

ST MARY'S FOOD BANK ALLIANCE

INCOME TAX RETURNS

JUNE 30, 2018

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

2017
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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2017 calendar year, or tax year beginning **JUL 1, 2017** and ending **JUN 30, 2018**

| | | |
|--|--|--|
| B Check if applicable: | C Name of organization ST MARY'S FOOD BANK ALLIANCE | D Employer identification number 23-7353532 |
| <input type="checkbox"/> Address change | Doing business as | E Telephone number (602) 242-3663 |
| <input type="checkbox"/> Name change | Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2831 N 31ST AVE | |
| <input type="checkbox"/> Initial return | City or town, state or province, country, and ZIP or foreign postal code PHOENIX, AZ 85009 | |
| <input type="checkbox"/> Final return/terminated | F Name and address of principal officer: TOM KERTIS SAME AS C ABOVE | |
| <input type="checkbox"/> Amended return | I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | G Gross receipts \$ 169,974,309. |
| <input type="checkbox"/> Application pending | J Website: ▶ WWW.FIRSTFOODBANK.ORG | H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| | K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ | H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | L Year of formation: 1967 | H(c) Group exemption number ▶ |
| | M State of legal domicile: AZ | |

Part I Summary

| | | | | |
|--|---|----------------------------------|---------------------|---------------------|
| | 1 Briefly describe the organization's mission or most significant activities: ALLEVIATE HUNGER THROUGH GATHERING AND DISTRIBUTION OF FOOD. | | | |
| Activities & Governance | 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 | | 17 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | | 17 |
| | 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) | 5 | | 236 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | | 75153 |
| | 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | | 0. |
| | 7b Net unrelated business taxable income from Form 990-T, line 34 | 7b | | 0. |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | Prior Year | | Current Year |
| | 9 Program service revenue (Part VIII, line 2g) | 160,559,103. | | 165,318,611. |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 4,038,145. | | 4,240,476. |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 53,368. | | 41,033. |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 196,117. | | 250,209. |
| | | 164,846,733. | | 169,850,329. |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 136,319,264. | | 136,979,959. |
| | 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) | 11,490,013. | | 11,345,889. |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 44,500. | | 48,000. |
| | 16b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,488,792. | | | |
| | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 12,240,195. | | 13,092,753. |
| 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 160,093,972. | | 161,466,601. | |
| 19 Revenue less expenses. Subtract line 18 from line 12 | 4,752,761. | | 8,383,728. | |
| Net Assets or Fund Balances | 20 Total assets (Part X, line 16) | Beginning of Current Year | | End of Year |
| | 21 Total liabilities (Part X, line 26) | 31,185,698. | | 40,125,528. |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | 3,524,438. | | 4,055,443. |
| | | 27,661,260. | | 36,070,085. |

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 TOM KERTIS, PRESIDENT & CEO | Date | |
| | Type or print name and title | | |
| Paid Preparer Use Only | Print/Type preparer's name AMY A. O'LOUGHLIN | Preparer's signature <i>Amy A. O'Loughlin</i> | Date 03/22/19 |
| | Firm's name ▶ CBIZ MHM, LLC | Check if self-employed <input type="checkbox"/> | PTIN P00869687 |
| | Firm's address ▶ 4722 N 24TH ST, STE 300 PHOENIX, AZ 85016 | Firm's EIN ▶ 34-1884125 | Phone no. 602-264-6835 |

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

COPY

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 144,458,433. including grants of \$ 132,615,167.) (Revenue \$ 766,900.) 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 \$ 4,704,789. including grants of \$ 4,284,371.) (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 \$ 4,276,637. including grants of \$ 80,421.) (Revenue \$ 3,677,696.) 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 5,000 MEALS A DAY DURING THE SCHOOL YEAR AND MORE THAN 10,000 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 \$ 805,196. including grants of) (Revenue \$ 37,231.)

4e Total program service expenses 154,245,055.

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> | | X |
| 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 tax compliance issues.

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 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members included... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? 8b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

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. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
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) MARC ISAACS CHAIRMAN | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (2) SHERYL HILDEBRAND VICE CHAIRMAN | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (3) SUSAN WAIN SECRETARY | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (4) NICKI SCHILLHAHN-AMOS TREASURER | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (5) JOHN DEMETRA IMMEDIATE PAST CHAIRMAN | 1.00 | X | | X | | | | 0. | 0. | 0. |
| (6) TOM CLARK DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (7) ARNOTT DUNCAN DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (8) JOHN GINTY DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (9) LISA NOBLES DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (10) STEPHAN KING DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (11) PETER LARSON DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (12) TERRY MORRISON DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (13) JUDD NORRIS DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (14) ERIK OLSSON DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (15) GRAEME PARKES DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (16) GENE PETERSON DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. |
| (17) JOHN ROUSSEL 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) TOM KERTIS PRESIDENT & CEO | 40.00 2.00 | | | X | | | | 229,985. | 0. | 23,352. |
| (19) SARAH STUCKEY CFO | 40.00 2.00 | | | X | | | | 171,945. | 0. | 15,879. |
| (20) LISA NOTARO-GOIN CDO | 40.00 | | | X | | | | 166,583. | 0. | 15,580. |
| (21) DUANE LAWSON COO | 40.00 | | | X | | | | 160,479. | 0. | 7,663. |
| (22) MARCOS GAUCIN SR. DIRECTOR OF FINANCE | 40.00 | | | | | X | | 125,384. | 0. | 4,645. |
| (23) EILEEN MITCHEL CHIEF PROGRAMS OFFICER | 40.00 | | | | | X | | 116,384. | 0. | 5,418. |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1b Sub-total | | | | | | | | 970,760. | 0. | 72,537. |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | 0. | 0. | 0. |
| d Total (add lines 1b and 1c) | | | | | | | | 970,760. | 0. | 72,537. |

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 6

| | Yes | No |
|--|-----|----|
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual | | X |
| 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual | X | |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person | | 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 |
|--|---------------------------------|---------------------|
| HILLPHOENIX 1031 E. RIVERVIEW DR, PHOENIX, AZ 85034 | REFRIGERATION CONTRACTOR | 2,125,484. |
| WILLMENG 2048 N. 44TH ST STE 200, PHOENIX, AZ 85008 | GENERAL CONTRACTOR | 1,549,350. |
| GRIZZARD COMMUNICATION GROUP, 229 PEACHTREE ST NE STE 1400, ATLANTA, GA | MARKETING AND ADVERTISING | 1,284,756. |
| PIONEER DISTRIBUTING CO 1300 N 24TH AVE, PHOENIX, AZ 85009 | LOGISTICS/DISTRIBUTION SERVICES | 611,418. |
| FEEDING AMERICA 35 E WACKER DR STE 2000, CHICAGO, IL 60601 | TRANSPORT SERVICE | 338,470. |

