

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2016
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the **2016** calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ST MARY'S FOOD BANK ALLIANCE		D Employer identification number 23-7353532
	Doing business as		E Telephone number 602-242-3663
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	2831 N 31ST AVE		G Gross receipts \$ 165,467,446.
	City or town, state or province, country, and ZIP or foreign postal code PHOENIX, AZ 85009		
F Name and address of principal officer: TOM KERTIS SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶	

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

J Website: ▶ **WWW.FIRSTFOODBANK.ORG**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **1967** **M** State of legal domicile: **AZ**

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: ALLEVIATE HUNGER THROUGH GATHERING AND DISTRIBUTION OF FOOD.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	225
	6 Total number of volunteers (estimate if necessary)	6	75207
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	140,085,369.	160,559,103.
	9 Program service revenue (Part VIII, line 2g)	3,992,171.	4,038,145.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	143,584.	53,368.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	181,921.	196,117.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	144,403,045.	164,846,733.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	119,726,557.	136,319,264.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	11,151,346.	11,490,013.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	42,000.	44,500.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,089,004.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	12,287,314.	12,240,195.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	143,207,217.	160,093,972.	
19 Revenue less expenses. Subtract line 18 from line 12	1,195,828.	4,752,761.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 30,703,586.	End of Year 31,185,698.
	21 Total liabilities (Part X, line 26)	7,867,421.	3,524,438.
	22 Net assets or fund balances. Subtract line 21 from line 20	22,836,165.	27,661,260.

Part II Signature Block

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

Sign Here	Signature of officer	Date			
	TOM KERTIS, PRESIDENT & CEO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name AMY A. O'LOUGHLIN	Preparer's signature	Date 05/16/18	Check if self-employed <input type="checkbox"/>	PTIN P00869687
	Firm's name ▶ CBIZ MHM, LLC	Firm's EIN ▶ 34-1884125	Phone no. 602-264-6835		
Firm's address ▶ 4722 N 24TH ST, STE 300		PHOENIX, AZ 85016			

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO ALLEVIATE HUNGER THROUGH THE GATHERING AND DISTRIBUTION OF FOOD WHILE ENCOURAGING SELF-SUFFICIENCY THROUGH COLLABORATION, ADVOCACY AND EDUCATION.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 143,919,639. including grants of \$ 132,036,311.) (Revenue \$ 684,100.) DISTRIBUTES EMERGENCY FOOD BOXES, AT NO COST, TO INDIVIDUALS AND FAMILIES IN NEED. EMERGENCY FOOD BOXES ARE DESIGNED TO PROVIDE TEMPORARY FOOD ASSISTANCE DURING TIMES OF CRISIS WHILE A MORE PERMANENT SOLUTION IS FOUND. A MAJORITY OF THOSE RECEIVING EMERGENCY FOOD BOXES INCLUDES THE ELDERLY, CHILDREN, WORKING FAMILIES AND THE HOMELESS. DESIGNED FOR CLIENTS OF THE FOOD BANK'S PARTNER AGENCIES WHO FIND THEMSELVES IN A SITUATION WHERE FOOD IS AN EMERGENCY ESSENTIAL, EACH BOX PROVIDES A 3-DAY SUPPLY OF NUTRITIOUS FOOD TO FAMILIES - OFFERING A HELPING HAND UNTIL THEY HAVE MORE PERMANENT ASSISTANCE. AGENCY SHOPPING AND SCHOOL AND COMMUNITY DISTRIBUTIONS: ST. MARY'S PROVIDES PERISHABLE FOOD, FREE OF CHARGE, TO HUNDREDS OF LOCAL AGENCIES THAT, IN TURN, PROVIDE FOOD TO THEIR CLIENTS. PROVIDES DISTRIBUTIONS

4b (Code:) (Expenses \$ 4,646,460. including grants of \$ 4,224,564.) (Revenue \$) COMMODITY SUPPLEMENTAL FOOD PROGRAMS (CSFP): THE CSFP PROGRAM IS A FEDERALLY FUNDED PROGRAM WHICH WORKS TO IMPROVE THE HEALTH OF LOW-INCOME ELDERLY PEOPLE AT LEAST 60 YEARS OF AGE BY SUPPLEMENTING THEIR DIETS WITH NUTRITIOUS USDA COMMODITY FOODS.

4c (Code:) (Expenses \$ 3,777,021. including grants of \$ 58,389.) (Revenue \$ 3,491,641.) KIDS CAFE: "BECAUSE NO CHILD DESERVES TO GO TO BED HUNGRY," KIDS CAFE AIMS TO ALLEVIATE CHILDHOOD HUNGER IN ARIZONA BY PROVIDING NUTRITIOUS MEALS TO CHILDREN AT RISK OF HUNGER. KIDS CAFE SERVES MORE THAN 7,000 MEALS A DAY DURING THE SCHOOL YEAR AND MORE THAN 9,500 MEALS A DAY DURING THE SUMMER MONTHS ALL AT A SAFE, ACCESSIBLE AND NURTURING ENVIRONMENT TO BENEFIT AT-RISK CHILDREN. OFTEN PART OF AN AFTER SCHOOL PROGRAM THAT ALSO INCLUDES TUTORING, HOMEWORK STUDY GROUPS AND ATHLETIC ACTIVITIES, KIDS CAFE PARTNERS WITH AREA CHURCHES, SCHOOLS, COMMUNITY CENTERS AND CITY PARKS & RECREATION DEPARTMENTS TO PROVIDE MEALS FOR KIDS WHO MIGHT NOT HAVE A DEPENDABLE EVENING MEAL AT HOME.

4d Other program services (Describe in Schedule O.) (Expenses \$ 767,321. including grants of \$) (Revenue \$ 45,711.)

4e Total program service expenses 153,110,441.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
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	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for line numbers (1a-14b), descriptions of questions, and Yes/No columns. Includes sub-questions for various IRS forms and financial reporting requirements.

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

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

Section A. Governing Body and Management

Table with columns for question number, description, and Yes/No responses. Includes questions 1a, 1b, 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, and 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with columns for question number, description, and Yes/No responses. Includes questions 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, and 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AZ
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: 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.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN DEMETRA CHAIRMAN	2.00	X		X				0.	0.	0.
(2) MARC ISAACS VICE CHAIRMAN	2.00	X		X				0.	0.	0.
(3) NICKI SCHILLHAHN-AMOS TREASURER	2.00	X		X				0.	0.	0.
(4) SUSAN WAIN SECRETARY	2.00	X		X				0.	0.	0.
(5) TROY MCNEMAR IMMEDIATE PAST CHAIRMAN	1.00	X		X				0.	0.	0.
(6) MARY BENNETT DIRECTOR	1.00	X						0.	0.	0.
(7) JOHN GINTY DIRECTOR	1.00	X						0.	0.	0.
(8) STEPHAN KING DIRECTOR	1.00	X						0.	0.	0.
(9) LISA GLENN DIRECTOR	1.00	X						0.	0.	0.
(10) PATTY KING DIRECTOR	1.00	X						0.	0.	0.
(11) SHERYL HILDEBRAND DIRECTOR	1.00	X						0.	0.	0.
(12) PETER LARSON DIRECTOR	1.00	X						0.	0.	0.
(13) TERRY MORRISON DIRECTOR	1.00	X						0.	0.	0.
(14) ERIK OLSSON DIRECTOR	1.00	X						0.	0.	0.
(15) PAUL SWARTZ DIRECTOR	1.00	X						0.	0.	0.
(16) GENE PETERSON DIRECTOR	1.00	X						0.	0.	0.
(17) TOM CLARK DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JILLIAN FELTHAM DIRECTOR	1.00	X					0.	0.	0.	
(19) JUDD NORRIS DIRECTOR	1.00	X					0.	0.	0.	
(20) JOHN ROUSSEL DIRECTOR	1.00	X					0.	0.	0.	
(21) TOM KERTIS PRESIDENT & CEO	40.00 2.00			X			216,471.	0.	28,488.	
(22) SARAH STUCKEY CFO	40.00 2.00			X			166,596.	0.	19,293.	
(23) LISA NOTARO-GOIN CDO	40.00			X			160,705.	0.	22,188.	
(24) DUANE LAWSON COO	40.00			X			143,242.	0.	5,843.	
(25) MARCOS GAUCIN SR. DIRECTOR OF FINANCE	40.00				X		108,149.	0.	5,547.	
1b Sub-total							795,163.	0.	81,359.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							795,163.	0.	81,359.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 5

