIUM CHINDS VOLEDON							
GOSPEL OF FAITH CHURCH ASHFORK					AMERICA		
(PANTRY) - 43750 BULLOCK ROAD -	22 0172625	E01 (G) (3)		427 400	VALUATION	TOOD	GOINGTHUM TOOD AGGICTIVET
ASH FORK, AZ 86320	32-0172605	DOT(C)(3)	0.	437,108.	KEPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	ırt II.)	raye i
(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		
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.	43,079.	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.	35,996.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
GREATER NEW BIRTH CHURCH					AMERICA		
2950 W FAIRMOUNT AVE					VALUATION		
PHOENIX, AZ 85017	39-1715874	501(C)(3)	0.	7,954.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
HARDROCK CHAPTER					FEEDING		
17 MILES N OF HOPI CULTURAL CTR ON					AMERICA		
HWY 264 - KYKOTSMOVI VILLAGE, AZ					VALUATION		
86039		GOVERNMENT	0.	180,954.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
HARVEST CHURCH ASSEMBLY OF GOD INC					AMERICA		
8340 W NORTHERN AVE					VALUATION		
GLENDALE, AZ 85305	45-2654221	501(C)(3)	0.	331,901.	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.	1,673,619.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
·					FEEDING		
HOLBROOK SDA INDIAN SCHOOL					AMERICA		
2001 MCLAWS RD					VALUATION		
HOLBROOK, AZ 86025	81-2776316	GOVERNMENT	0.	14,295.	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.	52,837.		FOOD	COMMUNITY FOOD ASSISTANCE
			†	52,557.	FEEDING		
HOPE FOR HUNGER (PRM)					AMERICA		
5605 N 55TH AVE					VALUATION		
GLENDALE, AZ 85301	86-6057771	501(C)(3)	0.	7,922,996.		FOOD	COMMUNITY FOOD ASSISTANCE
<u> </u>	00 0037771	001(0/(0/	1 0.	1,522,550.	THE OWN	F 00D	POLIZONIII TOOD ADDIDIANCE

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (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		
HOPE LIVES VIVE LA ESPERANZA					AMERICA		
1551 W VAN BUREN ST					VALUATION		
PHOENIX, AZ 85007	45-2300190	501(C)(3)	0.	214,211.	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.	349,499.	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.	526,478.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
HOUSTON FOOD BANK					AMERICA		
3811 EASTEX FWY					VALUATION		
HOUSTON, TX 77026	74-2181456	501(C)(3)	0.	71,400.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
HUALAPAI EDUCATION AND TRAINING					AMERICA		
DEPARTMENT - 460 HUALAPAI WAY -					VALUATION		
PEACH SPRINGS, AZ 86434		GOVERNMENT	0.	51,666.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
HUALAPAI SOCIAL SERVICES					AMERICA		
460 HUALAPAI WAY					VALUATION		
PEACH SPRINGS, AZ 86434	86-0092282	501(C)(3)	0.	247,629.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ICNA RELIEF AT UICA MOSQUE					AMERICA		
19250 N 35TH AVE					VALUATION		
GLENDALE, AZ 85308	04-3810161	501(C)(3)	0.	57,055.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				·	FEEDING		
ICNA RELIEF USA PROGRAMS					AMERICA		
2515 W ORANGEWOOD					VALUATION		
PHOENIX, AZ 85051	04-3810161	501(C)(3)	0.	237,523.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
•				,	FEEDING		
IGLESIA DEL VALLE DE LAS ASAMBLEA					AMERICA		
DE DIOS - 15406 N GREASEWOOD ST -		i	1	i e	1	1	1
DE DIOS - 15400 N GREASEWOOD SI -					VALUATION		

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	art II.)	- uge -
(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		
IGLESIA DE CRISTO SION DBA ZION					AMERICA		
CHURCH - 12232 N 112TH AVE -					VALUATION		
YOUNGTOWN, AZ 85363	86-0862426	501(C)(3)	0.	86,288.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
IGLESIA VIDA CHRISTIANA- CHRISTIAN					AMERICA		
LIFE CHURCH - 3946 E MCDOWELL RD -					VALUATION		
PHOENIX, AZ 85009	86-0967498	501(C)(3)	0.	222,324.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
INSCRIPTION HOUSE TS'AH BII KIN					AMERICA		
5 MI N OF HWY 98 AND RTE 16					VALUATION		
TONALEA, AZ 86044		GOVERNMENT	0.	226,969.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
JOSEPH CITY FOUNDATION					AMERICA		
8176 WESTOVER AVE					VALUATION		
JOSEPH CITY, AZ 86032	83-1834863	501(C)(3)	0.	296,393.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
JOSHUA TREE FEEDING PROGRAM					AMERICA		
214 E WILLETTA					VALUATION		
PHOENIX, AZ 85004	86-0789213	501(C)(3)	0.	297,782.		FOOD	COMMUNITY FOOD ASSISTANCE
		(-,(-,			FEEDING		
JUSTA CENTER INC					AMERICA		
1001 W JEFFERSON ST					VALUATION		
PHOENIX, AZ 85007	47-2389424	501 (C) (3)	0.	145,847.		FOOD	COMMUNITY FOOD ASSISTANCE
INGERIX, NZ 03007	47 2303424	501(0)(3)	· · ·	143,047.	FEEDING	1002	COMMONTIT TOOD MEDITANCE
KAIBAB ESTATES WEST SPECIAL FIRE					AMERICA		
DISTRICT - 3918 DOUBLE A RANCH RD					VALUATION		
	86-0645055	E01/g)/2)	0.	225 016		FOOD	COMMUNITY FOOD ASSISTANCE
- ASH FORK, AZ 86320	86-0643033	501(C)(3)	0.	325,816.	FEEDING	F00D	COMMUNITY FOOD ASSISTANCE
WANDAMA UNITED GGUOOL DIGEDIGE							
KAYENTA UNIFIED SCHOOL DISTRICT					AMERICA		
NORTH HWY 163 & MUSTANG BLVD				400 00=	VALUATION		
KAYENTA, AZ 86033		GOVERNMENT	0.	439,385.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
KINGMAN ADVENTIST COMMUNITY					AMERICA		
SERVICES - 3180 WHITE CLIFFS RD -					VALUATION		
KINGMAN, AZ 86402	86-0131620	501(C)(3)	0.	477,307.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	art II.)	- uge -
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					FEEDING		
KINGMAN AID TO ABUSED PEOPLE					AMERICA		
2016 MULLEN AVE (CONFIDENTIAL LOCA					VALUATION		
KINGMAN, AZ 86401	86-0601113	501(C)(3)	0.	31,230.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
KINGMAN AREA FOOD BANK (GR)					AMERICA		
2930 E BUTLER AVE					VALUATION		
KINGMAN, AZ 86409	86-0503686	501(C)(3)	0.	2,316,046.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
KLAGETOH CHAPTER					AMERICA		
3 MI N OF I-40 AND HWY 191					VALUATION		
GANADO, AZ 86505		GOVERNMENT	0.	123,319.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
LAVEEN SCHOOL DISTRICT					AMERICA		
5001 W DOBBINS RD					VALUATION		
LAVEEN, AZ 85339	86-6000584	501(C)(3)	0.	834,108.	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.	110,690.		FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
LISA SCHEXNEIDER MINISTRIES					AMERICA		
1502 W NORTHERN AVE					VALUATION		
PHOENIX, AZ 85021	81-3876584	501(C)(3)	0.	80,298.		FOOD	COMMUNITY FOOD ASSISTANCE
mounti, no oscar	01 0070001	501(0)(5)		00,230.	FEEDING	1002	
LIVING HOPE HELPING HAND					AMERICA		
13270 S SUNLAND GIN RD					VALUATION		
ARIZONA CITY, AZ 85223	65-1238877	501/01/31	0.	377,162.		FOOD	COMMUNITY FOOD ASSISTANCE
ARIZONA CITI, AZ 03223	03-1230077	501(0)(3)	· · ·	377,102.	FEEDING	FOOD	COMMONITI FOOD ASSISTANCE
LIVING STREAMS CHRISTIAN CHURCH					AMERICA		
7000 N CENTRAL AVE BLD F	06 0530630	E01/G)/3\		107 047	VALUATION	HOOD	COMMINITAL FOOD AGGICANING
PHOENIX, AZ 85020	86-0538638	DOT(C)(3)	0.	187,247.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
LUKACHUKAI CHAPTER					AMERICA		
1.5 MI SE OF RTE 13 AND RTE 12			_		VALUATION	L	
LUKACHUKAI, AZ 86507		GOVERNMENT	0.	134,767.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	
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					FEEDING		
LUPTON CHAPTER					AMERICA		
1-40 E EXIT 357 AND IR 12					VALUATION		
LUPTON, AZ 86508		GOVERNMENT	0.	307,337.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
LUTHERAN SOCIAL SERVICES OF THE					AMERICA		
SOUTHWEST - 5946 E UNIVERSITY DR -					VALUATION		
MESA, AZ 85205	86-0252302	501(C)(3)	0.	25,704.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MANZANITA OUTREACH					AMERICA		
406 S 6TH ST					VALUATION		
COTTONWOOD, AZ 86326	27-4446452	501(C)(3)	0.	3,273,796.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MARICOPA COMMUNITY COLLEGE					AMERICA		
(PHOENIX COLLEGE) - 1202 W THOMAS					VALUATION		
RD - PHOENIX, AZ 85013	86-0327449	GOVERNMENT	0.	97,089.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MARICOPA COMMUNITY COLLEGE					AMERICA		
DISTRICT - 7050 S 24TH ST STE 114					VALUATION		
- PHOENIX, AZ 85042	86-0327449	GOVERNMENT	0.	205,825.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MARICOPA COMMUNITY COLLEGE					AMERICA		
DISTRICT - 3000 N DYSART RD -					VALUATION		
AVONDALE, AZ 85392	86-0327449	GOVERNMENT	0.	32,438.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
MARICOPA COMMUNITY COLLEGE					AMERICA		
DISTRICT - 18401 N 32ND ST -					VALUATION		
PHOENIX, AZ 85032	86-0327449	GOVERNMENT	0.	30,551.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
MARICOPA COMMUNITY COLLEGE					AMERICA		
DISTRICT - 108 N 40TH ST -					VALUATION		
PHOENIX, AZ 85034	86-0327449	GOVERNMENT	0.	195,212.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				, , , , , , , , , , , , , , , , , , , ,	FEEDING		
MARICOPA COMMUNITY COLLEGE					AMERICA		
DISTRICT - 6000 W OLIVE AVENUE -					VALUATION		
GLENDALE, AZ 85302	86-0327449	GOVERNMENT	0.	77,402.		FOOD	COMMUNITY FOOD ASSISTANCE
, 00002	1 55 552,115		٠.	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	r	r	