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 7

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 193,892. | | | | | |
| | b Membership dues | 1b | | | | | |
| | c Fundraising events | 1c | | | | | |
| | d Related organizations | 1d 690,000. | | | | | |
| | e Government grants (contributions) | 1e 2,624,872. | | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f 161,809,847. | | | | | |
| | g Noncash contributions included in lines 1a-1f: \$ | 139,330,126. | | | | | |
| | h Total. Add lines 1a-1f | | 165,318,611. | | | | |
| Program Service Revenue | 2 a KID'S CAFE REVENUE | Business Code 624210 | 3,677,696. | 3,677,696. | | | |
| | b SOURCE PROGRAM | 900099 | 422,535. | 422,535. | | | |
| | c SHARED MAINTENANCE FEE | 900099 | 103,014. | 103,014. | | | |
| | d CK CATERING | 624210 | 37,231. | 37,231. | | | |
| | e | | | | | | |
| | f All other program service revenue | | | | | | |
| | g Total. Add lines 2a-2f | | 4,240,476. | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | 121,189. | | | 121,189. | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | | |
| | 5 Royalties | | | | | | |
| | 6 a Gross rents | (i) Real | 72,000. | | | | |
| | | (ii) Personal | 0. | | | | |
| | | b Less: rental expenses | | | | | |
| | | 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 | 42,624. | | | | |
| | | (ii) Other | 1,200. | | | | |
| | | b Less: cost or other basis and sales expenses | 122,152. | 1,828. | | | |
| | | c Gain or (loss) | -79,528. | -628. | | | |
| | d Net gain or (loss) | | -80,156. | | | -80,156. | |
| | 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 | 150,401. | 150,401. | | | | |
| b RECYCLING INCOME | 900099 | 18,950. | 18,950. | | | | |
| c INSURANCE SETTLEMENT | 900099 | 8,858. | | | 8,858. | | |
| d All other revenue | | | | | | | |
| e Total. Add lines 11a-11d | | 178,209. | | | | | |
| 12 Total revenue. See instructions. | | 169,850,329. | 4,481,827. | 0. | 49,891. | | |

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 | 109,812,199. | 109,812,199. | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | 27,167,760. | 27,167,760. | | |
| 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 | 791,463. | 566,675. | 111,592. | 113,196. |
| 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 | 8,310,440. | 5,950,145. | 1,171,730. | 1,188,565. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 189,291. | 135,529. | 26,689. | 27,073. |
| 9 Other employee benefits | 1,438,790. | 1,030,151. | 202,862. | 205,777. |
| 10 Payroll taxes | 615,905. | 440,979. | 86,839. | 88,087. |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | | | | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | 48,000. | | | 48,000. |
| f Investment management fees | 15,414. | | 15,414. | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) | 255,541. | 34,742. | 147,514. | 73,285. |
| 12 Advertising and promotion | | | | |
| 13 Office expenses | 148,729. | 45,373. | 15,793. | 87,563. |
| 14 Information technology | 621,857. | 69,559. | 552,129. | 169. |
| 15 Royalties | | | | |
| 16 Occupancy | 698,565. | 696,677. | 1,863. | 25. |
| 17 Travel | 95,144. | 50,930. | 19,284. | 24,930. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 46,330. | 26,080. | 12,138. | 8,112. |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 1,640,220. | 1,603,458. | 36,762. | |
| 23 Insurance | 262,075. | 211,449. | 44,126. | 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 | 3,838,180. | 3,656,496. | | 181,684. |
| b VEHICLE EXPENSE | 1,326,739. | 1,324,281. | 31. | 2,427. |
| c RENTAL/LEASE | 708,576. | 659,911. | 48,665. | |
| d ADMINISTRATION EXPENSE | 547,176. | 153,094. | 156,567. | 237,515. |
| e All other expenses | 2,888,207. | 609,567. | 82,756. | 2,195,884. |
| 25 Total functional expenses. Add lines 1 through 24e | 161,466,601. | 154,245,055. | 2,732,754. | 4,488,792. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. | | | | |

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

Part X Balance Sheet

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

| | | (A) Beginning of year | | (B) End of year |
|---|--|--------------------------|-------------|--------------------|
| Assets | 1 Cash - non-interest-bearing | 3,823,787. | 1 | 3,864,148. |
| | 2 Savings and temporary cash investments | 22,598. | 2 | 22,460. |
| | 3 Pledges and grants receivable, net | 1,284,414. | 3 | 821,987. |
| | 4 Accounts receivable, net | 745,136. | 4 | 1,359,504. |
| | 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 | 5,073,891. | 8 | 7,599,013. |
| | 9 Prepaid expenses and deferred charges | 84,183. | 9 | 94,628. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 33,127,976. | | |
| | b Less: accumulated depreciation | 10b 14,064,813. | 10c | 19,063,163. |
| | 11 Investments - publicly traded securities | 3,627,857. | 11 | 3,691,432. |
| | 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 | 615,504. | 15 | 3,609,193. |
| 16 Total assets. Add lines 1 through 15 (must equal line 34) | 31,185,698. | 16 | 40,125,528. | |
| Liabilities | 17 Accounts payable and accrued expenses | 1,370,430. | 17 | 2,271,189. |
| | 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 | 1,887,587. | 23 | 1,516,719. |
| | 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 | 266,421. | 25 | 267,535. |
| | 26 Total liabilities. Add lines 17 through 25 | 3,524,438. | 26 | 4,055,443. |
| 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 | 27,278,259. | 27 | 35,471,610. |
| | 28 Temporarily restricted net assets | 383,001. | 28 | 598,475. |
| | 29 Permanently restricted net assets | | 29 | |
| | 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 | 27,661,260. | 33 | 36,070,085. | |
| 34 Total liabilities and net assets/fund balances | 31,185,698. | 34 | 40,125,528. | |

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 | 169,850,329. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 161,466,601. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 8,383,728. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 27,661,260. |
| 5 | Net unrealized gains (losses) on investments | 5 | 25,097. |
| 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 | 36,070,085. |

Part XII Financial Statements and Reporting

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

| | Yes | No |
|--|-----|----|
| 1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | X | |
| b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | X | |
| c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | X | |
| 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? | X | |
| b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | X | |

Form 990 (2017)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

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

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) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|--------------|--------------|--------------|--------------|--------------|--------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 125,868,402. | 120,724,369. | 140,085,369. | 160,559,103. | 165,318,611. | 712,555,854. |
| 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 | 125,868,402. | 120,724,369. | 140,085,369. | 160,559,103. | 165,318,611. | 712,555,854. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 40,548,981. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 672,006,873. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|--|--------------|--------------|--------------|--------------|--------------|--------------------------|
| 7 Amounts from line 4 | 125,868,402. | 120,724,369. | 140,085,369. | 160,559,103. | 165,318,611. | 712,555,854. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 124,632. | 90,032. | 147,600. | 194,381. | 193,189. | 749,834. |
| 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.) | 482,370. | 227,793. | 181,921. | 124,117. | 178,209. | 1,194,410. |
| 11 Total support. Add lines 7 through 10 | | | | | | 714,500,098. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | 19,575,974. |
| 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 2017 (line 6, column (f) divided by line 11, column (f)) | 14 | 94.05 % |
| 15 Public support percentage from 2016 Schedule A, Part II, line 14 | 15 | 93.89 % |
| 16a 33 1/3% support test - 2017. 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 - 2016. 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 - 2017. 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 - 2016. 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) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (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) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (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 2017 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2016 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|---|-----------|---|
| 17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2016 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2017. 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 - 2016. 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? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. | | |
| 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). | | |
| 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. | | |
| b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. | | |
| c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | | |
| 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below. | | |
| b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. | | |
| c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. | | |
| 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document). | | |
| b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | | |
| c Substitutions only. Was the substitution the result of an event beyond the organization's control? | | |
| 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. | | |
| 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). | | |
| 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). | | |
| 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. | | |
| b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. | | |
| c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. | | |
| 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below. | | |
| b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.) | | |