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
GRIZZARD COMMUNICATION GROUP, 229 PEACHTREE ST NE STE 1400, ATLANTA, GA	MARKETING AND ADVERTISING	1,371,885.
PIONEER DISTRIBUTING CO 1300 N 24TH AVE, PHOENIX, AZ 85009	LOGISTICS/DISTRIBUTION SERVICES	473,987.
SAB SOUTHWEST ARCHITECTURAL BUILDERS 3826 N THIRD ST, PHOENIX, AZ 85012	ARCHITECTURAL SERVICES	344,269.
FEEDING AMERICA 35 E WACKER DR STE 2000, CHICAGO, IL 60601	TRANSPORT SERVICE	337,321.
THINK TANK MEDIA AND MARKETING, 727 NORTH 1ST ST, SUITE 340, ST LOUIS, MO 63102	MEDIA AND MARKETING SERVICES	252,816.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 8

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 247,029.				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d 615,504.				
	e Government grants (contributions)	1e 2,302,642.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 157,393,928.				
	g Noncash contributions included in lines 1a-1f: \$	138,128,318.				
	h Total. Add lines 1a-1f	▶ 160,559,103.				
	Program Service Revenue	2 a KID'S CAFE REVENUE	Business Code 624210	3,491,641.	3,491,641.	
b SOURCE PROGRAM		900099	373,149.	373,149.		
c SHARED MAINTENANCE FEE		900099	127,644.	127,644.		
d CK CATERING		624210	45,711.	45,711.		
e						
f All other program service revenue						
g Total. Add lines 2a-2f		▶ 4,038,145.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶ 122,381.			122,381.	
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
	6 a Gross rents	(i) Real	72,000.			
		(ii) Personal				
		b Less: rental expenses	0.			
		c Rental income or (loss)	72,000.			
	d Net rental income or (loss)	▶ 72,000.	72,000.			
	7 a Gross amount from sales of assets other than inventory	(i) Securities	549,550.			
		(ii) Other	2,150.			
		b Less: cost or other basis and sales expenses	529,042.	91,671.		
		c Gain or (loss)	20,508.	-89,521.		
	d Net gain or (loss)	▶ -69,013.			-69,013.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events		▶				
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue		Business Code				
11 a CITRUS GLEANING/OTHER	900099	91,922.	91,922.			
	b RECYCLING INCOME	900099	19,385.	19,385.		
	c INSURANCE SETTLEMENT	900099	12,210.		12,210.	
	d All other revenue	900099	600.		600.	
e Total. Add lines 11a-11d	▶ 124,117.					
12 Total revenue. See instructions.	▶ 164,846,733.	4,221,452.	0.	66,178.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	108,813,538.	108,813,538.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	27,505,726.	27,505,726.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	875,247.	160,739.	527,925.	186,583.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,245,886.	5,994,748.	922,454.	1,328,684.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	182,686.	124,604.	21,680.	36,402.
9 Other employee benefits	1,539,291.	1,236,388.	115,886.	187,017.
10 Payroll taxes	646,903.	464,346.	77,204.	105,353.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	44,500.			44,500.
f Investment management fees	12,348.		12,348.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	491,600.	105,668.	324,697.	61,235.
12 Advertising and promotion				
13 Office expenses	145,737.	59,000.	15,992.	70,745.
14 Information technology	493,526.	50,326.	442,300.	900.
15 Royalties				
16 Occupancy	737,957.	734,736.	3,221.	
17 Travel	115,774.	51,939.	19,137.	44,698.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	54,091.	34,123.	8,578.	11,390.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,683,865.	1,598,887.	84,978.	
23 Insurance	290,422.	254,566.	29,356.	6,500.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD PURCHASES	3,287,342.	3,287,342.		
b VEHICLE EXPENSE	1,056,303.	1,052,201.	71.	4,031.
c RENTAL/LEASE	762,684.	677,731.	83,393.	1,560.
d ADMINISTRATION EXPENSE	564,200.	178,963.	157,519.	227,718.
e All other expenses	2,544,346.	724,870.	47,788.	1,771,688.
25 Total functional expenses. Add lines 1 through 24e	160,093,972.	153,110,441.	2,894,527.	4,089,004.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,489,164.	1	3,823,787.
	2 Savings and temporary cash investments	529,265.	2	22,598.
	3 Pledges and grants receivable, net	1,508,500.	3	1,284,414.
	4 Accounts receivable, net	976,857.	4	745,136.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	5,001,533.	8	5,073,891.
	9 Prepaid expenses and deferred charges	92,469.	9	84,183.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 28,956,342.		
	b Less: accumulated depreciation	10b 13,048,014.		
	11 Investments - publicly traded securities	3,463,940.	11	3,627,857.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,285,970.	15	615,504.
16 Total assets. Add lines 1 through 15 (must equal line 34)	30,703,586.	16	31,185,698.	
Liabilities	17 Accounts payable and accrued expenses	1,504,095.	17	1,370,430.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	3,834,600.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,528,726.	25	2,154,008.
	26 Total liabilities. Add lines 17 through 25	7,867,421.	26	3,524,438.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	22,288,825.	27	27,278,259.
	28 Temporarily restricted net assets	541,340.	28	383,001.
	29 Permanently restricted net assets	6,000.	29	0.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	22,836,165.	33	27,661,260.	
34 Total liabilities and net assets/fund balances	30,703,586.	34	31,185,698.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	164,846,733.
2	Total expenses (must equal Part IX, column (A), line 25)	2	160,093,972.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,752,761.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	22,836,165.
5	Net unrealized gains (losses) on investments	5	72,334.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	27,661,260.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form **990** (2016)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public
Inspection

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

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	130,949,540.	125,868,402.	120,724,369.	140,085,369.	160,559,103.	678,186,783.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	130,949,540.	125,868,402.	120,724,369.	140,085,369.	160,559,103.	678,186,783.
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)						39,678,355.
6 Public support. Subtract line 5 from line 4.						638,508,428.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	130,949,540.	125,868,402.	120,724,369.	140,085,369.	160,559,103.	678,186,783.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,854.	124,632.	90,032.	147,600.	194,381.	565,499.
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.)	313,155.	482,370.	227,793.	181,921.	124,117.	1,329,356.
11 Total support. Add lines 7 through 10						680,081,638.
12 Gross receipts from related activities, etc. (see instructions)					12	18,383,977.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	93.89 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	96.42 %
16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		
c <input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see instructions).</i>		
2 Activities Test. <i>Answer (a) and (b) below.</i>		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

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.)

Area with multiple horizontal lines for supplemental information.

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Name of the organization

ST MARY'S FOOD BANK ALLIANCE

Employer identification number

23-7353532

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private 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, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

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

Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 29,567,723.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 15,998,448.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 9,344,562.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 4,173,139.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 4,032,903.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 3,542,864.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

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

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	_____ _____ _____	\$ 3,287,497.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	_____ _____ _____	\$ 3,834,600.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	FOOD DONATIONS _____ _____ _____	\$ 29,567,723.	06/30/17
2	FOOD DONATIONS _____ _____ _____	\$ 15,998,448.	06/30/17
3	FOOD DONATIONS _____ _____ _____	\$ 9,344,562.	06/30/17
4	FOOD DONATIONS _____ _____ _____	\$ 4,173,139.	06/30/17
5	FOOD DONATIONS _____ _____ _____	\$ 4,032,903.	06/30/17
6	FOOD DONATIONS _____ _____ _____	\$ 3,542,864.	06/30/17

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

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
7	FOOD DONATIONS _____ _____ _____	\$ 3,287,497.	06/30/17
8	LOAN FORGIVENESS _____ _____ _____	\$ 3,834,600.	12/21/16
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

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

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

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2016
Open to Public Inspection

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

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

(ii) Assets included in Form 990, Part X

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

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

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2016

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	6,000.	6,000.	6,000.	6,000.	6,000.
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs	6,000.				
f Administrative expenses					
g End of year balance		6,000.	6,000.	6,000.	6,000.

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

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

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

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

- (i) unrelated organizations
- (ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,202,865.		2,202,865.
b Buildings		17,701,305.	7,497,908.	10,203,397.
c Leasehold improvements				
d Equipment		8,873,250.	5,550,106.	3,323,144.
e Other		178,922.		178,922.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				15,908,328.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITY	266,421.
(3) LEASE OBLIGATIONS	1,887,587.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	2,154,008.

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	165,922,312.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a 72,335.		
b	Donated services and use of facilities	2b 511,975.		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d 491,269.		
e	Add lines 2a through 2d		2e	1,075,579.
3	Subtract line 2e from line 1		3	164,846,733.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	164,846,733.

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

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

1	Total expenses and losses per audited financial statements		1	158,562,670.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a 511,975.		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	511,975.
3	Subtract line 2e from line 1		3	158,050,695.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b 2,043,277.		
c	Add lines 4a and 4b		4c	2,043,277.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	160,093,972.

Part XIII Supplemental Information.

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

PART V, LINE 4:

DURING THE YEAR ENDED JUNE 30, 2017, A PREVIOUSLY PERMANENTLY RESTRICTED

ENDOWMENT DONATION TOTALING \$6,000 WAS RELEASED FROM RESTRICTION.