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 or assistance cash grant non-cash non-cash assistance (book, FMV, assistance appraisal, other) FEEDING MARICOPA PANTRY INC AMERICA 50881 W PAPAGO RD VALUATION 81-3081927 501(C)(3) 2,569,729. REPORT MARICOPA, AZ 85139 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING MARYS MINISTRIES AMERICA 5017 S CENTRAL AVE VALUATION PHOENIX, AZ 85040 86-0721211 501(C)(3) 0 1,799,244, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING MATTHEW'S CROSSING AMERICA 1368 N ARIZONA AVE VALUATION CHANDLER, AZ 85225 55-0896414 501(C)(3) 0. 24,696. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING MAYER AREA COMMUNITY SERVICE AMERICA CENTER - 10051 S MIAMI ST - MAYER VALUATION A7 86333 46-2135781 501(C)(3) 0 558,430, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA MAYER AREA COMMUNITY SERVICE VALUATION CENTER - 10001 WICKS AVE - MAYER 46-2135781 501(C)(3) 16,742. REPORT AZ 86333 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING MCMULLEN VALLEY FB AMERICA 69725 CENTENNIAL PARK RD VALUATION 270,403. REPORT FOOD COMMUNITY FOOD ASSISTANCE WENDEN AZ 85357 501(C)(3) 0. MEADVIEW AREA NECESSARY FEEDING NUTRITIONAL ASSISTANCE - 330 E AMERICA MEADVIEW BLVD SUITE B - MEADVIEW VALUATION 228 771 REPORT AZ 86444 81-2507587 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA MERCY HILL CHURCH (MP) VALUATTON 745 W FILLMORE ST 1,488,882. REPORT PHOENIX, AZ 85007 47-1579225 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING MERCY HOUSING AVONDALE SENIOR AMERICA VALUATION VILLAGE - 401 W BASELINE RD -TEMPE, AZ 85283 86-0743192 501(C)(3) 0. 245 300 REPORT COMMUNITY FOOD ASSISTANCE FOOD

Schedule I (Form 990)

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Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	art II.)	raye i
(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		
MINISTERIO CRISTO SANA					AMERICA		
3632 E GREENWAY RD					VALUATION		
PHOENIX, AZ 85032	82-1139784	501(C)(3)	0.	185,788.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MITCHELL SWABACK CHARITIES					AMERICA		
4744 E THUNDERBIRD UNIT 9					VALUATION		
PHOENIX, AZ 85032	27-0250769	501(C)(3)	0.	165,702.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
MOBILE ELEMENTARY SCHOOL					AMERICA		
42798 S 99TH AVE					VALUATION		
MARICOPA, AZ 85139		GOVERNMENT	0.	79,605.	REPORT	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.	472,199.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				·	FEEDING		
MOUNTAIN PARK HEALTH CENTER					AMERICA		
GATEWAY - 3830 E VAN BUREN RD -					VALUATION		
PHOENIX, AZ 85008	86-0498020	501(C)(3)	0.	110,489.		FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
MOUNTAIN PARK HEALTH CENTER					AMERICA		
GOODYEAR - 140 N LITCHFIELD RD STE					VALUATION		
200 - GOODYEAR, AZ 85338	86-0498020	501(C)(3)	0.	105,798.		FOOD	COMMUNITY FOOD ASSISTANCE
	00 0130020		•	200,720.	FEEDING		
MOUNTAIN PARK HEALTH CENTER					AMERICA		
MARYVALE - 6601 W THOMAS RD -					VALUATION		
PHOENIX, AZ 85033	86-0498020	501 (C) (3)	0.	205,995.		FOOD	COMMUNITY FOOD ASSISTANCE
INCENTA, AZ 03033	00 0430020	501(0)(5)	· · ·	203,333.	FEEDING	FOOD	COMMONTIT FOOD ASSISTANCE
NAHATA DZIIL SANDERS CHAPTER					AMERICA		
RED SAND VIEW ST		E01/G\/3\		205 646	VALUATION	ECOD	COMMINITELY ECOD ACCIONANCE
SANDERS, AZ 86512		501(C)(3)	0.	205,646.	+	FOOD	COMMUNITY FOOD ASSISTANCE
NAGG					FEEDING		
NAOS					AMERICA		
5734 W GLENDALE AVE	0.00	504 (5) (2)	_	4.5.55	VALUATION		
GLENDALE, AZ 85301	86-0543988	DOT(G)(3)	0.	116,067.	KEPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 or assistance cash grant non-cash non-cash assistance (book, FMV, assistance appraisal, other) FEEDING NAOS INC AMERICA 14240 N 43RD AVE BUILDING 100 VALUATION 86-0543988 501(C)(3) 701,436. REPORT GLENDALE, AZ 85306 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING NATIVE AMERICAN CHRISTIAN ACADEMY AMERICA 8450 SUN VALLEY RD VALUATION SUN VALLEY, AZ 86029 86-0580967 501(C)(3) 0 22,626. 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. 47,445. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING NATIVE AMERICAN CONNECTIONS AMERICA 931 E DEVONSHIRE VALUATION PHOENIX, AZ 85014 86-0293585 501(C)(3) 0 280,629, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA NATIVE HEALTH (CENTRAL) 4041 N CENTRAL AVE BLDG C VALUATION PHOENIX, AZ 85012 94-2540194 501(C)(3) 69,271. REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING NAVAJO EVANGELICAL LUTHERAN AMERICA MISSION - ONE MISSION LANE - ROCK VALUATION 297,520. REPORT 86-0166564 501(C)(3) FOOD POINT, AZ 86545 0. COMMUNITY FOOD ASSISTANCE FEEDING NAVAJO INDIAN CHRISTIAN MINISTRY AMERICA INC - HIGHWAY 191 - SANDERS, AZ VALUATION 7 678 REPORT 86512 37-1843444 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING NEIGHBORHOOD CHURCH AMERICA VALUATION 4633 W OSBORN RD 10,450. REPORT PHOENIX, AZ 85031 86-0443992 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING NEIGHBORHOOD MINISTRIES INC AMERICA VALUATION 1929 W FILLMORE ST 485,812. REPORT PHOENIX, AZ 85009 86-0809052 501(C)(3) 0. COMMUNITY FOOD ASSISTANCE FOOD

