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Form **990** (2009)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

٠ _	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).											
	not include amounts reported on lines 6b, 3b, 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 governments and		· · · · · · · · · · · · · · · · · · ·									
	organizations in the U.S. See Part IV, line 21	2,044,951.	2,044,951.									
2	Grants and other assistance to individuals in											
	the U.S. See Part IV, line 22	3,226,878.	3,226,878.									
3	Grants and other assistance to governments,											
	organizations, and individuals outside the U.S.											
	See Part IV, lines 15 and 16	1,057,009.	1,057,009.									
4	Benefits paid to or for members											
5	Compensation of current officers, directors,											
	trustees, and key employees											
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	Pension plan contributions (include section 401(k)											
	and section 403(b) employer contributions)											
9	Other employee benefits											
10	Payroll taxes											
11	Fees for services (non-employees).											
а	Management											
b	Legal											
С	Accounting	9,400.		9,400.								
d	Lobbying											
е	Professional fundraising services. See Part IV, line 17											
f	Investment management fees											
g	Other											
12	Advertising and promotion	<u>850.</u>			850.							
13	Office expenses	2,490.	410.	2,080.								
14	Information technology											
15	Royalties											
16	Occupancy		· · · · · · · · · · · · · · · · · · ·									
17	Travel											
18	Payments of travel or entertainment expenses			;								
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings	55.		55.								
20	Interest											
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	1,773.	1,418.	355.								
23	Insurance											
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)											
а	Program development	150,000.	135,000.	15,000.								
b	Shipping	17,840.	17,840.	13,000								
c	biiippiiig	1,,010	17,010.									
d												
e												
f	All other expenses											
25	Total functional expenses. Add lines 1 through 24f	6,511,246.	6,483,506.	26,890.	850.							
26	Joint costs. Check here If following											
	SOP 98-2. Complete this line only if the organization		ļ									
	reported in column (B) joint costs from a combined											
	educational campaign and fundraising solicitation											

Par	t X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		10,818.	1_	107,167.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		175,675.	3	133,300.
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, dir	ectors, trustees, key			
		employees, and highest compensated employee	s. Complete Part II	•		
1		of Schedule L			5_	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)) and persons described in section 495				
		Part II of Schedule L			6	
ş	7	Notes and loans receivable, net			7_	
Assets	8	Inventories for sale or use			8_	
4	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other				
		basis. Complete Part VI of Schedule D	10a 8,863.			
	ь	Less accumulated depreciation	10b 2,146.	8,490.	10c	6,717.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line 1	1		12	
	13	Investments - program-related. See Part IV, line 1	1		13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	194,983.	16	247,184.
	17	Accounts payable and accrued expenses		3,200.	17	
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		 	20	
ies	21	Escrow or custodial account liability Complete F		<u> </u>	21	
Liabilities	22	Payables to current and former officers, director	- · · ·			
Lia		highest compensated employees, and disqualifie	ed persons. Complete Part II	-		
		of Schedule L	tood though months of		22	
	23 24	Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated	·		23	
	25	Other liabilities. Complete Part X of Schedule D	tillid parties		24 25	
	26	Total liabilities. Add lines 17 through 25		3,200.	26	0.
_	20	Organizations that follow SFAS 117, check he	re X and complete	3,200.	20	
S		lines 27 through 29, and lines 33 and 34.	and complete			
SC.	27	Unrestricted net assets		191,783.	27	247,184.
ajar	28	Temporarily restricted net assets			28	21//1010
Ã	29	Permanently restricted net assets			29	
Ë		Organizations that do not follow SFAS 117, ch	neck here 🕨 🔲 and			
P.		complete lines 30 through 34.				
îţ	30	Capital stock or trust principal, or current funds			30	
SSE	31	Paid-in or capital surplus, or land, building, or eq	uipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	•		32	
Ž	33	Total net assets or fund balances		191,783.	33	247,184.
	34	Total liabilities and net assets/fund balances		194,983.	34	247,184.
						Form 990 (2009)

Form **990** (2009)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

2009

Employer identification number

ZUUJ Onen to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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. ➤ See separate instructions.