PART X, LINE 2:

ST. MARY'S EVALUATES THEIR UNCERTAIN TAX POSITIONS, IF ANY, ON A CONTINUAL

BASIS THROUGH REVIEW OF THEIR POLICIES AND PROCEDURES, REVIEW OF THEIR

REGULAR TAX FILINGS, AND DISCUSSIONS WITH OUTSIDE EXPERTS. AT JUNE 30,

2017, MANAGEMENT BELIEVES ST. MARY'S DID NOT HAVE ANY UNCERTAIN TAX

POSITIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

Part XIII Supplemental Information (continued)

REVENUE REPORTED BY SMFB FOUNDATION 3,193,765.

ELIMINATING ENTRIES -2,794,167.

LOSS ON DISPOSAL OF ASSETS 91,671.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 491,269.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

EXPENSES REPORTED BY SMFB FOUNDATION -659,219.

ELIMINATING ENTRIES 2,794,167.

LOSS ON DISPOSAL OF ASSETS -91,671.

TOTAL TO SCHEDULE D, PART XII, LINE 4B 2,043,277.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts			
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: KELLY HART AND ASSOCIATES

(I) ADDRESS OF FUNDRAISER: 6042 E WALTANN LN, SCOTTSDALE, AZ 85254

PART I, LINE 2B, COLUMN (V):

PAYMENTS FOR PROFESSIONAL GRANT WRITING SERVICES.

Part IV Supplemental Information (continued)

Lined area for supplemental information.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