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. Complete line 2 below. | | | |
| b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). | | | |
| 2 Activities Test. Answer (a) and (b) below. | | | |
| a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <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. Answer (a) and (b) below. | | | |
| a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <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). | | |

Schedule A (Form 990 or 990-EZ) 2017

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 2017 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-2017 | (iii) Distributable Amount for 2017 |
|---|-----------------------------|--|---|
| 1 Distributable amount for 2017 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2017 | | | |
| a | | | |
| b From 2013 | | | |
| c From 2014 | | | |
| d From 2015 | | | |
| e From 2016 | | | |
| f Total of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2017 distributable amount | | | |
| i Carryover from 2012 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 Distributions for 2017 from Section D, line 7: \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2017 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | | |
| 7 Excess distributions carryover to 2018. Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a Excess from 2013 | | | |
| b Excess from 2014 | | | |
| c Excess from 2015 | | | |
| d Excess from 2016 | | | |
| e Excess from 2017 | | | |

Schedule A (Form 990 or 990-EZ) 2017

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.)

Lined area 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.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

Employer identification number

ST MARY'S FOOD BANK ALLIANCE

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) (2017)

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2017
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 7/25/06, 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?

Yes No

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

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

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

Yes No

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

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

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

1a If the organization elected, as permitted under 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) 2017

732051 10-09-17

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:

Table with 2 columns: Description (Beginning balance, Additions during the year, Distributions during the year, Ending balance) and Amount.

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.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include Beginning of year balance, Contributions, Net investment earnings, gains, and losses, Grants or scholarships, Other expenditures for facilities and programs, Administrative expenses, End of year balance.

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

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

Small table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 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.

Table with 5 columns: Description of property, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include Land, Buildings, Leasehold improvements, Equipment, Other, and a Total row.

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) DUE FROM AFFILIATE | 3,609,193. |
| (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 | 267,535. |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) | |

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 | 170,929,332. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains (losses) on investments | 2a | 25,097. | |
| b | Donated services and use of facilities | 2b | 583,564. | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | 470,342. | |
| e | Add lines 2a through 2d | 2e | | 1,079,003. |
| 3 | Subtract line 2e from line 1 | 3 | | 169,850,329. |
| 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 | | 169,850,329. |

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 | 162,113,021. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | 583,564. | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | 62,856. | |
| e | Add lines 2a through 2d | 2e | | 646,420. |
| 3 | Subtract line 2e from line 1 | 3 | | 161,466,601. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | 4c | | 0. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | | 161,466,601. |

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 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,

2018, MANAGEMENT BELIEVES ST. MARY'S DID NOT HAVE ANY UNCERTAIN TAX

POSITIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

REVENUE REPORTED BY SMFB FOUNDATION 1,158,514.

ELIMINATING ENTRIES -690,000.

LOSS ON DISPOSAL OF ASSETS 1,828.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 470,342.

Part XIII Supplemental Information *(continued)*

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES REPORTED BY SMFB FOUNDATION 751,028.

ELIMINATING ENTRIES -690,000.

LOSS ON DISPOSAL OF ASSETS 1,828.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 62,856.

2

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest instructions.

OMB No. 1545-0047

2017
Open to Public
Inspection

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

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | (iii) Did fundraiser have custody or control of contributions? | | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col. (i) | (vi) Amount paid to (or retained by) organization |
|---|---------------------------|--|----|-----------------------------------|---|---|
| | | Yes | No | | | |
| KELLY HART AND ASSOCIATES - 2831 N 31ST AVE, PHOENIX, AZ | FUNDRAISING/GRANT WRITING | | X | 650,607. | 48,000. | 602,607. |
| | | | | | | |
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| | | | | | | |
| Total | | | | 650,607. | 48,000. | 602,607. |

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AZ

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: 2831 N 31ST AVE, PHOENIX, AZ 85009

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

PAYMENTS FOR PROFESSIONAL GRANT WRITING SERVICES.

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.

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

OMB No. 1545-0047

2017

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? 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.

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|---------|---------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| | | | | | | | |
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| | | | | | | | |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **245.**

3 Enter total number of other organizations listed in the line 1 table **245.**

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

Schedule I (Form 990) (2017)

| 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 214 S 5TH ST BUCKEYE, AZ 85326 | 54-2160931 | 501(C)(3) | 0. | 2,453,369. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| ANDRE HOUSE OF AZ INC 213 S 11TH AVE PHOENIX, AZ 85007 | 86-0717841 | 501(C)(3) | 0. | 246,329. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| ARIZONA BAPTIST CHILDREN'S SERVICES - 2632 W AUGUSTA AVE - PHOENIX, AZ 85051 | 86-6053028 | 501(C)(3) | 0. | 38,174. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| ARIZONA ODD FELLOW (REBEKAH) 222 E INDIANOLA AVE PHOENIX, AZ 85012 | 86-0217129 | 501(C)(3) | 0. | 24,892. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| ASSOCIATION OF AZ FOOD BANKS 340 E CORONADO RD PHOENIX, AZ 85004 | 86-0507679 | 501(C)(3) | 0. | 153,591. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| AZ RETIREMENT HOME I AND II 7310 E PALM LN SCOTTSDALE, AZ 85257 | 86-0711505 | 501(C)(3) | 0. | 10,069. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| BANNER OLIVE BRANCH SENIOR CTR 11250 N 107TH AVE SUN CITY, AZ 85351 | 94-2745413 | 501(C)(3) | 0. | 2,068,453. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| BAPTIST CENTER MINISTRIES 1431 E SOUTHERN AVE PHOENIX, AZ 85040 | 20-1569551 | 501(C)(3) | 0. | 473,558. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| BEAVER CREEK SCHOOL 4810 E BEAVER CREEK RD RIMROCK, AZ 86335 | 86-0343804 | GOVERNMENT | 0. | 219,949. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

| 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 |
| BETANIA REFUGEE AND IMMIGRANT RELIEF - 3001 W INDIAN SCHOOL RD STE 210 - PHOENIX, AZ 85017 | 86-0657646 | GOVERNMENT | 0. | 24,414. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| BLACK FAMILY CHILD SERVICES 1522 E SOUTHERN AVE STE 1 PHOENIX, AZ 85040 | 86-0480412 | 501(C)(3) | 0. | 86,589. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| BREAD OF LIFE MISSIONS CAMP VERDE 1575 S SULLIVAN LN 28 CAMP VERDE, AZ 86322 | 86-0814302 | 501(C)(3) | 0. | 762,396. | 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. | 102,237. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| CALVARY UNITED METHODIST CHURCH 7949 W INDIAN SCHOOL RD PHOENIX, AZ 85033 | 86-0193155 | 501(C)(3) | 0. | 30,060. | 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. | 169,779. | 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. | 34,487. | 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. | 588,203. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| CARTWRIGHT SCHOOL DIST 83 4308 N 51ST AVE STE 103 PHOENIX, AZ 85031 | 86-6000517 | GOVERNMENT | 0. | 398,154. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |

| 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 |
| CEDAR UNIFIED SD JEDDITO SCHOOL MP 408 HWY 264 KEAMS CANYON, AZ 86034 | 52-1198289 | GOVERNMENT | 0. | 21,944. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CENTRAL TEXAS FOOD BANK 6500 METROPOLIS DR AUSTIN, TX 78744 | 74-2217350 | 501(C)(3) | 0. | 59,346. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CHILCHIBETO COMMUNITY FOOD BANK 2 MI S OF US 160 ON N59 AT CHAPTER KAYENTA, AZ 86033 | | 501(C)(3) | 0. | 23,362. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CHINLE UNIFIED SCHOOL DISTRICT P.O. BOX 587 CHINLE, AZ 86503 | | GOVERNMENT | 0. | 40,954. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CHRIST COMMUNITY UNITED METHODIST CHURCH - 104 W WESTERN AVE - AVONDALE, AZ 85323 | 86-6051092 | 501(C)(3) | 0. | 105,887. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CHRIST EVANGELICAL LUTHERAN CHURCH 918 S LITCHFIELD GOODYEAR, AZ 85338 | 86-0476656 | 501(C)(3) | 0. | 94,085. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CHURCH FOR THE NATIONS 6225 N CENTRAL AVE PHOENIX, AZ 85012 | 75-3114849 | 501(C)(3) | 0. | 164,537. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CHURCH OF GOD OF PROPHECY 5141 N 23RD AVE PHOENIX, AZ 85015 | 86-0808790 | 501(C)(3) | 0. | 196,839. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CIRCLE OF PAGE 801 AQUA AVE PAGE, AZ 86040 | 30-0170553 | 501(C)(3) | 0. | 654,203. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

| 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 |
| CIRCLE THE CITY 333 W INDIAN SCHOOL RD PHOENIX, AZ 85013 | 26-2420730 | 501(C)(3) | 0. | 133,210. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CITY OF AVONDALE 1007 S 3RD ST AVONDALE, AZ 85323 | 86-6000233 | GOVERNMENT | 0. | 183,057. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CITY OF TOLLESON 9555 W VAN BUREN TOLLESON, AZ 85353 | 47-2304025 | GOVERNMENT | 0. | 165,897. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CIVITAN FOUNDATION INC 5008 N CIVITAN RD WILLIAMS, AZ 86046 | 23-7036797 | 501(C)(3) | 0. | 51,500. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| COALITION FOR COMPASSION AND JUSTICE - 531 MADISON AVE - PRESCOTT, AZ 86303 | 47-0851633 | 501(C)(3) | 0. | 221,979. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| COCONINO CO HEALTH DEPT 2625 N KING ST FLAGSTAFF, AZ 86004 | 30-0170553 | GOVERNMENT | 0. | 94,609. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| COLORADO RIVER FOOD BANK 590 HANCOCK RD BULLHEAD CITY, AZ 86442 | 88-0345703 | 501(C)(3) | 0. | 717,183. | 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. | 50,988. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| COMMUNITY FB OF EASTERN OKLAHOMA 1304 N KENOSHA AVE TULSA, OK 74106 | 73-1184980 | 501(C)(3) | 0. | 125,540. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| FOOD, INC 3403 E CENTRAL AVE FRESNO, CA 93725 | 77-0320851 | 501(C)(3) | 0. | 912,150. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| COMMUNITY FOOD BANK 3003 S COUNTRY CLUB RD TUCSON, AZ 85713 | 51-0192519 | 501(C)(3) | 0. | 3,244,759. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| COMMUNITY HOPE CENTERS 14185 N 83RD AVE PEORIA, AZ 85381 | 27-0957157 | 501(C)(3) | 0. | 371,025. | 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. | 221,375. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CONCERNED CITIZENS FOR COMM HEALTH 7700 E ROOSEVELT SCOTTSDALE, AZ 85258 | 95-3416943 | 501(C)(3) | 0. | 262,064. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CONGRESS COMMUNITY CHURCH INC 27400 SANTA FE CONGRESS, AZ 85332 | 86-0558310 | 501(C)(3) | 0. | 325,809. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CONGRESS SENIOR CITIZEN'S INC 26733 SANTA FE RD CONGRESS, AZ 85332 | 94-2882535 | GOVERNMENT | 0. | 110,427. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| COP HOUSING DEPT (DEVONSHIRE) 2802 E DEVONSHIRE PHOENIX, AZ 85016 | 86-6000256 | 501(C)(3) | 0. | 634,748. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CORDES LAKES COMMUNITY ASSOCIATION 16357 S CORDES LAKES DR CORDES LAKES, AZ 86333 | 86-0444010 | 501(C)(3) | 0. | 275,806. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

| 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 |
| CORNERSTONE MISSION PROJECT 3049 SYCAMORE ST KINGMAN, AZ 86409 | 86-0960036 | 501(C)(3) | 0. | 171,227. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CORNUCOPIA COMMUNITY ADVOCATES 95 SPOTTED FAWN CT. SEDONA, AZ 86351 | 86-0990310 | 501(C)(3) | 0. | 22,498. | 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. | 238,546. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| COVENANT OF GRACE 906 W PEORIA AVE PHOENIX, AZ 85029 | 86-0602290 | 501(C)(3) | 0. | 30,444. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CPLC (CHICANOS POR LA CAUSA) 1112 E BUCKEYE RD PHOENIX, AZ 85034 | 86-0227210 | 501(C)(3) | 0. | 873,553. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| CREIGHTON SCHOOLS CHILD NUTRITION AND WELLNESS - 2801 E MCDOWELL RD - PHOENIX, AZ 85008 | 86-6000474 | GOVERNMENT | 0. | 181,198. | 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. | 87,029. | 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. | 166,544. | 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. | 144,502. | 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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| DENNEHOTSO SENIOR CENTER E HIGHWAY 160 .5 MILES AFTER MILE M DENNEHOTSO, AZ 86535 | | 501(C)(3) | 0. | 57,332. | 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. | 267,286. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| DESERT MISSION ANGLICAN CHURCH 234 E ALICE AVE PHOENIX, AZ 85020 | 51-0546916 | 501(C)(3) | 0. | 8,522. | 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. | 5,665,658. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| DILCON COMMUNITY SCHOOL HC-63 BOX G WINSLOW, AZ 86047 | | GOVERNMENT | 0. | 58,726. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| DRUG ELIMINATION FAMILY AWARENESS PROGRAM - 8561 N 61ST AVE - GLENDALE, AZ 85302 | 31-1521614 | 501(C)(3) | 0. | 9,574. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| DYSART COMMUNITY CENTER 14414 N EL MIRAGE RD EL MIRAGE, AZ 85335 | 86-6031134 | 501(C)(3) | 0. | 134,895. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| EBONY HOUSE INC 6222 S 13TH ST PHOENIX, AZ 85042 | 86-0287878 | 501(C)(3) | 0. | 23,230. | 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. | 99,359. | 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 |
| EPWORTH UNITED METHODIST CHURCH 4802 N 59TH AVE PHOENIX, AZ 85033 | 86-6007719 | 501(C)(3) | 0. | 88,650. | 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. | 171,665. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| EZRAS CHOLIM OF ARIZONA 7118 N 7TH ST PHOENIX, AZ 85020 | 47-5645369 | 501(C)(3) | 0. | 46,154. | 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. | 225,119. | 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. | 6,549. | 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. | 100,322. | 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. | 105,689. | 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. | 31,115. | 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. | 74,714. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| FIRST SOUTHERN BAPTIST CHURCH OF PHOENIX - 3100 W CAMELBACK RD - PHOENIX, AZ 85017 | 86-0137800 | 501(C)(3) | 0. | 49,585. | OTHER - FEEDING AMERICA FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| FLAGSTAFF FAMILY FOOD CTR 3805 E HUNTINGTON DR FLAGSTAFF, AZ 86004 | 86-0754044 | 501(C)(3) | 0. | 4,429,546. | OTHER - FEEDING AMERICA FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| FOOD BANK OF CORPUS CHRISTI 826 KRILL ST CORPUS CHRISTI, TX 78408 | 74-2234089 | 501(C)(3) | 0. | 13,602. | OTHER - FEEDING AMERICA FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| FOOD BANK OF NORTHERN NEVADA 550 ITALY DR MCCARRAN, NV 89434 | 94-2924979 | 501(C)(3) | 0. | 238,604. | OTHER - FEEDING AMERICA FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| FOOD BANK OF THE GOLDEN CRESCENT 3809 E RIO GRANDE VICTORIA, TX 77903 | 74-2534561 | 501(C)(3) | 0. | 12,729. | OTHER - FEEDING AMERICA FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| FOOD BANK OF THE ROCKIES 10700 E 45TH AVE DENVER, CO 80239 | 84-0772672 | 501(C)(3) | 0. | 59,346. | OTHER - FEEDING AMERICA FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| FOOD FOR FAMILIES BULLHEAD CITY FOOD BANK INC - 590 HANCOCK RD - BULLHEAD CITY, AZ 86442 | 47-4838008 | 501(C)(3) | 0. | 2,385,939. | OTHER - FEEDING AMERICA FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| FOOTHILLS FOOD BANK 6038 E HIDDEN VALLEY DR CAVE CREEK, AZ 85331 | 86-0619725 | 501(C)(3) | 0. | 1,914,332. | OTHER - FEEDING AMERICA FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| FSL PROGRAMS, INC 1201 E THOMAS ROAD PHOENIX, AZ 85014 | 86-0411904 | 501(C)(3) | 0. | 20,786. | OTHER - FEEDING AMERICA FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