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 or assistance cash grant non-cash non-cash assistance (book, FMV, assistance appraisal, other) FEEDING NEW BEGINNINGS ASSEMBLY OF GOD AMERICA 5121 W OCOTILLO RD VALUATION 26-0072371 501(C)(3) 280,740, REPORT GLENDALE, AZ 85301 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING NEW DIMENSIONS IN RECOVERY AMERICA 1838 E CYPRESS ST VALUATION PHOENIX, AZ 85006 27-2167017 501(C)(3) 0 70,082. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA NEW DIMENSIONS IN RECOVERY VALUATION 2954 N EVERGREEN ST PHOENIX, AZ 85014 27-2167017 501(C)(3) 0. 18,783. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING NEW HORIZON YOUTH HOMES INC AMERICA PO BOX 3296 VALUATION FLAGSTAFF, AZ 86003 86-1014335 501(C)(3) 0 28,690. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA NEW LIFE CENTER CONFIDENTIAL VALUATION 86-0635950 501(C)(3) GOODYEAR, AZ 85338 18,222. REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING NORTHLAND FAMILY HELP CENTER AMERICA 2100 WALGREENS ST VALUATION 7,742.REPORT FLAGSTAFF AZ 86004 86-0351566 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING NORTHMINSTER PRESBYTERIAN FOOD AMERICA BANK - 13001 N 35TH AVE - PHOENIX VALUATION 223 836. REPORT AZ 85029 82-0586529 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA NOURISHPHX 501 S 9TH AVE VALUATTON 6,053,072. REPORT PHOENIX, AZ 85007 86-0401223 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING OAK PINE SPRINGS CHAPTER AMERICA VALUATION WINDOW ROCK, AZ 86515 GOVERNMENT 159 030 REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

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Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	art II.)	1 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		
OLD CONCHO COMMUNITY ASST CENTER					AMERICA		
35432 HIGHWAY 180A					VALUATION		
CONCHO, AZ 85924	86-0907044	501(C)(3)	0.	166,218.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
OLD TOWN MISSION					AMERICA		
116 E PINAL ST					VALUATION		
COTTONWOOD, AZ 86326	86-0667052	501(C)(3)	0.	987,780.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
OLIVE BRANCH COMMUNITY OF HOPE					AMERICA		
3546 E THOMAS RD					VALUATION		
PHOENIX, AZ 85018	81-2687081	501(C)(3)	0.	392,744.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
OLIVE BRANCH NEW BEGINNINGS INC					AMERICA		
4430 E AZTEC RD					VALUATION		
RIMROCK, AZ 86335	86-0756947	501(C)(3)	0.	83,238.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
OPEN DOOR FELLOWSHIP CHURCH					AMERICA		
8301 N 19TH AVE					VALUATION		
PHOENIX, AZ 85021	86-0333385	501(C)(3)	0.	8,942.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
OPEN HANDS OUTREACH PROGRAM					AMERICA		
119 W CENTRAL AVE STE 301					VALUATION		
COOLIDGE , AZ 85128	46-0948519	501(C)(3)	0.	30,570.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
OPERATION LOVE FOOD BANK					AMERICA		
360 N 1ST AVE					VALUATION		
HOLBROOK, AZ 86025	86-0123683	501(C)(3)	0.	42,927.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ORCHARD MESA					AMERICA		
108 N GREENFIELD RD					VALUATION		
MESA, AZ 85205	23-7353532	501(C)(3)	0.	83,199.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
OUR LADY OF FATIMA					AMERICA		
HWY 191 AND INDIAN ROUTE 7					VALUATION		
CHINLE, AZ 86503	85-0225263	501(C)(3)	0.	348,736.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (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		
OUR LADY OF THE LAKE ROMAN					AMERICA		
CATHOLIC PARISH - 1975 S DAYTONA					VALUATION		
DR - LAKE HAVASU CITY, AZ 86406	53-0196617	501(C)(3)	0.	100,120.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
OUR SAVIOR'S COMPASSION INC					FEEDING		
HWY 99 JUST N MILEPOST 60; CATTLE					AMERICA		
GUARD W/4 MAILBOX - WINSLOW, AZ					VALUATION		
86047	80-0400192	501(C)(3)	0.	1,115,825.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PAINTED DESERT DEMONSTRATION					AMERICA		
PROJECTS INC - 145 LEUPP RD -					VALUATION		
FLAGSTAFF, AZ 86004	86-0710679	501(C)(3)	0.	50,340.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PAN AMERICAN CHARTER SCHOOL					AMERICA		
3001 W INDIAN SCHOOL RD STE 210					VALUATION		
PHOENIX, AZ 85017	86-0657646	501(C)(3)	0.	63,595.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
·					FEEDING		
PARKER FOOD BANK					AMERICA		
1124 GERONIMO AVE					VALUATION		
PARKER, AZ 85344		501(C)(3)	0.	756,285.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
•				,	FEEDING		
PAULDEN CHRISTIAN FELLOWSHIP					AMERICA		
195 ASPEN RD					VALUATION		
PAULDEN, AZ 86334	86-0767780	501(C)(3)	0.	800,773.		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.	6 522.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FEEDING		
PHOENIX ADVANTAGE CHARTER SCHOOL					AMERICA		
3738 N 16TH ST					VALUATION		
PHOENIX, AZ 85016		GOVERNMENT	0.	5 394	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
			†	2,231.	FEEDING		
PHOENIX ALLIES FOR COMMUNITY					AMERICA		
HEALTH - 2902 W CLARENDON AVE -					VALUATION		
PHOENIX, AZ 85017	46-0650798	501(C)(3)	0.	23,220.		FOOD	COMMUNITY FOOD ASSISTANCE
	1 =0 0030730	P = 1 (C / (S /	1 0.	23,220.	01(1	F 30D	COLLICITITI TOOD ADDIDIANCE