Open to Public Inspection

Dort 1	Beesen	Feeding	America's H	lungry	Chil	dren			41	-2061	<u> 798</u>	
Part I			ity Status (All organiz					tructions				
The organ			because it is. (For lines 1	_		-	•					
1 🖳	A church, co	nvention of churches	s, or association of church	ches desc	nbed in se	ection 170	(b)(1)(A)(í)).				
2 🖳			0(b)(1)(A)(ii). (Attach Sc	•								
3 🖳			tal service organization o									
4 📖	A medical res	search organization o	operated in conjunction	with a hos	pital desc	rıbed ın se	ction 170	(b)(1)(A)(ii	i). Enter th	e hospital	's nam	ıe,
	city, and stat											
5 📖	An organizat	on operated for the	benefit of a college or ur	niversity o	wned or op	perated by	a governi	mental uni	t describe	d ın		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)									
6 🖳	A federal, sta	ite, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).					
7 X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic desc	rıbed ı	n
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 organizat	n 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 i	unrelated business ta	axable income (less sect	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	nization at	fter June 3	0, 197	' 5
	See section	509(a)(2). (Complete	Part III.)									
10 🗔	An organizat	on organized and or	perated exclusively to te	st for publ	ic safety S	See sectio	n 509(a)(4	‡) .				
11	An organizat	on organized and op	perated exclusively for th	ne benefit	of, to perfo	orm the fu	nctions of,	or to carr	y out the p	ourposes o	f one	or
	more publicly	supported organiza	itions described in secti	on 509(a)(1) or section	on 509(a)(2	2). See se c	ction 509(a	a)(3). Ched	ck the box	that	
	describes the	e type of supporting	organization and compl	ete lines 1	1e through	n 11h.						
	a Type	l b	Type II c	с 🔙 Тур	e III - Fund	tionally in	tegrated		d 🗀	Type III - C	Other	
e	By checking	this box, I certify tha	it the organization is not	controlled	d directly o	r indirectly	by one o	r more disc	qualified p	ersons oth	er tha	n
	foundation m	anagers and other t	han one or more publicly	y supporte	ed organiza	ations des	cribed in s	ection 509	(a)(1) or s	ection 509	(a)(2)	
f			ten determination from t									
	supporting o	rganization, check th	nis box									
g	Since Augus	t 17, 2006, has the o	rganization accepted ar	ny gift or c	ontribution	from any	of the folio	owing pers	ons?			
	(i) A perso	n who directly or ind	irectly controls, either al	lone or tog	ether with	persons o	lescribed i	ın (ıı) and (ı	ıı) below,		Yes	No
	the gov	erning body of the su	apported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?	•						11g(ii)		
	(iii) A 35%	controlled entity of a	person described in (i) of	or (II) abovi	e?					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s).							
		, _										
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the c	organization	(v) Did yo	u notify the	(vi) Is organizatio	the	(vii) Am	o tnuor	 f
orga	anization	'.	organization (described on lines 1-9		sted in your			(i) organization	ed in the	sup		
			`above or IRC section		document?			U.S.	.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
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Total		<u> </u>		<u> </u>	<u></u>							
LHA For F	Privacy Act ar	nd Paperwork Redu	ction Act Notice, see th	he Instruc	tions for			Schedule	A (Form	990 or 99	0-EZ)	2009

932021 02-08-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009 Feeding America's Hungry Children 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) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 1381345. 1159103. 1035845. 3522186. 6566647.13665126. include any "unusual grants") 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 1381345. 1159103. 1035845. 3522186. 6566647.13665126. 4 Total, Add lines 1 through 3 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) 13665126. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1381345 1159103. 1035845 6566647.13665126. 3522186. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 IV) 13665126. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 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 Section C. Computation of Public Support Percentage 100.00 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 100.00 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright |X|$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. 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 17a 10% -facts-and-circumstances test - 2009. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 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 Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for C)rganizations	Described in	Section 509(a)(2) (Complete only If	you checked the b	ox on line 9 of Part I.)
Section A. Public Support		·				
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not				1		
include any "unusual grants.")	<u></u>					<u> </u>
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that				1		
are not an unrelated trade or bus-			1			1
iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to		1	{	1		
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons				1 1		
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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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				1		
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	<u> </u>	<u> </u>	<u> </u>			<u> </u>
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 IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)	L	<u> </u>	<u> </u>			<u> </u>
14 First five years. If the Form 990 is fo	r the organization'	s first, second, thu	rd, fourth, or fifth t	ax year as a section	ı 501(c)(3) organı	zation,
check this box and stop here Section C. Computation of Publ	ic Support Pe	ercentage				
15 Public support percentage for 2009 (line 8, column (f) d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2008	Schedule A, Part	III, line 15		Ţ	16	%
Section D. Computation of Inve						
17 Investment income percentage for 20					17	%
18 Investment income percentage from			.,,	F	18	%
19a 33 1/3% support tests - 2009. If the			on line 14, and line	e 15 is more than 30	3 1/3%, and line	17 is not
more than 33 1/3%, check this box a b 33 1/3% support tests - 2008. If the	ind stop here. The	organization qual	ifies as a publicly s	supported organizat	tion	▶□
line 18 is not more than 33 1/3%, che	eck this box and st	top here. The orga	inization qualifies a	as a publicly suppor	rted organization	
20 Private foundation. If the organization	on did not check a	Dox on line 14, 19	a, or 19b, check t			20 or 990-FZ) 2009