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

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [] No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 8 columns: (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.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 250
3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2016)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of 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
ALL FAITH COMMUNITY SERVICES (CSFP) - 214 S 5TH ST - BUCKEYE, AZ 85326	54-2160931	501(C)(3)	0.	2,415,409.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ANDRE HOUSE OF AZ INC (SOUP K) 213 S 11TH AVE PHOENIX, AZ 85007	86-0717841	501(C)(3)	0.	263,906.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
APACHE JUNCTION FOOD BANK 575 NORTH IDAHO RD. #701 APACHE JUNCTION, AZ 85119	86-0454767	501(C)(3)	0.	92,205.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
AREA AGENCY ON AGING REGION 1 (RESIDENTIAL) - CONFIDENTIAL - PHOENIX, AZ 85014	82-0586529	501(C)(3)	0.	398,837.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ARIZONA BAPTIST CHILDREN'S SERVICES (TEFAP PA) - 2632 W AUGUSTA AVE - PHOENIX, AZ 85051	86-6053028	501(C)(3)	0.	14,451.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ARIZONA ODD FELLOW-REBEKAH (CSFP) 222 E INDIANOLA AVE PHOENIX, AZ 85012	86-6000256	501(C)(3)	0.	575,828.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ARKANSAS FOOD BANK 4301 W 65TH ST LITTLE ROCK, AR 72209	71-0596734	501(C)(3)	0.	41,666.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
AZ RETIREMENT HOME I AND II (CSFP) 7310 E PALM LN SCOTTSDALE, AZ 85257	86-0711505	501(C)(3)	0.	10,756.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
BANNER OLIVE BRANCH SENIOR CTR (GR) - 11250 N 107TH AVE - SUN CITY, AZ 85351	94-2745413	501(C)(3)	0.	1,956,220.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of 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
BEAVER CREEK SCHOOL 4810 E BEAVER CREEK RD RIMROCK, AZ 86335	86-0343804	501(C)(3)	0.	162,253.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
BETHESDA COMMUNITY CHURCH (SOUP K) 850 E JONES AVE PHOENIX, AZ 85040	86-0799742	501(C)(3)	0.	43,796.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
BIRDSPRINGS CHAPTER HOUSE ON N-15 MILE POST 28 WINSLOW, AZ 86047		501(C)(3)	0.	87,287.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
BLACK FAMILY CHILD SVCS (GR) 1522 E SOUTHERN AVE STE 1 PHOENIX, AZ 85040	86-0480412	501(C)(3)	0.	91,906.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
BREAD OF LIFE MISSIONS INC 1575 S SULLIVAN LN 28 CAMP VERDE, AZ 86322	86-0814302	501(C)(3)	0.	621,341.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
BULLHEAD CHRISTIAN CTR 590 HANCOCK RD BULLHEAD CITY, AZ 86442	86-0693439	501(C)(3)	0.	999,475.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
BULLHEAD FOOD FOR FAMILIES 590 HANCOCK RD KINGMAN, AZ 86401	47-4838008	501(C)(3)	0.	1,221,935.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CAMERON ASSEMBLY OF GOD 1MI SW OF CAMERON TRADING POST CAMERON, AZ 86020	86-0441521	501(C)(3)	0.	167,773.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CARE AND SHARE FOOD BANK 2605 PREAMBLE POINT COLORADO SPRINGS, CO 80915	84-0731930	501(C)(3)	0.	338,843.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of 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
CARING HANDS OF PINAL CO CSFP 139 W 1ST ST CASA GRANDE, AZ 85122	86-6000556	501(C)(3)	0.	383,429.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CARING HEARTS MINISTRY INC 4195 LYNN DR FORT MOHAVE, AZ 86426	27-0411265	501(C)(3)	0.	155,869.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CARTWRIGHT SD PERALTA ELEMENTARY SCHOOL - 7125 W ENCANTO BLVD - PHOENIX, AZ 85033	86-6000517	GOVERNMENT	0.	228,793.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CENTRAL TEXAS FOOD BANK 6500 METROPOLIS DR AUSTIN, TX 78744	74-2217350	501(C)(3)	0.	57,710.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CENTRAL UNITED METHODIST CH (SOUP K) - 1875 N CENTRAL AVE - PHOENIX, AZ 85004	86-0111426	501(C)(3)	0.	7,296.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CHATTANOOGA AREA FOOD BANK 2009 CURTAIN POLE RD CHATTANOOGA, TN 37406	62-0867645	501(C)(3)	0.	51,928.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CHILCHINBETO COMMUNITY FOOD BANK 2 MI S OF US 160 ON N59 AT CHAPTER KAYENTA, AZ 86033		501(C)(3)	0.	67,864.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CHINLE UNIFIED SCHOOL DISTRICT (SCHOOL PA) - P O BOX 587 - CHINLE, AZ 86503		GOVERNMENT	0.	7,059.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CHRIST EVANGELICAL LUTHERAN CHURCH (PA) - 918 S LITCHFIELD - GOODYEAR, AZ 85338	86-0476656	501(C)(3)	0.	82,221.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of 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
CHRIST THE VICTORY LUTHERAN CHURCH 6175 EAST ARIZONA FARMS RD FLORENCE, AZ 85128	47-0987895	501(C)(3)	0.	17,336.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CHRISTIAN FAITH FELLOWSHIP 34821 W BROADWAY RD TONOPAH, AZ 85354	80-0031759	501(C)(3)	0.	368,950.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CHURCH FOR THE NATIONS (PA) 6225 N CENTRAL AVE PHOENIX, AZ 85012	75-3114849	501(C)(3)	0.	63,204.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CHURCH OF GOD OF PROPHECY (PA) 5141 N 23RD AVE PHOENIX, AZ 85015	86-0808790	501(C)(3)	0.	224,191.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CIRCLE OF PAGE (GR) 801 AQUA AVE PAGE, AZ 86040	30-0170553	501(C)(3)	0.	695,385.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CIRCLE THE CITY (REHAB) 333 W INDIAN SCHOOL RD PHOENIX, AZ 85013	26-2420730	501(C)(3)	0.	136,929.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CITY HARVEST FOOD RESCUE FACILITY 55-01 2ND STREET LONG ISLAND CITY, NY 11101	13-3170676	501(C)(3)	0.	53,732.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CITY OF AVONDALE (MP) 1007 S 3RD ST AVONDALE, AZ 85323	86-6000233	GOVERNMENT	0.	171,962.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CITY OF TOLLESON CAP (TEFAP PA) 9555 W VAN BUREN TOLLESON, AZ 85353	47-2304025	GOVERNMENT	0.	140,935.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of 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
CIVITAN FOUNDATION INC (DAYCARE) 12635 N 42ND ST PHOENIX, AZ 85032	23-7036797	501(C)(3)	0.	29,162.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CIVITAN FOUNDATION INC CAMP 5008 N CIVITAN RD WILLIAMS, AZ 86046	47-0851633	501(C)(3)	0.	190,553.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
COLORADO RIVER FOOD BANK 240 E LAUGHLIN CIVIC DR BULLHEAD CITY, AZ 86442	88-0345703	501(C)(3)	0.	781,232.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
COMMUNITY CHRISTIAN FELLOWSHIP 13990 DATELAND RD YUCCA, AZ 86438	94-3455015	501(C)(3)	0.	60,588.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
COMMUNITY FOOD BANK 3403 E CENTRAL AVE FRESNO, CA 93725	77-0320851	501(C)(3)	0.	644,146.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
COMMUNITY FOOD BANK- NOGALES 2636 N DONNA AVE NOGALES, AZ 85621	51-0192519	501(C)(3)	0.	2,949,906.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
COMMUNITY HOPE CENTERS (GR) 14185 N 83RD AVE PEORIA, AZ 85381	27-0957157	501(C)(3)	0.	333,065.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
COMMUNITY PANTRY GALLUP PO BOX 520 GALLUP, NM 87305	85-0460193	501(C)(3)	0.	356,706.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CONCERNED CITIZENS FOR COMM HEALTH (CSFP) - 7700 E ROOSEVELT - SCOTTSDALE, AZ 85258	95-3416943	501(C)(3)	0.	202,062.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of 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
CONGRESS COMMUNITY CHURCH INC 27400 SANTA FE CONGRESS, AZ 85332	86-0558310	501(C)(3)	0.	277,511.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CONGRESS FIRE DEPARTMENT CSFP 26733 SANTA FE RD CONGRESS, AZ 85332	94-2882535	GOVERNMENT	0.	117,706.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CORDES LAKES COMMUNITY ASSOC 16357 S CORDES LAKES DR CORDES LAKES, AZ 86333	86-0444010	501(C)(3)	0.	278,795.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CORNERSTONE MISSION PROJECT 3049 SYCAMORE ST KINGMAN, AZ 86409	86-0960036	501(C)(3)	0.	167,408.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
COTTONWOOD CHRISTIAN ASSEMBLY INC 750 E MINGUS AVE COTTONWOOD, AZ 86326	23-7216131	501(C)(3)	0.	883,622.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
COTTONWOOD SENIOR CENTER HWY 191 AND ROUTE N4 BLUE GAP, AZ 86520	86-0718395	501(C)(3)	0.	232,447.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
COVENANT OF GRACE MINISTERIOS PACTO DE GRACIA - 906 W PEORIA AVE - PHOENIX, AZ 85029	86-0602290	501(C)(3)	0.	74,598.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CPLC (CHICANOS POR LA CAUSA) 3639 W LINCOLN ST PHOENIX, AZ 85009	86-0227210	501(C)(3)	0.	725,640.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CRIMSON PARTNERS LLC BUILDING 469 ROUTE 64 GRAND CANYON, AZ 86023	27-1604768	501(C)(3)	0.	95,369.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of 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
CROSSROADS INC (RES) 4201 N. 16TH STREET, SUITE 110 PHOENIX, AZ 85016	86-0182987	501(C)(3)	0.	70,059.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
CULTURAL CUP FOOD BANK 342 E THOMAS RD PHOENIX, AZ 85012	81-0622721	501(C)(3)	0.	205,552.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
DAAKE HALANI DEVELOPMENT INC JCT 191 AND 59 CHAPTER HOUSE PREMIS MANY FARMS, AZ 86538	86-0887359	501(C)(3)	0.	29,795.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
DAMION GOSA MEMORIAL FOUNDATION INC - 2102 E ALTA VISTA RD - PHOENIX, AZ 85042	45-5441868	501(C)(3)	0.	57,439.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
DENNEHOTSO SENIOR CTR E HIGHWAY 160 .5 MILES AFTER MILE M DENNEHOTSO, AZ 86535		501(C)(3)	0.	62,134.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
DESERT CHRISTIAN FELLOWSHIP 1445 W NORTHERN AVE PHOENIX, AZ 85021	86-0731548	501(C)(3)	0.	276,144.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
DESERT MISSION FOOD BANK 9229 N 4TH ST PHOENIX, AZ 85020	88-0096941	501(C)(3)	0.	4,956,849.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
DRUG ELIMINATION FAMILY AWARENESS PROGRAM (PA) - 8561 N 61ST AVE - GLENDALE, AZ 85302	31-1521614	501(C)(3)	0.	14,708.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
DYSART COMMUNITY CENTER (MP) 14414 N EL MIRAGE RD EL MIRAGE, AZ 85335	86-6031134	501(C)(3)	0.	182,984.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of 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
EBONY HOUSE INC 6222 S 13TH ST PHOENIX, AZ 85042	86-0287878	501(C)(3)	0.	15,342.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
EL PASOANS FIGHTING HUNGER 9541 PLAZA CIRCLE EL PASO, TX 79927	45-2893839	501(C)(3)	0.	56,210.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
EXTENDED HANDS FOOD BANK 16548 E LASER DR SUITE 6 FOUNTAIN HILLS, AZ 85268	20-0873646	501(C)(3)	0.	39,639.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FAITH VISION MINISTRIES INC 110 LUPTON RD HOUCK, AZ 86506	65-1291107	501(C)(3)	0.	306,062.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FALLEN FEATHERS 9532 W CIELO GRANDE PEORIA, AZ 85383	01-0749446	501(C)(3)	0.	35,200.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FEEDING HOPE MARKET AND FOOD BANK 6027 W PALMAIRE AVE GLENDALE, AZ 85301	47-4887432	501(C)(3)	0.	149,153.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FEEDING SAN DIEGO 9455 WAPLES ST STE 135 SAN DIEGO, CA 92121	26-0457477	501(C)(3)	0.	137,242.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FIBCO FAMILY SVCS INC 1141 E JEFFERSON ST PHOENIX, AZ 85034	86-0434933	501(C)(3)	0.	149,310.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FIRE AND WATER INTERNATIONAL CHURCH - 1937 E DIAMOND ST - PHOENIX, AZ 85006	86-0928650	501(C)(3)	0.	27,234.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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FIRST SOUTHERN BAPTIST CH-PHX 3100 W CAMELBACK RD PHOENIX, AZ 85017	86-0137800	501(C)(3)	0.	50,767.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FIRST SOUTHERN BAPTIST CHURCH 11340 CIRCLE DR CORNVILLE, AZ 86325	86-6091209	501(C)(3)	0.	341,888.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FLAGSTAFF FAMILY FOOD CENTER 3805 E HUNTINGTON DR FLAGSTAFF, AZ 86004	86-0754044	501(C)(3)	0.	4,101,011.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FOOD BANK OF LINCOLN 4840 DORIS BAIR CIR SUITE A LINCOLN, NE 68504	47-0640293	501(C)(3)	0.	54,720.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FOOD BANK OF NORTHEAST ARKANSAS 3414 ONE PLACE JONESBORO, AR 72404	71-0810999	501(C)(3)	0.	46,924.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FOOD BANK OF NORTHERN NEVADA 550 ITALY DR MCCARRAN, NV 89434	94-2924979	501(C)(3)	0.	520,568.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FOOD BANK OF NORTHWEST LOUISIANA 2307 TEXAS AVE SHREVEPORT, LA 71103	72-1328890	501(C)(3)	0.	39,727.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FOOD BANK OF THE ROCKIES 10700 E 45TH AVE DENVER, CO 80239	84-0772672	501(C)(3)	0.	159,363.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FOOT HILLS FOOD BANK BLACK CANYON CITY CSFP - 34501 OLD BLACK CANYON HWY - BLACK CANYON CITY, AZ 85324	86-0619725	501(C)(3)	0.	1,569,298.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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FOUNDATION FOR SENIOR LIVING 200 S 9TH ST WILLIAMS, AZ 86046	86-0298945	501(C)(3)	0.	744,536.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FREDONIA SHARE AND CARE 100 E WOODHILL RD FREDONIA, AZ 86022		501(C)(3)	0.	63,030.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