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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		
PHOENIX FIRST CHURCH OF THE					AMERICA		
NAZARENE INC - 19201 N 7TH AVE -					VALUATION		
PHOENIX, AZ 85027	86-0214745	501(C)(3)	0.	47,168.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PHOENIX OASIS RECOVERY HOMES INC					AMERICA		
8632 S 7TH STREET					VALUATION		
PHOENIX, AZ 85042	47-1101677	501(C)(3)	0.	10,809.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PHOENIX RESCUE MISSION					AMERICA		
4013 W MARICOPA ST					VALUATION		
PHOENIX, AZ 85009	86-6057771	501(C)(3)	0.	78,898.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
·					FEEDING		
PHOENIX RESCUE MISSION					AMERICA		
8335 W JEFFERSON ST					VALUATION		
PEORIA, AZ 85345	86-6057771	501(C)(3)	0.	69,504.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
•				,	FEEDING		
PHOENIX RESCUE MISSION COMMUNITY					AMERICA		
SOLUTIONS (GR) - 1801 S 35TH AVE -					VALUATION		
PHOENIX, AZ 85009	86-6057771	501(C)(3)	0.	448,097.		FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
PILGRIM REST FOUNDATION					AMERICA		
1401 E JEFFERSON ST					VALUATION		
PHOENIX, AZ 85034	86-0885862	501(C)(3)	0.	426,881.		FOOD	COMMUNITY FOOD ASSISTANCE
Industry, III does I	00 0000002	501(0)(0)	· · · · · ·	120,001.	FEEDING	1002	COLLIGIUM 1 1 002 MEDIEM 02
PINAL CO DIV OF PUBLIC HEALTH					AMERICA		
355 ALDEN RD					VALUATION		
	86-6000556	COMEDNMENT	0.	90,703.		FOOD	COMMUNITY FOOD ASSISTANCE
KEARNY, AZ 85237	00-0000330	GOVERNMENT	· · ·	30,703.	FEEDING	FOOD	COMMONITI FOOD ASSISTANCE
PINAL CO DIV OF PUBLIC HEALTH					AMERICA		
1870 W AMERICAN AVE	06 6000556	COLLEDANCENE		160 077	VALUATION	TOOD	GOMESTICAL FOOD AGGEGRANGE
ORACLE, AZ 85623	86-6000556	GOVEKNMEN'I'	0.	169,977.		FOOD	COMMUNITY FOOD ASSISTANCE
DINAL GO DIN OF PURITS WELL TO					FEEDING		
PINAL CO DIV OF PUBLIC HEALTH					AMERICA		
60 EAST MAIN STREET	0.5.5.5.5.5			444.45	VALUATION		
SUPERIOR, AZ 85173	86-6000556	GOVERNMENT	0.	116,895.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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					FEEDING		
PRESCOTT MEALS ON WHEELS					AMERICA		
1280 E ROSSER ST					VALUATION		
PRESCOTT, AZ 86301	86-0417621	501(C)(3)	0.	13,360.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PRESCOTT SEVENTH DAY ADVENTIST					AMERICA		
2980 WILLOW CREEK RD					VALUATION		
PRESCOTT, AZ 86301	86-0131620	501(C)(3)	0.	236,458.	REPORT	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.	24,254.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PROJECT RISING HOPE					AMERICA		
750 E MINGUS AVE					VALUATION		
COTTONWOOD, AZ 86326	84-4062558	501(C)(3)	0.	1,709,990.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
PUENTE					AMERICA		
1937 W ADAMS ST					VALUATION		
PHOENIX, AZ 85009	45-3697690	501(C)(3)	0.	175,766.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
RADIANT CHURCH					AMERICA		
10701 W BOSWELL BLVD					VALUATION		
SUN CITY, AZ 85373	86-0886925	501(C)(3)	0.	23,093.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
RAINBOW HOUSING ASSISTANCE					AMERICA		
CORPORATION - 3838 W CAMELBACK RD					VALUATION		
- PHOENIX, AZ 85019	30-0108119	501(C)(3)	0.	108,654.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
RECOVERY INNOVATIONS OF ARIZONA					AMERICA		
INC - 11361 N 99TH AVE SUITE 402 -					VALUATION		
PEORIA, AZ 85345	86-0671446	501(C)(3)	0.	56,548.		FOOD	COMMUNITY FOOD ASSISTANCE
	00 00/1110		· .	30,310.	FEEDING		
REGIONAL FOOD BANK OF OKLAHOMA					AMERICA		
3400 S MOULTON DRIVE					VALUATION		
OKLAHOMA CITY, OK 73137	74-1100380	501(C)(3)	0.	64,770.		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		
RESURRECTION STREET MINISTRY INC					AMERICA		
(CSFP) - 245 S NINA DR - MESA, AZ					VALUATION		
85210	86-0505273	501(C)(3)	0.	445,440.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
REVIVE FOUNDATION					AMERICA		
13015 W GREENWAY RD					VALUATION		
EL MIRAGE, AZ 85335	45-2139245	501(C)(3)	0.	144,140.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
RIO VISTA CENTER INC					AMERICA		
1431 E SOUTHERN AVE					VALUATION		
PHOENIX, AZ 85040	20-1569551	501(C)(3)	0.	2,181,600.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ROAD RUNNER FOOD BANK					AMERICA		
5840 OFFICE BLVD NE					VALUATION		
ALBUQUERQUE, NM 87109	85-0278525	501(C)(3)	0.	118,085.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ROOSEVELT ELEMENTARY SCHOOL					AMERICA		
DISTRICT NO 66 - 909 W VINEYARD RD					VALUATION		
- PHOENIX, AZ 85041	86-6000509	501(C)(3)	0.	64,105.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ROOSEVELT ELEMENTARY SCHOOL					AMERICA		
DISTRICT NO 66 - 4001 S 3RD ST -					VALUATION		
PHOENIX, AZ 85040	86-6000509	501(C)(3)	0.	28,933.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
ROOSEVELT SCHL DIST 66					AMERICA		
3146 E WIER ST					VALUATION		
PHOENIX, AZ 85040	86-6000509	GOVERNMENT	0.	9,710.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
ROUND VALLEY SENIOR CENTER					AMERICA		
356 S PAPAGO ST					VALUATION		
SPRINGERVILLE, AZ 85938	86-6000796	501(C)(3)	0.	77,521.		FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
RUNNINGELK MINISTRIES INC					AMERICA		
NAVAJO RTE 60 MILE MARKER 10					VALUATION		
DILKON, AZ 86047	47-2555939	501(C)(3)	0.	149,008.		FOOD	COMMUNITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 SALVATION ARMY (KINGMAN CORPS) AMERICA 1200 E ANDY DEVINE VALUATION 90,441, REPORT KINGMAN, AZ 86401 94-1156347 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SALVATION ARMY (LAURA DANIELI SR AMERICA ACTIVITY CTR) - 628 N 3RD AVE -VALUATION PHOENIX, AZ 85003 94-1156347 501(C)(3) 0 6,394. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SALVATION ARMY (MESA) 255 E 6TH ST VALUATION MESA, AZ 85201 94-1156347 501(C)(3) 0. 22,622. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SALVATION ARMY (PHOENIX) (CSFP) AMERICA 613 N 4TH AVE VALUATION 22,112. REPORT PHOENIX, AZ 85003 94-1156347 501(C)(3) 0 FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SALVATION ARMY (PRESCOTT) VALUATION 237 S MONTEZUMA ST 86-0096791 501(C)(3) PRESCOTT, AZ 86303 120,231, REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SALVATION ARMY (SUN CITY) AMERICA 241 E 6TH ST VALUATION 94-1156347 501(C)(3) 791 190 REPORT FOOD COMMUNITY FOOD ASSISTANCE MESA AZ 85201 0. FEEDING SANTA CRUZ FOOD BANK (CAHRA) AMERICA (CSFP) - 302 E 5TH ST - ELOY, AZ VALUATION 145 385 REPORT 85231 86-0397693 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SANTO NINO CATHOLIC COMMUNITY AMERICA VALUATTON 3206 W MELVIN ST 713,591. REPORT PHOENIX, AZ 85009 47-1795408 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SDA COMMUNITY SERVICES (CAMP AMERICA VALUATION VERDE) - 1406 N BOOTHILL DR - CAMP VERDE, AZ 86332 86-0131620 501(C)(3) 0. 1 838 249 REPORT COMMUNITY FOOD ASSISTANCE FOOD

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 SELIGMAN CARE CLUB CSFP AMERICA 53490 N BRIDGE CANYON PKWY VALUATION 656,144. REPORT SELIGMAN, AZ 86337 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SENTOR PERSONAL ASSISTANCE CORP AMERICA 610 N ALMA SCHOOL RD VALUATION MESA, AZ 85202 45-4551483 501(C)(3) 0 33,033. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SHEPHERDS KITCHEN FOOD BANK VALUATION 344 W 4TH STREET SOUTH SNOWFLAKE, AZ 85937 86-0887516 501(C)(3) 0. 3,195,333, REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING STCHOMOVT VILLAGE AMERICA PO BOX 941 VALUATION 206,642. REPORT POLACCA, AZ 86042 GOVERNMENT 0 FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SILVER CREEK SENIOR CENTER VALUATION 1658 S MAIN STREET #1495 94-2745417 501(C)(3) SNOWFLAKE, AZ 85937 92,345. REPORT 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SIPAULOVI VILLAGE AMERICA HWY 87 MP 405 VALUATION 155,576. REPORT 86-0933509 501(C)(3) COMMUNITY FOOD ASSISTANCE SECOND MESA, AZ 86043 0. FOOD FEEDING SOJOURNER CENTER AMERICA 2330 E FILLMORE ST (CONFIDENTIAL) VALUATION 5 712. REPORT PHOENIX AZ 85036 94-2465081 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SOLID ROCK COMMUNITY DEVELOPMENT VALUATTON CORPORATION - 5955 W MYRTLE AVE -118,636. REPORT GLENDALE, AZ 85301 47-1847637 501(C)(3) 0. FOOD COMMUNITY FOOD ASSISTANCE FEEDING SOUL REVIVAL INC AMERICA VALUATION 6726 W BLOOMFIELD RD PEORIA, AZ 85381 85-1389929 501(C)(3) 33 794 REPORT COMMUNITY FOOD ASSISTANCE 0. FOOD

Schedule I (Form 990)