| 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 |
| FOUNDATION FOR SENIOR LIVING, INC 1201 E THOMAS ROAD PHOENIX, AZ 85014 | 86-0298945 | 501(C)(3) | 0. | 519,403. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| FRIENDLY HOUSE INC 723 S 1ST AVE PHOENIX, AZ 85003 | 86-0120506 | 501(C)(3) | 0. | 53,660. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| GENERATION CHURCH 11832 S WARNER ELLIOT LOOP PHOENIX, AZ 85044 | 86-0633920 | 501(C)(3) | 0. | 777,949. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| GILA BEND CAP 303 E PIMA ST GILA BEND, AZ 85337 | 86-0180965 | 501(C)(3) | 0. | 216,183. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| GILA CO HEALTH DEPT 107 W FRONTIER ST. STE A PAYSON, AZ 85541 | | GOVERNMENT | 0. | 50,316. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| GILA COMMUNITY FOOD BANK 317 HACKNEY AVE GLOBE, AZ 85501 | 86-0340833 | 501(C)(3) | 0. | 42,556. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| GLENDALE ELEMENTARY SCHOOL DISTRICT - 7301 N 58TH AVE - GLENDALE, AZ 85301 | | GOVERNMENT | 0. | 82,987. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| GLENDALE WILLIAM C JACK ELEMENTARY 7015 W MARYLAND AVE GLENDALE, AZ 85301 | | GOVERNMENT | 0. | 25,495. | 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. | 117,121. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |

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

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|--|------------|-------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| GOSPEL OF FAITH CHURCH ASHFORK LOT 104 BULLOCK RD ASH FORK, AZ 86320 | | 501(C)(3) | 0. | 219,447. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| GREATER BETHEL AME CHURCH 7040 S 40TH ST PHOENIX, AZ 85042 | 33-1012893 | 501(C)(3) | 0. | 170,478. | 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. | 87,274. | 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. | 48,306. | 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. | 14,218. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| HARDROCK CHAPTER INDIAN RTE 6621 KYKOTSMOVI VILLAGE, AZ 86039 | | 501(C)(3) | 0. | 61,991. | 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. | 148,956. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| HARVEST CHURCH ASSEMBLY OF GOD INC PHOENIX - 1002 N 91ST AVE - TOLLESON, AZ 85353 | 45-2654221 | 501(C)(3) | 0. | 26,610. | 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. | 609,018. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |

Schedule I (Form 990)

ST MARY'S FOOD BANK ALLIANCE

| 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 |
| HIGH PLAIN FOOD BANK 815 ROSS ST AMARILLO, TX 79102 | 75-1838348 | 501(C)(3) | 0. | 63,993. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| HOTEVILLA BACAVI COMMUNITY SCHOOL AZ-264 WEST HOTEVILLA, AZ 86030 | | 501(C)(3) | 0. | 27,830. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| HOUSE OF HOPE OF ARIZONA INC 4324 N 42ND AVE PHOENIX, AZ 85019 | 86-0911362 | 501(C)(3) | 0. | 5,312. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| HOUSE OF REFUGE SUNNYSLOPE INC 9835 N 7TH ST PHOENIX, AZ 85020 | 86-1026266 | 501(C)(3) | 0. | 551,439. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| HUALAPAI TRIBE 460 HUALAPAI WAY PEACH SPRINGS, AZ 86434 | 86-0092282 | GOVERNMENT | 0. | 92,116. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| ICM FOOD AND CLOTHING BANK 501 S 9TH AVE PHOENIX, AZ 85007 | 86-0401223 | 501(C)(3) | 0. | 5,471,185. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| JOSHUA TREE FEEDING PROGRAM 214 E WILLETTA PHOENIX, AZ 85004 | 86-0789213 | 501(C)(3) | 0. | 217,842. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| JOURNEY CHURCH NETWORK 750 E MINGUS AVE COTTONWOOD, AZ 86326 | 23-7216131 | 501(C)(3) | 0. | 1,018,764. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| JUSTA CENTER INC 1001 W JEFFERSON ST PHOENIX, AZ 85007 | 47-2389424 | 501(C)(3) | 0. | 50,852. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

ST MARY'S FOOD BANK ALLIANCE

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|---|------------|-------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| KAYENTA CHAPTER HOUSE ST JUDE FB 1 MILE NORTH OF HIGHWAY 160 KAYENTA, AZ 86033 | | 501(C)(3) | 0. | 52,679. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| KAYENTA UNIFIED SCHOOL DISTRICT NORTH HWY 163 KAYENTA, AZ 86033 | | GOVERNMENT | 0. | 383,143. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| KINGMAN AID TO ABUSED PEOPLE 2016 MULLEN AVE KINGMAN, AZ 86401 | 86-0601113 | 501(C)(3) | 0. | 34,159. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| KINGMAN AREA FOOD BANK 2930 EAST BUTLER KINGMAN, AZ 86409 | 86-0503686 | 501(C)(3) | 0. | 2,418,344. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| KYKOTSMOVI VILLAGE 1 MAIN ST KYKOTSMOVI VILLAGE, AZ 86039 | 86-0648015 | 501(C)(3) | 0. | 39,177. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| LAKE HAVASU CITY INTERAGENCY 3550 CHALLENGER DR., SUITE 110 LAKE HAVASU CITY, AZ 86404 | 86-0516654 | 501(C)(3) | 0. | 842,030. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| LIFE SHARING CENTER INC 100 ASPEN DR TUBA CITY, AZ 86045 | 86-1047161 | 501(C)(3) | 0. | 1,133,523. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| LIFEBRIDGE COMMUNITY ALLIANCE INC 7510 N 27TH AVE PHOENIX, AZ 85051 | 37-1553260 | 501(C)(3) | 0. | 67,248. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| LITCHFIELD ELEMENTARY SCHOOL DISTRICT - 5340 N WIGWAM CREEK BLVD - LITCHFIELD PARK, AZ 85340 | 86-6000514 | GOVERNMENT | 0. | 1,220,833. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