FRIENDLY HOUSE INC (TEFAP PA) 723 S 1ST AVE PHOENIX, AZ 85003	86-0120506	501(C)(3)	0.	52,794.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
GENERATION CHURCH (GR) 11832 S WARNER ELLIOT LOOP PHOENIX, AZ 85044	86-0633920	501(C)(3)	0.	717,352.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
GILA BEND CAP (PA) 303 E PIMA ST GILA BEND, AZ 85337	86-0180965	501(C)(3)	0.	184,405.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
GILA BEND CAP ON EUCLID 202 N EUCLID AVD GILA BEND, AZ 85337		501(C)(3)	0.	23,123.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
GILA COMMUNITY FOOD BANK CSFP 317 HACKNEY AVE GLOBE, AZ 85501		501(C)(3)	0.	41,992.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
GLOBAL TRANSITIONS INC 906 W PEORIA AVE PHOENIX, AZ 85051	14-1945912	501(C)(3)	0.	111,722.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
GOSPEL OF FAITH CHURCH - ASHFORK (PANTRY) - LOT 104 BULLOCK RD - ASH FORK, AZ 86320	86-0441912	501(C)(3)	0.	408,950.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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GREATER BETHEL AME CHURCH 7040 S 40TH ST PHOENIX, AZ 85042	33-1012893	501(C)(3)	0.	229,780.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
GREATER BETHEL AME CHURCH 7040 S 40TH ST PHOENIX, AZ 85042	26-0072729	501(C)(3)	0.	258,657.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
GREATER CHICAGO FOOD DEPOSITORY 4100 W ANN LURIE PL CHICAGO, IL 60632	36-2971864	501(C)(3)	0.	158,062.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
HACIENDA DE LOS ARCOS 7529 E CULVER ST SCOTTSDALE, AZ 85257	86-6084067	501(C)(3)	0.	14,086.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
HARVEST CHURCH ASSEMBLY OF GOD INC GLENDALE - 8340 W NORTHERN AVE - GLENDALE, AZ 85305	45-2654221	501(C)(3)	0.	184,067.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
HARVEST REGIONAL FOOD BANK 3120 E 19TH STREET TEXARKANA, AR 71854	75-2671647	501(C)(3)	0.	45,010.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
HERITAGE FOSTER FAMILY SERVICES 65 N CENTRAL COLORADO CITY, AZ 86021	81-1584005	501(C)(3)	0.	300,887.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
HOLBROOK SENIOR CITIZENS ASSN 216 E JOY NEVIN AVE HOLBROOK, AZ 86025	86-0462642	501(C)(3)	0.	337,366.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
HOLBROOK UNIFIED SCHOOL DISTRICT NUMBER 3 - 600 W BUFFALO ST - HOLBROOK, AZ 86025	86-6007505	501(C)(3)	0.	17,779.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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HOPE FOR HUNGER (PRM) (PA) 5605 N 55TH AVE GLENDALE, AZ 85301	86-6057771	501(C)(3)	0.	5,610,262.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
HOUSE OF HOPE OF ARIZONA INC (PA) 4324 N 42ND AVE PHOENIX, AZ 85019	86-0911362	501(C)(3)	0.	18,994.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
HOUSE OF REFUGE SUNNYSLOPE INC 9835 N 7TH ST PHOENIX, AZ 85020	86-1026266	501(C)(3)	0.	551,795.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
HUALAPAI TRIBE (MP) 460 HUALAPAI WAY PEACH SPRINGS, AZ 86434	86-0092282	GOVERNMENT	0.	68,524.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ICM FOOD AND CLOTHING BANK PO BOX 2225 PHOENIX, AZ 85002	86-0401223	501(C)(3)	0.	5,201,448.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
JOSHUA TREE FEEDING PROGRAM 214 E WILLETTA PHOENIX, AZ 85004	86-0789213	501(C)(3)	0.	190,252.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
KAIBAB ESTATES WEST 3905 DOUBLE A RANCH RD ASH FORK, AZ 86320		501(C)(3)	0.	102,563.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
KAYENTA CHAPTER HOUSE ST. JUDE FB 1 MILE NORTH OF HIGHWAY 160 KAYENTA, AZ 86033		501(C)(3)	0.	54,109.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
KINGMAN AID TO ABUSED PEOPLE 2016 MULLEN AVE KINGMAN, AZ 86401	86-0601113	501(C)(3)	0.	39,650.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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KINGMAN AREA FOOD BANK 2930 E BUTLER AVE KINGMAN, AZ 86409	86-0503686	501(C)(3)	0.	2,149,809.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
KYKOTSMOVI VILLAGE 1 MAIN ST KYKOTSMOVI VILLAGE, AZ 86039	86-0648015	501(C)(3)	0.	93,014.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
LAKE HAVASU CITY INTERAGENCY 3550 CHALLENGER DR., SUITE 110 LAKE HAVASU CITY, AZ 86404	86-0516654	GOVERNMENT	0.	1,038,260.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
LIFE SHARING CENTER INC 100 ASPEN DR TUBA CITY, AZ 86045	86-1047161	501(C)(3)	0.	1,159,053.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
LIFEBRIDGE COMMUNITY ALLIANCE INC 7510 N 27TH AVE PHOENIX, AZ 85051	37-1553260	501(C)(3)	0.	108,724.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
LITCHFIELD ELEMENTARY SCHOOL DIST 5340 N WIGWAM CREEK BLVD LITCHFIELD PARK, AZ 85340	86-6000514	GOVERNMENT	0.	986,506.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
LIVING HOPE HELPING HAND 13270 S SUNLAND GIN RD ARIZONA CITY, AZ 85223	65-1238877	501(C)(3)	0.	399,451.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
LIVING STREAMS CHRISTIAN CHURCH 7000 N CENTRAL AVE PHOENIX, AZ 85020	86-0538638	501(C)(3)	0.	111,011.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
LOW MOUNTAIN CHURCH NAVAJO ROUTE 64 2 MI NE FROM JUNC ROUTE 65 AND 67 - KEAMS CANYON, AZ 86034	68-0223396	501(C)(3)	0.	79,784.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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LUTHERAN CHURCH OF THE MASTER 2340 W CACTUS RD PHOENIX, AZ 85029	43-0658188	501(C)(3)	0.	142,476.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MARICOPA INTEGRATED HEALTH SYSTEM 2601 E ROOSEVELT ST PHOENIX, AZ 85008	86-0830701	GOVERNMENT	0.	7,086.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MARK ALLEN MANOR FOUNDATION 2622 W STATE AVE PHOENIX, AZ 85051	94-2785374	501(C)(3)	0.	18,012.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MARYS MINISTRIES 5017 S CENTRAL AVE PHOENIX, AZ 85040	86-0721211	501(C)(3)	0.	245,787.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MAYER AREA MEALS ON WHEELS 10051 S MIAMI ST MAYER, AZ 86333	46-2135781	501(C)(3)	0.	227,368.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MC ADULT PROBATION (RESIDENTIAL) 1022 E GARFIELD ST PHOENIX, AZ 85006	86-6000872	GOVERNMENT	0.	80,102.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MC SHERIFFS OFFICE 3150 W LOWER BUCKEYE RD PHOENIX, AZ 85009	86-6000472	GOVERNMENT	0.	428,685.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MCMULLEN VALLEY FB 69725 CENTENNIAL PARK RD WENDEN, AZ 85357		501(C)(3)	0.	151,829.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MEADVIEW AREA NECESSARY NUTRITIONAL ASSISTANCE - 330 E MEADVIEW BLVD - MEADVIEW, AZ 86444	81-2507587	501(C)(3)	0.	125,316.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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MERCY HILL CHURCH (MP) 745 W FILLMORE ST PHOENIX, AZ 85007	47-1579225	501(C)(3)	0.	1,703,232.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MERCY HOUSING SOUTHWEST 10830 W APACHE ST AVONDALE, AZ 85323	20-1583582	501(C)(3)	0.	248,916.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MID-OHIO FOODBANK 3960 BROOKHAM DR GROVE CITY, OH 43123	31-0865343	501(C)(3)	0.	53,765.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MINISTERIO CRISTO SANA (MP) 3632 E. GREENWAY RD PHOENIX, AZ 85032	82-1139784	501(C)(3)	0.	261,535.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MITCHELL SWABACK CHARITIES 4744 E THUNDERBIRD UNIT 9 PHOENIX, AZ 85032	27-0250769	501(C)(3)	0.	58,099.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MOHAVE VALLEY UNITED METHODIST CHURCH - 1593 E LIPAN BLVD - FORT MOHAVE, AZ 86426	86-0853050	501(C)(3)	0.	196,079.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MT OF OLIVES LUTHERAN CHURCH 3546 E THOMAS RD PHOENIX, AZ 85018	86-6004439	501(C)(3)	0.	123,586.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
MURPHY ELEMENTARY SCHOOL DISTRICT NO 21 - 3140 W BUCKEYE RD - PHOENIX, AZ 85009	86-6000491	GOVERNMENT	0.	160,543.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NAOS INC 14240 N 43RD AVE BUILDING 100 GLENDALE, AZ 85306	86-0543988	501(C)(3)	0.	345,714.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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NATIVE AMERICAN CONNECTIONS 1325 N 14TH ST PHOENIX, AZ 85006	86-0293585	501(C)(3)	0.	265,395.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NEIGHBORHOOD MINISTRIES INC 1929 W FILLMORE ST PHOENIX, AZ 85009	86-0809052	501(C)(3)	0.	167,825.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NEW BEGINNINGS ASSEMBLY OF GOD 5121 W OCOTILLO RD GLENDALE, AZ 85301	26-0072371	501(C)(3)	0.	237,546.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NEW BIRTH COMMUNITY CHURCH 7449 W DESERT COVE PEORIA, AZ 85345	86-0901069	501(C)(3)	0.	146,420.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NEW CASA DE AMIGAS (REHAB) 1648 W COLTER STE 8 PHOENIX, AZ 85015	86-0185416	501(C)(3)	0.	26,265.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NEW DAY RECOVERY CTR 2221 N 42ND DR PHOENIX, AZ 85009	86-1039676	501(C)(3)	0.	22,268.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NEW DESTINY CHRISTIAN CHURCH 7848 S 27 AVE LAVEEN, AZ 85339	86-0805041	501(C)(3)	0.	23,881.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NEW DIMENSIONS IN RECOVERY 1838 E CYPRESS ST PHOENIX, AZ 85006	27-2167017	501(C)(3)	0.	46,771.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NEW HORIZON YOUTH HOMES INC 4625 S ASH AVE STE J2 CHANDLER, AZ 85244	86-1014335	501(C)(3)	0.	5,666.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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NEW LIFE CENTER 1444 N MANZANITA GOODYEAR, AZ 85338	86-0635950	501(C)(3)	0.	12,297.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NIFTY THRIFTY CSFP 479 PARK AVE ASH FORK, AZ 86320	45-4731785	501(C)(3)	0.	36,766.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NIFTYTHRIFTY FOOD BANK 479 PARK AVENUE ASH FORK, AZ 86320	86-1043856	501(C)(3)	0.	164,932.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NORTH TEXAS FOOD BANK 4500 S COCKRELL HILL RD DALLAS, TX 75236	74-1785357	501(C)(3)	0.	244,228.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
NORTHLAND FAMILY HELP CENTER 2100 WALGREENS ST FLAGSTAFF, AZ 86004	86-0351566	501(C)(3)	0.	5,232.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
OLD TOWN MISSION 116 E PINAL ST COTTONWOOD, AZ 86326	86-0667052	501(C)(3)	0.	612,806.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
OLIVE BRANCH NEW BEGINNINGS INC 4430 E AZTEC RD RIMROCK, AZ 86335	86-0756947	501(C)(3)	0.	58,270.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
OPEN DOOR FELLOWSHIP CHURCH 8301 N 19TH AVE PHOENIX, AZ 85021	86-0333385	501(C)(3)	0.	6,591.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
OUR LADY OF FATIMA NAVAJO RT 7 CHINLE, AZ 86503	85-0225263	501(C)(3)	0.	998,261.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of 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
OUR LADY OF THE LAKE ROMAN CATHOLIC PARISH - 1975 S DAYTONA DR - LAKE HAVASU CITY, AZ 86406	32-0267687	501(C)(3)	0.	53,473.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