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### ST LUKE'S AT THE MOUNTAIN ### BOBBINS RD PHOENIX, AZ 85042 31-1629166 501(C)(3) 0. 577,971, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### PHOENIX, AZ 85042 31-1629166 501(C)(3) 0. 577,971, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### PHOENIX, AZ 85008 86-0182823 501(C)(3) 0. 99,279, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### STAND TOGETHER AND RECOVER (STAR) 2144 E ROOSEVELT ST PHOENIX, AZ 85006 86-0586210 501(C)(3) 0. 67,886, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### PHOENIX, AZ 85006 #### STEP ONE HALFWAY HOUSE 9636 N 11TH AVE PHOENIX, AZ 85021 86-1032253 501(C)(3) 0. 343,635, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### STEPPING STONES FOUNDATION INC COMPIDENTIAL 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### STEPPING STONES FOUNDATION INC COMPIDENTIAL 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### STEPPING STONES FOUNDATION INC COMPIDENTIAL 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### STEPPING STONES FOUNDATION INC COMPIDENTIAL 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### STEPPING STONES FOUNDATION INC COMPIDENTIAL 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### STEPPING STONES FOUNDATION INC COMPIDENTIAL 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### STEPPING STONES FOUNDATION INC COMPIDENTIAL 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893, REPORT FOOD COMMUNITY FOOD ASSISTANCE #### STARL TO THE TOTAL TO THE	Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
ST JOHN INSTITUTIONAL BAPTIST 1428 S 137H AVE PHOENIX, AZ 85007 86-0448117 501(C)(3) 0. 67,658, RFPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA AMERICA AMERICA FEEDING AMERICA FEEDING AMERICA FEEDING AMERICA AMERI	` ,	(b) EIN	, , <i>,</i>		non-cash	valuation (book, FMV,		
1428 S 13TH AVE PHOENIX, AZ 85007						FEEDING		
PHOENIX, AZ 85007	ST JOHN INSTITUTIONAL BAPTIST					AMERICA		
### FEEDING AMERICA VALUATION ### FEEDING AMERICA VALUATION ### FEEDING AMERICA ### VALUATION ### PROME TALL PLAY AND ASSISTANCE ### FEEDING AMERICA ### VALUATION ### PROME TALL PLAY AND ASSISTANCE ### VALUATION ### VALUATION ### PROME TALL PLAY AND ASSISTANCE ### VALUATION #	1428 S 13TH AVE							
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9636 N 11TH AVE PHOENIX, AZ 85021 86-1032253 501(C)(3) 0. 343,635. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA VALUATION PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA VALUATION FEEDING AMERICA VALUATION GLENDALE, AZ 85308 86-0815254 501(C)(3) 0. 9,879. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA VALUATION FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA VALUATION AMERICA VALUATION FEEDING AMERICA VALUATION AMERICA VALUATION AMERICA VALUATION AMERICA VALUATION AMERICA VALUATION AMERICA						FEEDING		
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FEEDING AMERICA VALUATION PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893. REPORT FOOD COMMUNITY FOOD ASSISTANCE SUNSHINE GROUP HOMES 17201 N 63RD AVE GLENDALE, AZ 85308 86-0815254 501(C)(3) 0. 9,879. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA VALUATION GLENDALE, AZ 85308 86-0815254 501(C)(3) 0. 9,879. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA	9636 N 11TH AVE					VALUATION		
STEPPING STONES FOUNDATION INC CONFIDENTIAL 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893. REPORT FOOD COMMUNITY FOOD ASSISTANCE SUNSHINE GROUP HOMES 17201 N 63RD AVE GLENDALE, AZ 85308 86-0815254 501(C)(3) 0. 9,879. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SUNSHINE RESCUE MISSION HOPE	PHOENIX, AZ 85021	86-1032253	501(C)(3)	0.	343,635.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
CONFIDENTIAL 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SUNSHINE GROUP HOMES 17201 N 63RD AVE GLENDALE, AZ 85308 86-0815254 501(C)(3) 0. 9,879. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SUNSHINE RESCUE MISSION HOPE						FEEDING		
PRESCOTT VALLEY, AZ 86314 86-0542919 501(C)(3) 0. 16,893. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA VALUATION GLENDALE, AZ 85308 86-0815254 501(C)(3) 0. 9,879. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA SUNSHINE RESCUE MISSION HOPE	STEPPING STONES FOUNDATION INC					AMERICA		
SUNSHINE GROUP HOMES 17201 N 63RD AVE GLENDALE, AZ 85308 86-0815254 501(C)(3) 0. 9,879. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING AMERICA AMERICA	CONFIDENTIAL 3301 N MAJESTY					VALUATION		
SUNSHINE GROUP HOMES 17201 N 63RD AVE GLENDALE, AZ 85308 86-0815254 501(C)(3) 0. 9,879. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SUNSHINE RESCUE MISSION HOPE	PRESCOTT VALLEY, AZ 86314	86-0542919	501(C)(3)	0.	16,893.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
17201 N 63RD AVE GLENDALE, AZ 85308 86-0815254 501(C)(3) 0. 9,879. REPORT FOOD COMMUNITY FOOD ASSISTANCE FEEDING SUNSHINE RESCUE MISSION HOPE	·					FEEDING		
GLENDALE, AZ 85308 86-0815254 501(C)(3) 0. 9,879. REPORT FOOD COMMUNITY FOOD ASSISTANCE SUNSHINE RESCUE MISSION HOPE AMERICA	SUNSHINE GROUP HOMES					AMERICA		
SUNSHINE RESCUE MISSION HOPE FEEDING AMERICA	17201 N 63RD AVE					VALUATION		
SUNSHINE RESCUE MISSION HOPE	GLENDALE, AZ 85308	86-0815254	501(C)(3)	0.	9,879.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
	,				,	FEEDING		
COTTAGE - 124 S SAN FRANCISCO ST - VALUATION	SUNSHINE RESCUE MISSION HOPE					AMERICA		
	COTTAGE - 124 S SAN FRANCISCO ST -					VALUATION		
FLAGSTAFF, AZ 86001 86-0815254 501(C)(3) 0. 220,667.REPORT FOOD COMMUNITY FOOD ASSISTANCE	FLAGSTAFF, AZ 86001	86-0815254	501(C)(3)	0.	220,667.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
FEEDING	•				, ,			
SUPERSTITION COMMUNITY FOOD BANK	SUPERSTITION COMMUNITY FOOD BANK					AMERICA		
575 NORTH IDAHO RD. #301								
		86-0454767	501(C)(3)	0.	80,405.		FOOD	COMMUNITY FOOD ASSISTANCE

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part 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			
SV GLEANERS (COMMUNITY CENTER					AMERICA			
NORTH) - 1007 S 3RD ST - AVONDALE,					VALUATION			
AZ 85323	86-0419881	501(C)(3)	0.	527,237.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE	
					FEEDING			
SVDP CASA GRANDE					AMERICA			
405 E 2ND ST					VALUATION			
CASA GRANDE, AZ 85122	86-0570967	501(C)(3)	0.	496,103.		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.	254,103.		FOOD	COMMUNITY FOOD ASSISTANCE	
					FEEDING			
SVDP IMMACULATE CONCEPTION					AMERICA			
825 W MINGUS					VALUATION			
COTTONWOOD, AZ 86326	86-0096789	501(C)(3)	0.	62,316.		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.	660,745.		FOOD	COMMUNITY FOOD ASSISTANCE	
					FEEDING			
SVDP NEEDLES					AMERICA			
10287 BARRECKMAN RD					VALUATION			
MOHAVE VALLEY, AZ 86406	33-0627839	501(C)(3)	0.	185,910.		FOOD	COMMUNITY FOOD ASSISTANCE	
					FEEDING			
SVDP OUR LADY OF PERPETUAL HELP					AMERICA			
5614 W ORANGEWOOD					VALUATION			
GLENDALE, AZ 85301	86-0096789	501(C)(3)	0.	86,355.		FOOD	COMMUNITY FOOD ASSISTANCE	
					FEEDING			
SVDP OUR LADY OF THE DESERT					AMERICA			
CONFERENCE - 7141 11TH ST - DOLAN					VALUATION			
SPRINGS, AZ 86441	86-0096789	501(C)(3)	0.	237,279.		FOOD	COMMUNITY FOOD ASSISTANCE	
					FEEDING			
SVDP OUR LADY OF THE VALLEY					AMERICA			
3220 W GREENWAY					VALUATION			
PHOENIX, AZ 85053	86-0096789	501(C)(3)	0.	73,764.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE	