ST MARY'S FOOD BANK ALLIANCE

| 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 |
| LIVING HOPE HELPING HAND 13270 S SUNLAND GIN RD ARIZONA CITY, AZ 85223 | 65-1238877 | 501(C)(3) | 0. | 425,857. | 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. | 112,142. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| LUTHERAN CHURCH OF THE MASTER 2340 W CACTUS RD PHOENIX, AZ 85029 | 43-0658188 | 501(C)(3) | 0. | 151,140. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| MANZANITA OUTREACH 1940 WILDFLOWER LANE CLARKDALE, AZ 86324 | 27-4446452 | 501(C)(3) | 0. | 321,296. | 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. | 10,989. | 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. | 1,562,976. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| MATTHEW'S CROSSING 1368 N ARIZONA AVE CHANDLER, AZ 85225 | 55-0896414 | 501(C)(3) | 0. | 6,702. | 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. | 257,971. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| MARICOPA COUNTY DEPT OF PUBLIC HEALTH - 1022 E GARFIELD ST - PHOENIX, AZ 85006 | 86-6000872 | GOVERNMENT | 0. | 189,241. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |

| 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 |
| MCMULLEN VALLEY FB 69725 CENTENNIAL PARK RD WENDEN, AZ 85357 | | 501(C)(3) | 0. | 182,376. | 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. | 134,664. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| MERCY HILL CHURCH 745 W FILLMORE ST PHOENIX, AZ 85007 | 47-1579225 | 501(C)(3) | 0. | 1,775,020. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| MERCY HOUSING SOUTHWEST 401 W BASELINE RD TEMPE, AZ 85283 | 86-0743192 | 501(C)(3) | 0. | 230,663. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| MIHS 2601 E ROOSEVELT ST PHOENIX, AZ 85008 | 86-0830701 | 501(C)(3) | 0. | 157,088. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| MINISTERIO CRISTO SANA 3632 E. GREENWAY RD PHOENIX, AZ 85032 | 82-1139784 | 501(C)(3) | 0. | 155,773. | 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. | 65,018. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| MOHAVE COUNTY HEALTH DEPT 2170 HAVAUPAI BLVD LAKE HAVASU CITY, AZ 86403 | | GOVERNMENT | 0. | 44,894. | 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. | 221,023. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |

| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II). | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| MURPHY COMMUNITY FDN AT MURPHY SCHOOL DIST - 2615 W BUCKEYE RD - PHOENIX, AZ 85009 | 86-0740275 | GOVERNMENT | 0. | 144,434. | 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. | 480,264. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| NATIVE AMERICAN CONNECTIONS 4520 N CENTRAL AVE STE 600 PHOENIX, AZ 85012 | 86-0293585 | 501(C)(3) | 0. | 165,496. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| NATIVE HEALTH (CENTRAL) 4041 N CENTRAL AVE BLDG C PHOENIX, AZ 85012 | 94-2540194 | 501(C)(3) | 0. | 7,297. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| NEIGHBORHOOD CHURCH 4633 W OSBORN RD PHOENIX, AZ 85031 | 86-0443992 | 501(C)(3) | 0. | 53,062. | 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. | 256,597. | 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. | 230,045. | 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. | 148,567. | 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. | 22,429. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |

Schedule I (Form 990)

ST MARY'S FOOD BANK ALLIANCE

| 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 |
| NEW DAY RECOVERY CTR 2221 N 42ND DR PHOENIX, AZ 85009 | 86-1039676 | 501(C)(3) | 0. | 59,153. | 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. | 50,780. | 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. | 128,967. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| NEW HORIZON YOUTH HOMES INC PO BOX 3296 FLAGSTAFF, AZ 86003 | 86-1014335 | 501(C)(3) | 0. | 28,590. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| NEW LIFE CENTER 1444 N MANZANITA GOODYEAR, AZ 85338 | 86-0635950 | 501(C)(3) | 0. | 13,820. | 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. | 159,760. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| NORTH MOUNTAIN CHRISTIAN AOG 341 E MOUNTAIN VIEW RD PHOENIX, AZ 85020 | 86-0441912 | 501(C)(3) | 0. | 193,760. | 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. | 59,346. | 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. | 7,347. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |

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| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| NORTHMINSTER PRESBYTERIAN FOOD BANK - 13001 N 35TH AVE - PHOENIX, AZ 85029 | 82-0586529 | 501(C)(3) | 0. | 158,969. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| OASIS FELLOWSHIP (PA/SNACK) 12812 OATMAN HWY TOPOCK, AZ 86436 | 45-3705064 | 501(C)(3) | 0. | 41,316. | 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. | 795,331. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| OLIVE BRANCH COMMUNITY OF HOPE 3546 E THOMAS RD PHOENIX, AZ 85018 | 86-6004439 | 501(C)(3) | 0. | 247,042. | 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. | 80,601. | 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. | 6,919. | 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. | 983,604. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| OUR LADY OF THE LAKE ROMAN CATHOLIC PARISH - 1975 S DAYTONA DR - LAKE HAVASU CITY, AZ 86406 | 32-0267687 | 501(C)(3) | 0. | 56,678. | 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. | 1,058,038. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |

ST MARY'S FOOD BANK ALLIANCE

| 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 |
| PAINTED DESERT DEMONSTRATION PROJECTS INC - 145 LEUPP RD - FLAGSTAFF, AZ 86004 | 86-0710679 | 501(C)(3) | 0. | 55,972. | 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. | 372,157. | 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. | 509,779. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| PHOENIX RESCUE MISSION COMMUNITY SOLUTIONS - 1801 S 35TH AVE - PHOENIX, AZ 85009 | 86-6057771 | 501(C)(3) | 0. | 5,510,115. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| PILGRIM REST FOUNDATION KC 1401 E JEFFERSON ST PHOENIX, AZ 85034 | 86-0885862 | 501(C)(3) | 0. | 282,742. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| PINAL CO DIV OF PUBLIC HEALTH 971 N. JASON LOPEZ CIRCLE, BLDG D FLORENCE, AZ 85132 | 47-0987895 | GOVERNMENT | 0. | 734,334. | 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. | 17,887. | 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. | 28,615. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| QUARTZSITE FOOD BANK CSFP 40 MOON MOUNTAIN RD QUARTZSITE, AZ 85359 | 47-3013722 | 501(C)(3) | 0. | 335,643. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