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization

Feeding America's Hungry Children

Employer identification number 41 - 2061798

Par		ed Funds or Other Similar Funds or	r Accoi	unts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin			F
		(a) Donor advised funds	(b) Fur	nds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate 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	•		Yes No
6	Did the organization inform all grantees, donors, and donor a		ed only	
•	for charitable purposes and not for the benefit of the donor of	•	•	
	impermissible private benefit?	or definer defined, or for diffy earlier purpose cor	nennig	Yes No
Par		ganization answered "Yes" to Form 990. Part	IV line 7	
1	Purpose(s) of conservation easements held by the organizat			·
•	Preservation of land for public use (e.g., recreation or		ically imn	ortant land area
	Protection of natural habitat	Preservation of a certified		
	Preservation of open space		4 1115(0110	Strastare
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	CORSEN	ation easement on the last
-	day of the tax year	mad conservation contribution in the form of c	2 00/100/ 0	ation casement on the last
	day of the tax your		<u> </u>	Held at the End of the Tax Year
а	Total number of conservation easements		2a	Held at the End of the Tax Tear
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified historic sti	ructure included in (a)	2c	
ď	Number of conservation easements included in (c) acquired	• •	2d	
3	Number of conservation easements modified, transferred, re			n during the tay
3	year	neased, extinguished, or terminated by the or	garnzano	n during the tax
4	Number of states where property subject to conservation ea	sement is located		
5	Does the organization have a written policy regarding the pe			
•	violations, and enforcement of the conservation easements			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		a the ve	
7	Amount of expenses incurred in monitoring, inspecting, and	-		·
8	Does each conservation easement reported on line 2(d) about		_	
-	and section 170(h)(4)(B)(ii)?		-11-11	Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense sta	atement.	
•	include, if applicable, the text of the footnote to the organiza	•		•
	conservation easements.		5.g	
Pa	rt III Organizations Maintaining Collections o	of Art, Historical Treasures, or Other	er Simi	lar Assets.
— —	Complete if the organization answered "Yes" to Form	· · · · · · · · · · · · · · · · · · ·		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and balar	nce sheet	works of art, historical
	treasures, or other similar assets held for public exhibition, e			
	the footnote to its financial statements that describes these			
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balance	sheet wo	rks of art, historical treasures.
_	or other similar assets held for public exhibition, education, of			
	these items:	, , , , , , , , , , , , , , , , , , ,		o removing amounts relating to
	(i) Revenues included in 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 tre	easures, or other similar assets for financial or	ייעסים מוני	*
_	the following amounts required to be reported under SFAS 1	_	, provid	••
а	Revenues included in Form 990, Part VIII, line 1		_	\$
b	Assets included in Form 990, Part X			\$ \$
U	. 10000 molecular i oriti oooj i wieri			*