OUR SAVIOR'S COMPASSION INC HWY 99 JUST N MILEPOST 60; CATTLE GUARD W/4 MAILBOX - WINSLOW, AZ 86047	80-0400192	501(C)(3)	0.	951,851.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
PAINTED DESERT DEMONSTRATION PROJECTS INC - 145 LEUPP RD - FLAGSTAFF, AZ 86004	86-0710679	501(C)(3)	0.	57,394.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
PARADISE VALLEY UNIFIED SCHL DIST 69 (MP) - 15833 N 29TH ST - PHOENIX, AZ 85032	86-6005162	GOVERNMENT	0.	140,126.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
PARKER FOOD BANK 1124 GERONIMO AVE PARKER, AZ 85344	86-0445604	501(C)(3)	0.	292,021.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
PAULDEN CHRISTIAN FELLOWSHIP 195 ASPEN RD PAULDEN, AZ 86334	86-0767780	501(C)(3)	0.	435,705.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
PILGRIM REST FOUNDATION 1401 E JEFFERSON ST PHOENIX, AZ 85034	86-0885862	501(C)(3)	0.	269,984.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
PRESCOTT MEALS ON WHEELS 1280 E ROSSER ST PRESCOTT, AZ 86301	86-0417621	501(C)(3)	0.	18,296.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
PRESCOTT VALLEY EMERGENCY FOOD BANK - 8671 SPOUSE SUITE A - PRESCOTT VALLEY, AZ 86314	86-0469759	501(C)(3)	0.	22,860.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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QUARTZSITE FOOD BANK (TEFAP PA) 40 MOON MOUNTAIN RD QUARTZSITE, AZ 85359	47-3013722	501(C)(3)	0.	341,783.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
RECOVERY INNOVATIONS OF ARIZONA INC - 11361 N 99TH AVE SUITE 402 - PEORIA, AZ 85345	86-0671446	501(C)(3)	0.	23,348.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
RED MTN ACTIVE ADULT CENTER CSFP 7550 E ADOBE ST MESA, AZ 85207	94-2596075	501(C)(3)	0.	12,814.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
REGIONAL FOOD BANK OF OKLAHOMA PO BOX 270968 OKLAHOMA CITY, OK 73137	74-1100380	501(C)(3)	0.	927,404.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
RESURRECTION STREET MINISTRY INC (CSFP) - 1135 E MAIN ST - MESA, AZ 85201	55-0799053	501(C)(3)	0.	36,880.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
REVEREND PAULA HINES MINISTRIES 3602 W THOMAS RD SUITE 7 PHOENIX, AZ 85019	33-0872205	501(C)(3)	0.	19,207.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
RIO VISTA CENTER INC (GR) 1431 E SOUTHERN AVE PHOENIX, AZ 85040	20-1569551	501(C)(3)	0.	217,507.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ROAD RUNNER FOOD BANK 5840 OFFICE BLVD NE ALBUQUERQUE, NM 87109	85-0278525	501(C)(3)	0.	410,061.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ROOSEVELT SCHL DIST 66 3146 E WIER ST PHOENIX, AZ 85040		GOVERNMENT	0.	15,582.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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RUNNINGELK MINISTRIES INC NAVAJO RTE 60 MILE MARKER 10 DILKON, AZ 86047	47-2555939	501(C)(3)	0.	43,174.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SAGUARO JANES SENIOR CTR 21802 W WILSON WITTMANN, AZ 85361	86-0476466	GOVERNMENT	0.	1,241,129.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SALVATION ARMY - LAURA DANIELI SR ACTIVITY CTR - 628 N 3RD AVE - PHOENIX, AZ 85003	94-1156347	501(C)(3)	0.	1,122,600.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SALVATION ARMY PRESCOTT 237 S MONTEZUMA ST PRESCOTT, AZ 86303	86-0096791	501(C)(3)	0.	76,030.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SANTA CRUZ FOOD BANK (CAHRA) CSFP 109 N SUNSHINE BLVD ELOY, AZ 85231	86-0397693	501(C)(3)	0.	161,802.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SANTO NINO CATHOLIC COMMUNITY 3206 W MELVIN ST PHOENIX, AZ 85009	47-1795408	501(C)(3)	0.	6,693.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SDA CHURCH AVONDALE PO BOX 442 AVONDALE, AZ 85323	86-0131620	501(C)(3)	0.	1,752,495.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SDA COMMUNITY SERVICES PHX 1320 N 15TH ST PHOENIX, AZ 85006	52-0643036	501(C)(3)	0.	181,585.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SECOND HARVEST COMMUNITY FOOD BANK 915 DOUGLAS ST ST JOSEPH, MO 64505	43-1268319	501(C)(3)	0.	60,230.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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SECOND HARVEST FOOD BANK 8014 MARINE WAY IRVINE, CA 92618	95-3033494	501(C)(3)	0.	60,026.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SECOND HARVEST HEARTLAND 1140 GERVAIS AVE ST PAUL, MN 55109	23-7417654	501(C)(3)	0.	54,720.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SECOND HARVEST SANTA CLARA 4001 N 1ST ST SAN JOSE, CA 95134	94-2614101	501(C)(3)	0.	46,141.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SELIGMAN CARE CLUB 53490 N BRIDGE CANYON PKWY SELIGMAN, AZ 86337		501(C)(3)	0.	377,836.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SET FREE BAPTIST 1034 N 24TH ST PHOENIX, AZ 85008	65-1208607	501(C)(3)	0.	105,829.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SHEPHERDS KITCHEN FOOD BANK 344 W 4TH STREET SOUTH SNOWFLAKE, AZ 85937	86-0887516	501(C)(3)	0.	1,843,255.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SICHOMOVI VILLAGE 1/4 MILE N OF HWY 264 AND MP 291 POLACCA, AZ 86042	23-7353532	GOVERNMENT	0.	164,810.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SIPAULOVI VILLAGE HWY 264 1 MILE NORTH OF MP 390 SECOND MESA, AZ 86043		GOVERNMENT	0.	128,531.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SMFBA AT OLD TOWN MISSION CSFP 116 E PINAL ST COTTONWOOD, AZ 86326	27-4446452	501(C)(3)	0.	57,400.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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SOJOURNER CENTER 2330 E FILLMORE ST (CONFIDENTIAL) PHOENIX, AZ 85036	94-2465081	501(C)(3)	0.	64,710.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SONBURST DISCIPLESHIP MINISTRIES 38 W FREMONT RD PHOENIX, AZ 85041	86-0617550	501(C)(3)	0.	14,296.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SOUTH PHOENIX BAPTIST CHURCH 2006 E BROADWAY RD PHOENIX, AZ 85040	73-1659656	501(C)(3)	0.	382,234.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SOUTHWEST BEHAVIORAL HEALTH SERVICES - 3450 N 3RD ST - PHOENIX, AZ 85012	86-0290033	501(C)(3)	0.	18,639.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ST JOHN INSTITUTIONAL BAPTIST 1428 S 13TH AVE PHOENIX, AZ 85007	86-0448117	501(C)(3)	0.	97,934.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ST JOHN VIANNEY CATHOLIC PARISH 539 LA PASADA BLVD GOODYEAR, AZ 85338	90-0429155	501(C)(3)	0.	26,437.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ST LUKE'S AT THE MOUNTAIN 848 E DOBBINS RD PHOENIX, AZ 85042	31-1629166	501(C)(3)	0.	548,219.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ST MARY'S EPISCOPAL CHURCH 6501 N 39TH AVE PHOENIX, AZ 85019	86-0170321	501(C)(3)	0.	396,984.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
ST STEPHEN'S EPISCOPAL CHURCH 2310 N 56TH ST PHOENIX, AZ 85008	86-0182823	501(C)(3)	0.	79,278.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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STAND TOGETHER AND RECOVER (STAR) 2144 E ROOSEVELT ST PHOENIX, AZ 85006	86-0586210	501(C)(3)	0.	41,648.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
STEP ONE HALFWAY HOUSE 9636 N 11TH AVE PHOENIX, AZ 85021	86-1032253	501(C)(3)	0.	346,523.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SUN CITIES SPAY A STRAY PO BOX 52 YOUNGTOWN, AZ 85363	86-1023948	501(C)(3)	0.	46,292.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SUN VALLEY INDIAN SCHOOL 8450 S SUN VALLEY RD SUN VALLEY, AZ 86029	86-0570967	501(C)(3)	0.	822,886.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SUNSHINE GROUP HOMES INC (GR) 17201 N 63RD AVE GLENDALE, AZ 85308	86-0815254	501(C)(3)	0.	201,617.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SV GLEANERS BUCKEYE COMMUNITY CENTER - 201 E CENTRE AVE - BUCKEYE, AZ 85326	86-0419881	501(C)(3)	0.	1,616,414.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SVDP CORDES LAKES (GR) 16231 S INDIAN BEND RD CORDES LAKES, AZ 86333	86-0096789	501(C)(3)	0.	3,198,628.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SVDP NEEDLES (PA) 10287 BARRECKMAN RD MOHAVE VALLEY, AZ 86440	33-0627839	501(C)(3)	0.	71,834.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
SVDP ST JAMES 19640 N 35TH AVE GLENDALE, AZ 85308	86-0095789	501(C)(3)	0.	32,945.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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TANNER CHAPEL AME CHURCH 20 S 8TH ST PHOENIX, AZ 85034	86-0310590	501(C)(3)	0.	15,899.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
TEEC NOS POS SR CENTER (TEFAP PA) 1 MILE S OF US160 TEEC NOS POS, AZ 86514		GOVERNMENT	0.	90,097.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
TEEN CHALLENGE CHRISTIAN LIFE RANCH (GR) - 47819 N FIG SPRINGS RD - NEW RIVER, AZ 85087	86-0255257	501(C)(3)	0.	57,579.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
TEMPE COMMUNITY ACTION AGENCY CSFP 2146 E APACHE BLVD TEMPE, AZ 85281	86-0254820	GOVERNMENT	0.	26,140.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
TERROS INC 3003 N CENTRAL AVE SUITE 200 PHOENIX, AZ 85012	86-0252067	501(C)(3)	0.	12,493.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
THANK A VET 8625 W HORIZON RD GOLDEN VALLEY, AZ 86413	47-1263706	501(C)(3)	0.	268,119.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
THE FOOD DEPOT 1222 A SILER RD SANTA FE, NM 87507	85-0416803	501(C)(3)	0.	206,808.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
THINK JESUS PROJECT PO BOX 3083 FLAGSTAFF, AZ 86003	71-1006154	501(C)(3)	0.	75,633.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
THREE SQUARE FOOD BANK 4190 N PECOS LAS VEGAS, NV 89115	30-0396918	501(C)(3)	0.	542,568.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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TOLLESON ELEMENTARY SCHL DIST 9401 W GARFIELD ST TOLLESON, AZ 85353	86-6000490	GOVERNMENT	0.	482,745.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
TOWN OF FREDONIA 100 E WOODHILL RD FREDONIA, AZ 86022	86-0186382	GOVERNMENT	0.	452,158.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
TOWN OF GUADALUPE CAP CSFP 9241 S AVENIDA DE YAQUI GUADALUPE, AZ 85283		GOVERNMENT	0.	44,413.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
TRINITY BIBLE CHURCH 3420 W PEORIA AVE PHOENIX, AZ 85029	86-0215940	501(C)(3)	0.	202,728.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
TUMBLEWEED CTR FOR YOUTH DEV 1733 W MOUNTAIN VIEW RD PHOENIX, AZ 85021	23-7284153	501(C)(3)	0.	106,777.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
UMOM NEW DAY CENTERS 3333 E VAN BUREN PHOENIX, AZ 85008	86-0521062	501(C)(3)	0.	24,513.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
UNION ELEMENTARY SCHOOL DISTRICT 3834 S 91 AVE TOLLESON, AZ 85353	86-6000506	GOVERNMENT	0.	107,069.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
UNITED FOOD BANK 245 S NINA DR MESA, AZ 85210	86-0505273	501(C)(3)	0.	4,140,384.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
UNITED STATES VETERANS INITIATIVE PRESCOTT (RES) - 1113 E GURLEY ST - PRESCOTT, AZ 86301	95-4382752	GOVERNMENT	0.	12,653.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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VALLE MOBILE PANTRY FLINTSTONE'S BEDROCK CITY, STATE ROUTE 64/HWY 180 - WILLIAMS, AZ 86046		501(C)(3)	0.	74,594.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
VALLEY YOUTH ORGANIZATION INC CONFIDENTIAL 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314	86-0542919	501(C)(3)	0.	34,256.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
VILLAGE OF TEWA HWY 264 MP 392.5 POLACCA, AZ 86042		GOVERNMENT	0.	108,772.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
VILLAGE OF WALPI 1/2 MILE N HWY 264 MP 391 POLACCA, AZ 86042		GOVERNMENT	0.	90,276.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
VINEYARD COMMUNITY CHARITIES 6250 W PEORIA AVE GLENDALE, AZ 85302	74-2467930	501(C)(3)	0.	286,294.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
VIVRE (RESIDENTIAL) 2501 W ELM ST PHOENIX, AZ 85017	45-4743181	501(C)(3)	0.	85,948.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
WAREHOUSE FOOD BANK CSFP 119 S MAIN ST COOLIDGE, AZ 85128		501(C)(3)	0.	100,051.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
WAY OF LIFE CHURCH AOG 5802 S 15TH AVE PHOENIX, AZ 85041	86-0655205	501(C)(3)	0.	198,623.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
WESTCARE AZ INC 1160 AGATE AVE BULLHEAD CITY, AZ 86442	86-0968693	501(C)(3)	0.	53,614.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