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| RECOVERY INNOVATIONS OF ARIZONA INC - 11361 N 99TH AVE SUITE 402 - PEORIA, AZ 85345 | 86-0671446 | 501(C)(3) | 0. | 16,581. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| RED MTN ACTIVE ADULT CENTER 7550 E ADOBE ST MESA, AZ 85207 | 94-2596075 | 501(C)(3) | 0. | 11,365. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| REGIONAL FOOD BANK OF OKLAHOMA 3400 S MOULTON DRIVE OKLAHOMA CITY, OK 73137 | 74-1100380 | 501(C)(3) | 0. | 858,643. | 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. | 32,198. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| ROOSEVELT SCHOOL DIST 66 6218 S 7TH ST PHOENIX, AZ 85042 | | GOVERNMENT | 0. | 12,965. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| RUNNINGELK MINISTRIES INC NAVAJO RTE 60 MILE MARKER 10 DILKON, AZ 86047 | 47-2555939 | 501(C)(3) | 0. | 80,691. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| SAGUARO JANES SENIOR CTR 21802 W WILSON WITTMANN, AZ 85361 | 86-0476466 | 501(C)(3) | 0. | 1,204,079. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| SALT RIVER PIMA MARICOPA INDIAN COMMUNITY - 1952 N LONGMORE RD - SCOTTSDALE, AZ 85256 | | GOVERNMENT | 0. | 75,795. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| SALVATION ARMY 6010 W NORTHERN AVE STE 200 GLENDALE, AZ 85301 | 94-1156347 | 501(C)(3) | 0. | 1,488,402. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |

ST MARY'S FOOD BANK ALLIANCE

| 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 |
| SANTO NINO CATHOLIC COMMUNITY 3206 W MELVIN ST PHOENIX, AZ 85009 | 47-1795408 | 501(C)(3) | 0. | 420,852. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| SDA COMMUNITY SERVICES 1406 N BOOTHILL DR CAMP VERDE, AZ 86332 | 86-0131620 | 501(C)(3) | 0. | 1,967,914. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | 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. | 389,562. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | 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. | 2,719,789. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| SHONTO PREPARATORY SCHOOL DISTRICT RTE 98 AND 6320, E 5 MILES SHONTO, AZ 86054 | 86-0827306 | GOVERNMENT | 0. | 116,998. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| SICHOMOVI VILLAGE PO BOX 941 POLACCA, AZ 86042 | | GOVERNMENT | 0. | 100,945. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | 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. | 32,903. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| SOJOURNER CENTER 2330 E FILLMORE ST PHOENIX, AZ 85036 | 94-2465081 | 501(C)(3) | 0. | 47,044. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| SOUTH MOUNTAIN COMMUNITY COLLEGE 7050 S 24TH ST STE 114 PHOENIX, AZ 85042 | | GOVERNMENT | 0. | 172,101. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS |

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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| SOUTH PHOENIX BAPTIST CHURCH 2006 E BROADWAY RD PHOENIX, AZ 85040 | 73-1659656 | 501(C)(3) | 0. | 439,761. | 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. | 13,785. | 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. | 115,748. | 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. | 26,392. | 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. | 548,782. | 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. | 168,342. | 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. | 72,680. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |
| STAND TOGETHER AND RECOVER (STAR) 2144 E ROOSEVELT ST PHOENIX, AZ 85006 | 86-0586210 | 501(C)(3) | 0. | 22,572. | 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. | 415,899. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS | |

ST MARY'S FOOD BANK ALLIANCE

| 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 |
| SUN CITIES SPAY A STRAY PO BOX 52 YOUNGTOWN, AZ 85363 | 86-1023948 | 501(C)(3) | 0. | 52,530. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| SUNSHINE GROUP HOMES INC 17201 N 63RD AVE GLENDALE, AZ 85308 | 86-0815254 | 501(C)(3) | 0. | 281,710. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| SV GLEANERS 6501 W VIRGINIA PHOENIX, AZ 85035 | 86-0419881 | 501(C)(3) | 0. | 1,735,945. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| SVDP CASA GRANDE 405 E 2ND ST CASA GRANDE, AZ 85122 | 86-0570967 | 501(C)(3) | 0. | 838,140. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| SVDP DIOCESE PHOENIX P.O. BOX 13600 PHOENIX, AZ 85002 | 86-0096789 | 501(C)(3) | 0. | 4,103,263. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| SVDP NEEDLES 10287 BARRECKMAN RD MOHAVE VALLEY, AZ 86406 | 33-0627839 | 501(C)(3) | 0. | 74,820. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| TANNER GARDENS APARTMENTS 4420 S 18TH PL PHOENIX, AZ 85040 | 23-7155004 | 501(C)(3) | 0. | 72,012. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| TEEC NOS POS SR CENTER 1 MILE S OF US160 TEEC NOS POS, AZ 86514 | | GOVERNMENT | 0. | 40,372. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| TEEN CHALLENGE OF ARIZONA PO BOX 13444 PHOENIX, AZ 85002 | 86-0255257 | 501(C)(3) | 0. | 199,794. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

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| TEMPE COMMUNITY ACTION AGENCY 2146 E APACHE BLVD TEMPE, AZ 85281 | 86-0254820 | GOVERNMENT | 0. | 20,323. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| TEMPLO CALVARIO 6406 N. 65TH DRIVE PHOENIX, AZ 85031 | 26-0072729 | 501(C)(3) | 0. | 102,922. | 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. | 184,338. | 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. | 109,286. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| THE SALVATION ARMY ADULT RECOVERY CENTER - 15 E PIMA ST - PHOENIX, AZ 85004 | 94-1156347 | 501(C)(3) | 0. | 27,115. | 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. | 58,109. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| TOLIKAN SENIOR COUNCIL CENTER IR 35 AND DR 5045 TEEC NOS POS, AZ 86514 | | GOVERNMENT | 0. | 142,568. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| TOLLESON ELEMENTARY SCHOOL DIST 9261 W VAN BUREN RD TOLLESON, AZ 85353 | 86-6000490 | GOVERNMENT | 0. | 411,421. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| TOWN OF FREDONIA 100 E WOODHILL RD FREDONIA, AZ 86022 | 86-0186382 | GOVERNMENT | 0. | 429,835. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

ST MARY'S FOOD BANK ALLIANCE

| 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 |
| TOWN OF GUADALUPE CAP CSFP 9241 S AVENIDA DE YAQUI GUADALUPE, AZ 85283 | | GOVERNMENT | 0. | 44,064. | 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. | 202,254. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| UMOM 3335 W FILLMORE ST PHOENIX, AZ 85009 | 86-0521062 | 501(C)(3) | 0. | 26,113. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| UNION ELEMENTARY SCHOOL DIST 3834 S 91ST AVE TOLLESON, AZ 85353 | 86-6000506 | GOVERNMENT | 0. | 99,323. | 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. | 1,467,614. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| VALLEY YOUTH ORGANIZATION INC 3301 N MAJESTY PRESCOTT VALLEY, AZ 86314 | 86-0542919 | 501(C)(3) | 0. | 15,805. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |
| VILLAGE OF TEWA HWY 264 MP 392.5 POLACCA, AZ 86042 | | GOVERNMENT | 0. | 120,135. | 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. | 110,205. | 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. | 341,404. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | | COMMUNITY FOOD DISTRIBUTIONS |