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (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		
SVDP PHOENIX					AMERICA		
420 W WATKINS ST					VALUATION		
PHOENIX, AZ 85002	86-0096789	501(C)(3)	0.	2,153,767.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
SVDP SACRED HEART PARKER					AMERICA		
1015 JOSHUA AVE					VALUATION		
PARKER, AZ 85344	86-0096789	501(C)(3)	0.	151,078.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
SVDP ST FRANCIS XAVIER					AMERICA		
4715 N CENTRAL AVE					VALUATION		
PHOENIX, AZ 85012	86-0096789	501(C)(3)	0.	16,601.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
SVDP ST GERMAINE					AMERICA		
8030 JOHN COURT					VALUATION		
PRESCOTT VALLEY, AZ 86314	86-0096789	501(C)(3)	0.	161,658.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
·					FEEDING		
SVDP ST GREGORYS					AMERICA		
3437 N 18TH AVE					VALUATION		
PHOENIX, AZ 85015	86-0096789	501(C)(3)	0.	25,928.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
SVDP ST JOHN VIANNEY SEDONA					AMERICA		
180 ST JOHN VIANNEY LN					VALUATION		
SEDONA, AZ 86336	86-0096789	501(C)(3)	0.	23,530.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
SVDP ST MARY'S BASILICA (PA)					AMERICA		
231 N 3RD ST					VALUATION		
PHOENIX, AZ 85004	86-0096789	501(C)(3)	0.	48,943.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,			-	, -	FEEDING		
SVDP ST WILLIAMS (PA)					AMERICA		
11003 W 3RD ST					VALUATION		
CASHION, AZ 85329	86-0096789	501(C)(3)	0.	22,022.		FOOD	COMMUNITY FOOD ASSISTANCE
			· .		FEEDING		
TEEN CHALLENGE (GREATER PHX TEEN					AMERICA		
CHALLENGE) - PO BOX 13444 -					VALUATION		
PHOENIX, AZ 85002	86-0255257	501(C)(3)	0.	174,655.		FOOD	COMMUNITY FOOD ASSISTANCE
	1 30 0233237		٠.	1,1,555.		<u> </u>	TOOD HODISHINGS

Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art II.)	T ugo 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		
TEESTO CHAPTER					AMERICA		
1 MI E OF SR87 ON IR60					VALUATION		
WINSLOW, AZ 86047		GOVERNMENT	0.	106,317.	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.	35,736.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
THE BRIDGE CHURCH					AMERICA		
19716 W NARRAMORE RD					VALUATION		
BUCKEYE, AZ 85326	09-0957201	501(C)(3)	0.	213,415.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
THE CHURCH OF JESUS CHRIST OF					FEEDING		
LATTER DAY SAINTS - 10930 W					AMERICA		
GARDEN LAKES PARKWAY - AVONDALE,					VALUATION		
AZ 85323	86-1019340	501(C)(3)	0.	20,159.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
THE PAIDEIA ACADEMIES INC					AMERICA		
7777 S 15TH TERRACE					VALUATION		
PHOENIX, AZ 85042	80-0728374	501(C)(3)	0.	63,280.	REPORT	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.	112,720.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
THINK JESUS FELLOWSHIP					AMERICA		
2309 N CENTER					VALUATION		
FLAGSTAFF, AZ 86003	71-1006154	501(C)(3)	0.	109,023.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
TOLANI LAKE SENIOR CENTER					AMERICA		
LEUPP ORAIBI RD AND INDIAN RTE 24					VALUATION		
WINSLOW, AZ 86047		GOVERNMENT	0.	44,771.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
TOLIKAN SENIOR COUNCIL CENTER (MP)					AMERICA		
IR 35 AND DR 5045					VALUATION		
		1	1	i	1	1	I .

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	art II.)	raye i
(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		
TOLLESON ELEMENTARY SD (PORFIRIO)					AMERICA		
9261 W VAN BUREN RD					VALUATION		
TOLLESON, AZ 85353	86-6000490	GOVERNMENT	0.	164,320.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
TONALEA CHAPTER HOUSE					AMERICA		
INDIAN ROUTE 21					VALUATION		
TONALEA, AZ 86044		GOVERNMENT	0.	394,846.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
TOWN OF FREDONIA					AMERICA		
100 E WOODHILL RD					VALUATION		
FREDONIA, AZ 86022	86-0186382	501(C)(3)	0.	357,199.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
TOWN OF FREDONIA					AMERICA		
100 E WOODHILL RD					VALUATION		
FREDONIA, AZ 86022	23-7353532	GOVERNMENT	0.	46,687.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
TOWN OF FREDONIA SENIOR CENTER					AMERICA		
(SK) - 80 N 100 WEST - FREDONIA,					VALUATION		
AZ 86022	86-0186382	GOVERNMENT	0.	64,749.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
TOWN OF GILA BEND					AMERICA		
303 E PIMA ST					VALUATION		
GILA BEND, AZ 85337	86-0180960	GOVERNMENT	0.	28,766.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
				,	FEEDING		
TOWN OF GUADALUPE CAP CSFP					AMERICA		
9241 S AVENIDA DE YAQUI					VALUATION		
GUADALUPE, AZ 85283	86-0297728	501(C)(3)	0.	57,362.		FOOD	COMMUNITY FOOD ASSISTANCE
	00 0257720	002(0)(0)		07,002.	FEEDING		
TRINITY BIBLE CHURCH					AMERICA		
3420 W PEORIA AVE					VALUATION		
PHOENIX, AZ 85029	86-0215940	501 (C) (3)	0.	243,274.		FOOD	COMMUNITY FOOD ASSISTANCE
	30 0213740	551(5)(5)	· · ·	243,274.	FEEDING	1 000	COLLEGE TO THE PROPERTY OF THE
TUSAYAN CARES					AMERICA		
549 CAMPER VILLAGE LN					VALUATION		
	86-2217898	501(C)(3)	0.	117 271		FOOD	COMMUNITY FOOD ASSISTANCE
GRAND CANYON, AZ 86023	00-221/098	POT(C)(3)	1 0.	117,371.	WELOK!	F 00Ω	COMMONITI FOOD ASSISTANCE

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	ırt II.)	T uge 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		
UMOM (NEW DAY CENTERS)					AMERICA		
3333 E VAN BUREN					VALUATION		
PHOENIX, AZ 85008	86-0521062	501(C)(3)	0.	211,790.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VALLEY VIEW COMMUNITY FOOD					AMERICA		
ASSISTANCE - 12321 NW GRAND AVE -					VALUATION		
EL MIRAGE, AZ 85335	77-0696933	501(C)(3)	0.	1,833,796.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VALLEY VIEW COMMUNITY FOOD					AMERICA		
ASSISTANCE - 10771 W PEORIA AVE -					VALUATION		
SUN CITY, AZ 85351	77-0696933	501(C)(3)	0.	2,825,310.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VALLEYWISE SOUTH PHOENIX LAVEEN					AMERICA		
COMM HEALTH CTR - 5650 S 35TH AVE					VALUATION		
- PHOENIX, AZ 85041	86-0830701	501(C)(3)	0.	16,563.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VALLEYWISE HEALTH					AMERICA		
33 W TAMARISK					VALUATION		
PHOENIX, AZ 85041	86-0830701	501(C)(3)	0.	10,212.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
•				,	FEEDING		
VICTORY COLLEGIATE ACADEMY					AMERICA		
3535 N 63RD AVE					VALUATION		
PHOENIX, AZ 85033	81-0693484	501(C)(3)	0.	39,264.		FOOD	COMMUNITY FOOD ASSISTANCE
,				, , , , , , , , , , , , , , , , , , , ,	FEEDING		
VILLAGE MEADOWS ELEMENTARY SCHOOL					AMERICA		
2020 W MORNINGSIDE DR					VALUATION		
PHOENIX, AZ 85023	86-6004178	501(C)(3)	0.	8 986	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
	00 0001270			0,200.	FEEDING		
VILLAGE OF BACAVI					AMERICA		
264 WEST					VALUATION		
	86-0664160	501(C)(3)	0.	77,422.		FOOD	COMMUNITY FOOD ASSISTANCE
HOTEVILLA, AZ 86030	00 0004100	501(0)(3)	1	//,422.	FEEDING	1 300	COMMONTH FOOD ASSISTANCE
VILLAGE OF SHUNGOPAVI					AMERICA		
100 MAIN ST					VALUATION		
	96 0050740	E01/G\/3\	0.	25 660		FOOD	COMMINITELY FOOD ACCIONANCE
SECOND MESA, AZ 86043	86-0950749	DOT(C)(3)	1 0.	35,660.	WELOK!	E OOD	COMMUNITY FOOD ASSISTANCE