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WESTWARD HO CSFP 618 N CENTRAL AVE PHOENIX, AZ 85004	86-1045776	501(C)(3)	0.	55,303.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
WILLIAMS FOOD PANTRY AND MORE 123 S 3RD WILLIAMS, AZ 86046	82-1634562	501(C)(3)	0.	12,462.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
WINSLOW COUNCIL ON AGING 212 E 2ND ST WINSLOW, AZ 86047	86-0310351	501(C)(3)	0.	272,842.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
YARNELL FOOD BANK CSFP 22815 HIGHWAY 89 YARNELL, AZ 85362	47-3449359	501(C)(3)	0.	358,580.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
YAVAPAI APACHE NATION 3364 HAMALEY AVE CAMP VERDE, AZ 86322	86-0210241	501(C)(3)	0.	65,337.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
YAVAPAI CO COMM HEALTH SRVCS 1406 N BOOTHILL DR CAMP VERDE, AZ 86322		GOVERNMENT	0.	298,316.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
YAVAPAI FOOD BANK 8866 E LONG MESA DR PRESCOTT VALLEY, AZ 86314	86-0709163	501(C)(3)	0.	2,155,029.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
YUMA COMMUNITY FOOD BANK 2404 E 24TH ST STE A YUMA, AZ 85365	86-0457836	501(C)(3)	0.	1,743,459.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS
YWCA MARICOPA COUNTY 8561 N 61ST AVE GLENDALE, AZ 85302	86-0098936	501(C)(3)	0.	53,776.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD	COMMUNITY FOOD DISTRIBUTIONS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of 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
SMFB FOUNDATION 2831 N 31ST AVE PHOENIX, AZ 85009	27-0277109	501(C)(3)	2,178,663.	0.			SUPPORT