ST MARY'S FOOD BANK ALLIANCE

| 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 |
| VIVRE (RESIDENTIAL) 2501 W ELM ST PHOENIX, AZ 85017 | 45-4743181 | 501(C)(3) | 0. | 72,154. | 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. | 254,677. | 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. | 45,381. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| WESTWARD HO 618 N CENTRAL AVE PHOENIX, AZ 85004 | 86-1045776 | 501(C)(3) | 0. | 60,739. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| WILLCOX DISTRIBUTION CENTER 931 N BISBEE AVE WILLCOX, AZ 85643 | 51-0192519 | 501(C)(3) | 0. | 810,155. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| WILLIAMS FOOD PANTRY AND MORE 125 S 3RD ST WILLIAMS, AZ 86046 | 82-1634562 | 501(C)(3) | 0. | 457,144. | 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. | 331,419. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| YARNELL FOOD BANK INC 22815 HIGHWAY 89 YARNELL, AZ 85362 | 47-3449359 | 501(C)(3) | 0. | 337,474. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| YAVAPAI APACHE NATION 3364 HAMALEY AVE CAMP VERDE, AZ 86322 | 86-0210241 | GOVERNMENT | 0. | 54,450. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

ST MARY'S FOOD BANK ALLIANCE

| 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 |
| YAVAPAI COUNTY COMMUNITY HEALTH 75 E HOLLAMON ST CAMP VERDE, AZ 86322 | | GOVERNMENT | 0. | 547,697. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| YAVAPAI FOOD BANK 8866 E LONG MESA DR PRESCOTT VALLEY, AZ 86314 | 86-0709163 | 501(C)(3) | 0. | 2,188,424. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| YUCCA COMMUNITY FOOD PANTRY 12349 S FRONTAGE RD YUCCA, AZ 86438 | 82-2186224 | 501(C)(3) | 0. | 412,123. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| YUMA COMMUNITY FOOD BANK 2404 E 24TH ST STE A YUMA, AZ 85365 | 86-0457836 | 501(C)(3) | 0. | 1,349,963. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| YWCA MARICOPA COUNTY 8561 N 61ST AVE GLENDALE, AZ 85302 | 86-0098936 | 501(C)(3) | 0. | 53,217. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| AAAA ALCOHOL AND ADDICTION 4430 N 23RD AVE PHOENIX, AZ 85015 | 86-0267826 | 501(C)(3) | 0. | 639,633. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| ABUNDANT LIFE CENTER 4550 N 51ST AVE PHOENIX, AZ 85031 | 26-0072363 | 501(C)(3) | 0. | 301,701. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| AGUA FRIA FOOD AND CLOTHING BANK 405 E HARRISON AVONDALE, AZ 85323 | 56-2515365 | 501(C)(3) | 0. | 1,345,933. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| AIM RIGHT MINISTRIES 1013 N 13TH ST PHOENIX, AZ 85006 | 86-0821440 | 501(C)(3) | 0. | 162,760. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT FOOD | FOOD | COMMUNITY FOOD DISTRIBUTIONS |

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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ALHAMBRA ELEM SCHOOL DISTRICT / ANDULACIA - 4730 W CAMPBELL - PHOENIX, AZ 85031 | 86-6000510 | GOVERNMENT | 0. | 241,948. | OTHER - FEEDING AMERICA FOOD | VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS |
| ALHAMBRA ELEM SD 68 (BARCELONA) 6530 N 44TH AVE GLENDALE, AZ 85301 | 86-0857358 | GOVERNMENT | 0. | 167,072. | OTHER - FEEDING AMERICA FOOD | VALUATION REPORT FOOD | COMMUNITY FOOD DISTRIBUTIONS |
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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. | 27,167,760. | OTHER - FEEDING AMERICA FOOD VALUATION REPORT | FOOD |
| | | | | | |
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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.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

ST MARY'S FOOD BANK ALLIANCE

Employer identification number

23-7353532

Part I Questions Regarding Compensation

| | Yes | No |
|---|-------------------------------------|-------------|
| 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"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <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 | 1b | |
| 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? | 2 | |
| 3 Indicate which, if any, of the following the 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 type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <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. | 4a 4b 4c | X X X |
| 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. | 5a 5b | X X |
| 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. | 6a 6b | X X |
| 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III | 7 | X |
| 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | 8 | X |
| 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? | 9 | |

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

Schedule J (Form 990) 2017

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) | 229,985. | 0. | 6,231. | 17,121. | 253,337. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. |
| (2) SARAH STUCKEY CFO | (i) | 171,945. | 0. | 5,136. | 10,743. | 187,824. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. |
| (3) LISA NOTARO-GOIN CDO | (i) | 166,583. | 0. | 4,908. | 10,672. | 182,163. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. |
| (4) DUANE LAWSON COO | (i) | 160,479. | 0. | 3,392. | 4,271. | 168,142. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | |
| | (ii) | | | | | | |
| | (i) | | | | | | |
| | (ii) | | | | | | |
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| | (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

2017

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

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

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 | 2,145 | 139,330,126 | FEEDING AMERICA FOOD VAL |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other ▶ () | | | | |
| 26 Other ▶ () | | | | |
| 27 Other ▶ () | | | | |
| 28 Other ▶ () | | | | |

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 6

| | 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. | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2017

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

OMB No. 1545-0047

2017

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 88 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 50 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 96 SCHOOLS AND COMMUNITY CENTERS TO PROVIDE

NEARLY 3,000 BACKPACKS 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) (2017)

732211 09-07-17

Name of the organization

ST MARY'S FOOD BANK ALLIANCE

Employer identification number

23-7353532

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

THE COMMUNITY KITCHEN IS A LIFE SKILLS AND FOOD SERVICE TRAINING

PROGRAM FOR THOSE WITH BARRIERS TO EMPLOYMENT. STUDENTS GAIN THE SKILLS

TO GET JOBS OFFERING LIVABLE WAGES, BENEFITS, AND OPPORTUNITIES FOR

ADVANCEMENT THROUGH HANDS-ON FOOD SERVICE TRAINING AS WELL AS CLASSROOM

STUDIES. DURING THE PAST DECADE, THE COMMUNITY KITCHEN HAS PROVIDED

THOUSANDS OF MEALS TO THOSE IN NEED, WHILE TRANSFORMING THE LIVES OF

COUNTLESS PARTICIPANTS AND FAMILIES. IN ADDITION TO TRAINING, EACH

STUDENT RECEIVES JOB-PLACEMENT ASSISTANCE AND SUPPORT FOLLOWING

GRADUATION.

EXPENSES \$ 805,196. INCLUDING GRANTS OF \$ 0. REVENUE \$ 37,231.

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

STATING ANY KNOWN CONFLICTS, OR STATING THAT THERE ARE NONE.

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

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.

Name of the organization

ST MARY'S FOOD BANK ALLIANCE

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

Employer identification number
23-7353532

OMB No. 1545-0047

2017

Open to Public Inspection

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 |
|---|-------------------------|--|---------------------|---------------------------|----------------------------------|
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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 |
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For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule R (Form 990) 2017

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 | | | |
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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 |
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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 I-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

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) | SMFBB FOUNDATION | C | 690,000. 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 | |
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Part VII Supplemental Information.

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

Lined area for supplemental information.