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	overnments (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		
VILLAGE OF TEWA					AMERICA		
HWY 264 MP 392.5					VALUATION		
POLACCA, AZ 86042	86-0894453	501(C)(3)	0.	222,068.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VILLAGE OF WALPI					AMERICA		
1/2 MILE N HWY 264 MP 391					VALUATION		
POLACCA, AZ 86042	86-0956879	501(C)(3)	0.	204,457.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VINEYARD COMMUNITY CHARITIES					AMERICA		
6250 W PEORIA AVE					VALUATION		
GLENDALE, AZ 85302	74-2467930	501(C)(3)	0.	254,992.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VINEYARD COMMUNITY CHURCH					AMERICA		
601 S COOPER RD					VALUATION		
GILBERT, AZ 85233	86-0607313	501(C)(3)	0.	12,141.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
VIVRE					AMERICA		
2501 W ELM ST					VALUATION		
PHOENIX, AZ 85017	45-4743181	501(C)(3)	0.	53,520.	REPORT	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.	51,092.	REPORT	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.	44,453.	REPORT	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.	184,895.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WHAT-KNOTS SECOND HAND AND MORE					AMERICA		
242 W LEWIS AVE					VALUATION		
ASH FORK, AZ 86320	45-4731785	501(C)(3)	0.	39,794.		FOOD	COMMUNITY FOOD ASSISTANCE
	1 -5 -751755		· ·	1 35,,54.	<u> </u>	<u> </u>	

Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	art II.)	rage i
(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		
WHITE HILLS COMMUNITY ASSOCIATION					AMERICA		
INC - 8599 W WHITE HILLS RD -					VALUATION		
WHITE HILLS, AZ 86445	94-2620976	501(C)(3)	0.	117,215.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WHITE MOUNTAIN CATHOLIC CHARITIES					AMERICA		
3807 PORTER MOUNTAIN RD					VALUATION		
LAKESIDE, AZ 85929	85-0225263	501(C)(3)	0.	129,425.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WILLCOX DISTRIBUTION CENTER					AMERICA		
931 N BISBEE AVE					VALUATION		
WILLCOX, AZ 85643	51-0192519	501(C)(3)	0.	797,800.	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.	264,801.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WILLIAMS FOOD PANTRY AND MORE					AMERICA		
123 S 3RD					VALUATION		
WILLIAMS, AZ 86046	82-1634562	501(C)(3)	0.	16,759.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WINSLOW COUNCIL ON AGING					AMERICA		
212 E 2ND ST					VALUATION		
WINSLOW, AZ 86047	86-0310351	501(C)(3)	0.	868,635.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
WINSLOW ROTARY CLUB					AMERICA		
101 E HILLVIEW ST					VALUATION		
WINSLOW, AZ 86047	83-2560165	501(C)(3)	0.	278,976.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
,				,	FEEDING		
YARNELL FOOD BANK INC					AMERICA		
22815 SOUTH HIGHWAY 89					VALUATION		
YARNELL, AZ 85362	47-3449359	501(C)(3)	0.	317,708.		FOOD	COMMUNITY FOOD ASSISTANCE
,		, ,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FEEDING		
YAVAPAI APACHE NATION					AMERICA		
					VALUATION		
3364 HAMALEY AVE			1				

Part II Continuation of Grants and Other A	433ISTATICE TO DOI	nestic Organizations	and Domestic de	Veriments (Och		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		
YAVAPAI CO COMM HEALTH SVCS (CAMP					AMERICA		
VERDE) - 75 E HOLLAMON ST - CAMP					VALUATION		
VERDE, AZ 86322	23-7353532	GOVERNMENT	0.	148,427.	REPORT	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.	52,372.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
YAVAPAI CO COMM HEALTH SVCS					AMERICA		
(PRESCOTT) - 937 RUTH ST -					VALUATION		
PRESCOTT, AZ 86301	23-7353532	GOVERNMENT	0.	120,210.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
YAVAPAI FOOD BANK INC					AMERICA		
8866 E LONG MESA DR					VALUATION		
PRESCOTT VALLEY, AZ 86314	86-0709163	501(C)(3)	0.	1,288,769.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
YUCCA COMMUNITY FOOD PANTRY					AMERICA		
12349 S FRONTAGE RD					VALUATION		
YUCCA, AZ 86438	38-4139944	501(C)(3)	0.	996,626.	REPORT	FOOD	COMMUNITY FOOD ASSISTANCE
•				,	FEEDING		
YUMA COMMUNITY FOOD BANK					AMERICA		
2404 E 24TH ST STE A					VALUATION		
YUMA, AZ 85365	86-0457836	501(C)(3)	0.	1,424,904.		FOOD	COMMUNITY FOOD ASSISTANCE
					FEEDING		
YUWEHLOO PAKI COMMUNITY					AMERICA		
2.3 MI S HIGHWAY 77 MILEPOST 39					VALUATION		
KEAMS CANYON, AZ 86034	86-0897783	501(C)(3)	0.	25,166.		FOOD	COMMUNITY FOOD ASSISTANCE
SMFB FOUNDATION							
2831 N 31ST AVE							
PHOENIX, AZ 85009	27-0277109	501(C)(3)	31,700,000.	0.			GENERAL OPERATIONS
11000111, 110 00000	21 0211103	501(0)(3)	31,700,000.				OLIVERAL OF BRITTOND

(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 assistant
				OTHER - FEEDING AMERICA	
DISTRIBUTION	0	50,988,858.	0.	FOOD VALUATION REPORT	FOOD
IV Supplemental Information. Provide the information	on required in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
I, LINE 2:					
I, LINE 2:					
R FOOD IS DISTRIBUTED, NO FURTHER MONITORIN	NG 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.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number ST MARY'S FOOD BANK ALLIANCE 23-7353532 Part I Questions Regarding Compensation

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant 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 organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain 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, 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 nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
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, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		X
b	Any related organization?	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, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued 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 rebuttable 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) 2020

ST MARY'S FOOD BANK ALLIANCE

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.

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 (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	perients	(B)(I)-(U)	reported as deferred on prior Form 990	
(1) TOM KERTIS	(i)	264,593.	0.	0.	11,804.	13,371.	289,768.	0.	
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) SARAH STUCKEY	(i)	180,670.	3,000.	0.	8,549.	13,085.	205,304.	0.	
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) LISA NOTARO	(i)	175,929.	4,000.	0.	8,238.	14,830.	202,997.	0.	
CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) DUANE LAWSON	(i)	177,270.	0.	0.	7,887.	1,744.	186,901.	0.	
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) BRITT KNAPP	(i)	171,694.	0.	0.	7,657.	7,245.	186,596.	0.	
SR. DIRECTOR OF FOOD & SUPPLY CHAIN	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) MARCOS GAUCIN	(i)	151,018.	0.	0.	6,894.	12,744.	170,656.	0.	
CHIEF PROGRAM OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ 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.

Name of the organization Employer identification number ST MARY'S FOOD BANK ALLIANCE 23-7353532

Par	τι	Types	of Property							
				(a)	(b)	(c)	(d)			
				Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de		_	_
				applicable		Form 990, Part VIII, line 10	noncash contribu	tion an	nounts	3
1	Art -	Works of a	art							
2		Historical								
3			interests							
4			olications							
5			ousehold goods							
6			vehicles							
7			ies							
8		llectual pro								
9	Seci	urities - Pul	olicly traded	Х	67	627,532	. COST/SELLING PRIC	CE		
10			sely held stock							
11			tnership, LLC, or							
	trust	t interests								
12	Sec	urities - Mis	scellaneous							
13	Qua	lified conse	ervation contribution -							
	Hist	oric structu	ıres							
14	Qua	lified conse	ervation contribution - Other							
15		l estate - Re								
16			ommercial							
17			ther							
18										
19				Х	71,139	203,003,795	FEEDING AMERICA V	/ALUE		
20			dical supplies							
21										
22			cts							
23			imens							
24		neological a		x	200	0 000				
25		٠. ٢	MISCELLANEOUS)		200	9,982	•			
26 07		er ▶ ()							
27	Othe	er ▶ (er ▶ ()							
<u>28</u> 29			ms 8283 received by the organiz	zation during	the tax year for e	ontributions				
23			rganization completed Form 828	_	, ,				5	
	101 1	WINCH THE O	rganization completed form oze	50, 1 ait v, D	once Acknowledge	ement 29			Yes	No
30a	Duri	ng the vea	r, did the organization receive by	/ contributio	n any property rep	orted in Part I. lines 1 throu	gh 28, that it		100	110
			it least three years from the date							
			ses for the entire holding period?			or. io., i roquii ou io oo		30a		Х
b			be the arrangement in Part II.							
31			nization have a gift acceptance p	oolicy that re	equires the review o	of any nonstandard contribu	itions?	31	х	
			nization hire or use third parties of							
		tributions?	•		_	•		32a	х	
b	If "Y	'es," descri	be in Part II.							
33	If the	e organizat	ion didn't report an amount in co	olumn (c) for	r a type of property	for which column (a) is che	ecked,			
	desc	cribe in Par	t II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2020