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FOOD DISTRIBUTION	0	0.	27,505,726.	OTHER - FEEDING AMERICA FOOD VALUATION REPORT	FOOD

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

AFTER FOOD IS DISTRIBUTED, NO FURTHER MONITORING IS CONSIDERED NECESSARY.

THE CASH GRANT TO SMFB FOUNDATION IS TO A RELATED PARTY WHICH IS MONITORED

BY VIRTUE OF A COMMON MANAGEMENT TEAM.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

ST MARY'S FOOD BANK ALLIANCE

Employer identification number

23-7353532

Part I Questions Regarding Compensation

1a 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.

- | | |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

3 Indicate which, if any, of the following the filing 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.

- | | |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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:

- a** The organization?
- b** Any related organization?
- 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:

- a** The organization?
- b** Any related organization?
- 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

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2016

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

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

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) TOM KERTIS PRESIDENT & CEO	(i)	215,955.	0.	516.	6,231.	22,257.	244,959.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SARAH STUCKEY CFO	(i)	166,416.	0.	180.	5,136.	14,157.	185,889.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) LISA NOTARO-GOIN CDO	(i)	160,594.	0.	111.	4,908.	17,280.	182,893.	0.
	(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)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS MEETS TO REVIEW THE

PERFORMANCE OF THE CEO AND DETERMINE APPROPRIATE COMPENSATION COMMENSURATE

WITH PERFORMANCE. THE COMMITTEE USES COMPARABILITY DATA FROM TAX EXEMPT

ORGANIZATIONS IN THE LOCAL AREA AND THE COMMITTEE'S DECISIONS ARE

DOCUMENTED IN THE COMMITTEE MINUTES. THE CEO'S REVIEW IS HELD ANNUALLY IN

JULY.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2016

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.**
- ▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.**

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

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	2,328	134,275,378.	FEEDING AMERICA FOOD VAL
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (FORGIVENESS O)	X	1	3,834,600.	
26 Other (OTHER)	X	1	18,340.	FAIR VALUE
27 Other				
28 Other				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 5

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

SCHEDULE M, PART I, COLUMN (B):

MANY DONORS MAKE MULTIPLE DONATIONS REGULARLY THROUGHOUT THE YEAR, BUT

THEY ARE ONLY COUNTED ONCE IN THE NUMBER OF CONTRIBUTORS REPORTED IN

COLUMN B OF PART I.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

ST MARY'S FOOD BANK ALLIANCE

Employer identification number

23-7353532

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

OF PERISHABLE FOOD, FREE OF CHARGE, TO INDIVIDUALS AND FAMILIES IN NEED

THROUGHOUT ARIZONA. APPROXIMATELY 87 MILLION POUNDS OF FOOD WERE

DISTRIBUTED DURING THE YEAR.

MOBILE PANTRIES: NOT EVERYONE CAN COME TO A ST. MARY'S FOOD BANK

ALLIANCE LOCATION FOR EMERGENCY BOXES, SO WE HAVE EXPANDED OUR EFFORTS

TO BRING THE FOOD BANK TO THEM.

DRIVE PAST A CERTAIN PRIMARY SCHOOL IN PHOENIX ONE WEDNESDAY EACH

MONTH, AND YOU WILL SEE A ST. MARY'S FOOD BANK ALLIANCE TRUCK, PALLETS

AND PALLETS OF FRUIT, VEGETABLES AND BREAD AS WELL AS DOZENS OF

NEIGHBORHOOD FAMILIES AWAITING THIS MUCH-NEEDED, NUTRITIOUS FOOD. THIS

SCENE IS PLAYING OUT IN COUNTLESS COMMUNITIES THROUGHOUT ARIZONA AS THE

ST. MARY'S MOBILE PANTRY PROGRAM, WHICH HAS GROWN TO MORE THAN 40 SITES

IN BOTH RURAL AND URBAN LOCATIONS, BRINGING PERISHABLE FOOD DIRECTLY TO

NEIGHBORHOODS IN THE GREATEST NEED.

BACKPACK PROGRAM: THE BACKPACK PROGRAM PROVIDES "CHRONICALLY HUNGRY"

CHILDREN IN ARIZONA WITH NON-PERISHABLE, PRIMARILY MEALS THAT KIDS CAN

TAKE HOME AND EAT ON WEEKENDS WHEN NOT IN SCHOOL. WE CURRENTLY

COLLABORATE WITH MORE THAN 30 SCHOOLS AND COMMUNITY CENTERS TO PROVIDE

NEARLY 700 BACKPACKS WEEKLY IN THE VALLEY AS A SUPPLEMENTAL FOOD SOURCE

THAT IS DISTRIBUTED TO CHILDREN EACH FRIDAY.

SOURCE DISTRIBUTION: SOURCE DISTRIBUTION IS A VOLUME-BUYING SERVICE

OFFERED BY ST. MARY'S FOOD BANK TO ITS PARTNER AGENCY ORGANIZATIONS.

BY PURCHASING IN TRUCKLOAD QUANTITIES, ST. MARY'S IS ABLE TO PROCURE

POPULAR FOOD ITEMS, WHICH ARE NOT NORMALLY AVAILABLE AS DONATIONS, AT

WHOLESALE PRICES AND PASS THE SAVINGS ON TO ITS AGENCIES.

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

Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

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

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

COMMUNITY KITCHEN: THE COMMUNITY KITCHEN IS A LIFE SKILLS AND FOOD

SERVICE TRAINING PROGRAM FOR THOSE WITH BARRIERS TO EMPLOYMENT.

STUDENTS GAIN THE SKILLS TO GET JOBS OFFERING LIVABLE WAGES, BENEFITS,

AND OPPORTUNITIES FOR ADVANCEMENT THROUGH HANDS-ON FOOD SERVICE

TRAINING AS WELL AS CLASSROOM STUDIES. DURING THE PAST DECADE, THE

COMMUNITY KITCHEN HAS PROVIDED THOUSANDS OF MEALS TO THOSE IN NEED,

WHILE TRANSFORMING THE LIVES OF COUNTLESS PARTICIPANTS AND FAMILIES.

NEW SESSIONS START EVERY FIRST MONDAY OF THE MONTH. IN ADDITION TO

TRAINING, EACH STUDENT RECEIVES JOB-PLACEMENT ASSISTANCE AND SUPPORT

FOLLOWING GRADUATION.

EXPENSES \$ 767,321. INCLUDING GRANTS OF \$ 0. REVENUE \$ 45,711.

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. THE ENTIRE BOARD WILL RECEIVE A

COPY OF THE DRAFT FOR 990 TO REVIEW PRIOR TO A BOARD MEETING, AT WHICH

POINT IT WILL BE APPROVED.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY THAT ADDRESSES THE

CONSIDERATION OF POTENTIAL CONFLICTS OF INTEREST BY THE BOARD OF DIRECTORS,

COMMITTEE MEMBERS, VOLUNTEERS, KEY EMPLOYEES, AND THEIR RELATIVES. AS PER

THE POLICY, BOARD AND COMMITTEE MEMBERS MUST MAKE DISCLOSURES OF ANY

POTENTIAL CONFLICTS OF INTEREST AND MUST ABSTAIN FROM VOTING ON ANY ACTION

IN WHICH THEY MAY HAVE AN INTEREST. ON AN ANNUAL BASIS, ALL BOARD MEMBERS

ARE REQUIRED TO SIGN OFF ON AN ANNUAL CONFLICT OF INTEREST FORM, EITHER

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

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 HELD 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.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

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

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						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 11A, I	N/A		X

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

Schedule R (Form 990) 2016

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 one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) 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?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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 country)	(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	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) SMFB FOUNDATION	C	615,504.	CASH
(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) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

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

Department of the Treasury
Internal Revenue Service

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

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

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

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

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. ST MARY'S FOOD BANK ALLIANCE	Employer identification number (EIN) or 23-7353532
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 2831 N 31ST AVE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHOENIX, AZ 85009	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

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

SARAH STUCKEY

• The books are in the care of ▶ 2831 N 31ST AVE - PHOENIX, AZ 85009
Telephone No. ▶ 602-343-3110 Fax No. ▶

• If the organization does not have an office or place of business in the United States, check this box
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 15, 2018, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year _____ or
▶ tax year beginning JUL 1, 2016, and ending JUN 30, 2017.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

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

Form **8868** (Rev. 1-2017)

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