032142 11-23-20 Schedule M (Form 990) 2020

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 ALLTANCE

Employer identification number 23-7353532

DI MIKI B 1000 BINK MEHIMEE	Z3 733333Z
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:	
ST. MARY'S DISTRIBUTED NEARLY 1.3 MILLION EFBS DURING THE YEAR.	
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). MORE THAN 123	
MILLION POUNDS OF FOOD WERE DISTRIBUTED DURING THE YEAR, INCLUDING	
NEARLY 34 MILLION POUNDS OF FRESH PRODUCE AND MORE THAN 14,000 HOLIDAY	
TURKEYS AND FAMILY MEALS.	
MOBILE PANTRIES: NOT EVERYONE CAN COME TO A ST. MARY'S FOOD BANK	
LOCATION FOR EMERGENCY BOXES, SO THE AGENCY EXPANDED ITS 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 WITH	
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 206	
SITES IN BOTH RURAL AND URBAN LOCATIONS, BRINGS FOOD DIRECTLY TO	
NEIGHBORHOODS IN THE GREATEST NEED. THROUGH THIS PROGRAM, AS WELL AS	
1,653 OTHER DISTRIBUTION EVENTS, ST. MARY'S PROVIDED MORE THAN 14.2	
MILLION POUNDS OF FOOD.	
BACKPACK PROGRAM: THE BACKPACK PROGRAM PROVIDES "CHRONICALLY HUNGRY"	

ARIZONA CHILDREN AND THEIR FAMILIES WITH NON-PERISHABLE FOOD. PRIMARILY LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization ST MARY'S FOOD BANK ALLIANCE	Employer identification number 23-7353532
MEALS THAT KIDS CAN TAKE HOME AND EAT ON WEEKENDS WHEN NOT IN SCHOOL.	
ST. MARY'S DISTRIBUTED 194,360 BACKPACKS DURING FISCAL YEAR 2020-2021	
USING A NO-CONTACT DRIVE-THRU 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 CAN PROCURE POPULAR FOOD	
ITEMS, WHICH ARE NOT NORMALLY AVAILABLE AS DONATIONS, AT WHOLESALE	
PRICES AND PASS THE SAVINGS ON TO ITS AGENCIES.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	
COMMUNITY CENTERS AND CITY PARKS & RECREATION DEPARTMENTS. THE FOOD	
COMPONENT ENSURES THAT THE CHILDREN RECEIVE A NUTRITIOUS LATE AFTERNOON	
MEAL, WHICH ESPECIALLY BENEFITS THOSE WHO MIGHT NOT HAVE AN EVENING	
MEAL AT HOME.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
ST. MARY'S FOOD BANK SKILLS CENTER. FOR 20 YEARS, ST. MARY'S HAS	
CONDUCTED A VERY SUCCESSFUL WORKFORCE DEVELOPMENT PROGRAM CALLED	
COMMUNITY KITCHEN THAT PREPARES PEOPLE WHO ARE IN POVERTY AND HAVE	
BARRIERS TO EMPLOYMENT FOR RESTAURANT CAREERS. HOWEVER,	
PANDEMIC-RELATED SOCIAL DISTANCING AND OTHER ISSUES DECREASED THE	
NUMBER OF RESTAURANT-RELATED JOBS AVAILABLE IN THE VALLEY. AS A RESULT,	
WE BEGAN LOOKING AT OTHER INDUSTRIES IN NEED OF WORKERS THAT WE CAN	
TRAIN. ST. MARY'S HAS TWO LARGE WAREHOUSES AND DOZENS OF WORKERS TO	
RECEIVE, STORE AND PREPARE MILLIONS OF TONS OF FOOD FOR DISTRIBUTION	
EACH YEAR. ST. MARY'S HAS DECADES OF EXPERIENCE TRAINING PEOPLE FOR	
WAREHOUSE JOBS, WHICH IS WHY IT LAUNCHED ITS LIFT PROGRAM IN 2020 TO	Schodulo O (Form 990 or 990 E7) 2020

Name of the organization ST MARY'S FOOD BANK ALLIANCE	Employer identification number 23-7353532
GIVE (PRIMARILY) HOMELESS AND RECENTLY INCARCERATED PEOPLE WHO WISH TO	
IMPROVE THEIR LIVES THE OPPORTUNITY TO SECURE A WAREHOUSE JOB. LIKE	
COMMUNITY KITCHEN, THOSE IN THE TRAINING PROGRAM GAIN SKILLS THROUGH	
HANDS-ON TRAINING AND CLASSROOM STUDIES TO QUALIFY FOR AND SECURE JOBS	
OFFERING LIVABLE WAGES, BENEFITS, AND OPPORTUNITIES FOR ADVANCEMENT.	
DURING THE PAST DECADE, COMMUNITY KITCHEN HAS PROVIDED THOUSANDS OF	
MEALS FOR CHILDREN AND OTHERS IN NEED, WHILE TRANSFORMING THE LIVES OF	
MANY PEOPLE WHO COMPLETED THE TRAINING AND BECAME EMPLOYED THROUGH THE	
PROGRAM. IN ADDITION TO TRAINING, EACH STUDENT RECEIVES JOB-PLACEMENT	
ASSISTANCE AND SUPPORT FOLLOWING GRADUATION, LIFT AND COMMUNITY KITCHEN	
FALL UNDER THE ST. MARY'S FOOD BANK SKILLS CENTER. THESE PROGRAMS	
GRADUATED 29 STUDENTS DURING THE YEAR.	
EXPENSES \$ 808,015. INCLUDING GRANTS OF \$ 0. REVENUE \$ 6,320.	
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	

Name of the organization ST MARY'S FOOD BANK ALLIANCE	Employer identification number 23-7353532
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.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S	
WEBSITE. THE ORGANIZATION GENERALLY MAKES ITS ARTICLES OF INCORPORATION,	
BY-LAWS, AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON	
REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN BENEFICIAL INTEREST IN PERPETUAL TRUST 953,901.	

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

Part I Identification of Disregarded Entities. Comple	te if the organization answered "Yes"	on Form 990, Part IV, line 33	3.							
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) Total inco	me End-of-yea	I .	ssets Direct co		(f) Direct controllin entity)
	-									
	-									
	_									
	_									
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ntions. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34, b	pecause it had one	or more rela	ted tax-exer	npt			
(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	Direct co	f) ontrolling tity		g) 512(b)(13) rolled ity?		
				501(c)(3))			Yes	No		
SMFB FOUNDATION - 27-0277109 2831 N 31ST AVE PHOENIX, AZ 85009	LONG-TERM FINANCIAL SUPPORT OF ST MARY'S FOOD BANK ALLIANCE	ARIZONA	501(C)(3)	LINE 12A, I	INE 12A, I N/A			Х		
	-									
	-									

ST MARY'S FOOD BANK ALLIANCE

Part III	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990,	, Part IV, line 34, because it had o	ne or more related
Partill	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)	(j) General emanaging 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		
-											
	-										

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

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

1	During the tax year, did the organization engage in any of the following transactions	s with one or more re	elated organizations listed in	n Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	<i>'</i>			1a		Х
	Gift, grant, or capital contribution to related organization(s)				1b	Х	
	Gift, grant, or capital contribution from related organization(s)				1c		Х
	Loans or loan guarantees to or for related organization(s)				1d		Х
	Loans or loan guarantees by related organization(s)				1e		Х
f	Dividends from related organization(s)				1f		Х
	Sale of assets to related organization(s)				1g		Х
h	Purchase of assets from related organization(s)				1h		Х
i	Exchange of assets with related organization(s)				1i		Х
i	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х
•	7 1 1 7						
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х
	Performance of services or membership or fundraising solicitations for related organ				11	х	
	Performance of services or membership or fundraising solicitations by related organ				1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization				1n	х	
	Sharing of paid employees with related organization(s)				10	х	
р	Reimbursement paid to related organization(s) for expenses				1р		х
q	Reimbursement paid by related organization(s) for expenses				1q		Х
r	Other transfer of cash or property to related organization(s)				1r		Х
s	Other transfer of cash or property from related organization(s)				1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on wh						
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved		
1)							
2)							
_,							
3)							
4)							
5)							
6)							

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	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership
	-									