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Schedule D (Form 990) 2009

Schee		America's				or Othe		41-20			2
	Using the organization's acquisition, accessi										_
·	(check all that apply).	on, and other record	is, check any	OI IIII	TOILOWING THA	it ale a s	igillicant	us e or its (CONSCIO	i items	
а	Public exhibition	d	I I loan	or evol	hange progra	ame					
b	Scholarly research	e			nange progra	21113					
C	Preservation for future generations			'							—
4	Provide a description of the organization's co	ollections and evolar	n how thay fi	orthar th	na organizaty	on'e ovo	mpt ouro	oo in Bort	· VIV		
5	During the year, did the organization solicit of		-		_			ose III Pari	AIV		
3	to be sold to raise funds rather than to be my					er sirilla	asseis		7 v		
Par	t IV Escrow and Custodial Arran					" to For	m 000 Da	عصالا احس	Yes	N	<u>lo</u>
	reported an amount on Form 990, Pa		ete ii Organizi	allon ar	isweied ies	5 10 1-01	III 990, Fa	u i v, me ;	9, OI		
12	Is the organization an agent, trustee, custod		diany for cont	ıbutıon	or other se	cote not	unaludad				_
14	on Form 990, Part X?	ian or other intermet	Jiary 101 Cont	Dution	is of other as	SetS HOL	IIICIGGEG	<u> </u>	Yes		lo
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	llownog table					L	J res	шм	0
	ii res, explain the arrangement iii r art XIV	and complete the ic	mowning table						A-may ind		_
	Paginning halanga						40		Amount		—
	Beginning balance Additions during the year						1c				—
	Distributions during the year						1d			_	—
e	Ending balance						1e				—
f O-	Did the organization include an amount on F	orm 000 Bart V line	010				1f] _v .	——————————————————————————————————————	_
	If "Yes," explain the arrangement in Part XIV		211					L	Yes	Ш М	lo
Par			ewered "Ves	" to Fo	rm 990 Part	IV kpo 1	n				—
	2 1 Line William Complete	(a) Current year	(b) Prior y		(c) Two year			roore book	(a) Four	vaara baa	<u></u>
10	Reginning of year balance	(a) Current year	(b) Piloi	eai	(C) I WO year	SUACK	(a) Three y	ears back	(e) rour	years bac	<u>K</u>
1a	Beginning of year balance Contributions						<u> </u>				
b											—
	Net investment earnings, gains, and losses										—
đ	Grants or scholarships				<u> </u>						—
е	Other expenditures for facilities										
	and programs	}									
T	Administrative expenses				<u> </u>						
g	End of year balance				l <u>.</u>						—
2	Provide the estimated percentage of the year	ir end balance neld a									
a	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
C	· · · · · · · · · · · · · · · · · · ·	%									
За	Are there endowment funds not in the posse	ession of the organiz	ation that are	held a	nd administe	red for t	he organiz	ation	Г	 	
	by.									Yes N	<u>o_</u>
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
_	If "Yes" to 3a(ii), are the related organization:	•							3p		
Par	t VI Investments - Land, Building				Dart V. Irra	10					—
rai				-				- 			_
	Description of investment	(a) Cost or of basis (investigation)		•	or other		ccumulate	ea	(d) Bool	value	
	Land	Dasis (IIIVesti	- Indity	Dasis	(other)	ue	preciation				—
	Land	<u> </u>									—
b	Buildings										_
C	Leasehold improvements				0 062		2 1	16		717	,
d	Equipment	<u> </u>			8,863.		<u>2,1</u>	40.		5,717	•
	Other Add lines 1a through 1e. (Column (d) must e	agual Form 990. Part	Y column (F	line 1	10(01)					5 . 717	,

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

932053 02-01-10

_	dule D (Form 990) 2009 Feeding America's Hungry (Childre	en		2061798 Page	<u>, 4</u>
Par		o Audited	I Financial State	<u>ement</u>		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		6,566,647	<i>1</i> .
2	Total expenses (Form 990, Part IX, column (A), line 25)		_2		6,511,246	<u>.</u>
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		55,401	L.
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV.)		_8			
9	Total adjustments (net). Add lines 4 through 8		9			<u>) .</u>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a		10		55,401	
Par	t XII Reconciliation of Revenue per Audited Financial Statem	ents With	n Revenue per F	teturn		
1	Total revenue, gains, and other support per audited financial statements			1	6,566,647	<u>' •</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1		1 1		
а	Net unrealized gains on investments	2a		4 1		
b	Donated services and use of facilities	2b		4		
C	Recoveries of prior year grants	2c		4		
d	Other (Describe in Part XIV.)	2d		4- 1		
е	Add lines 2a through 2d			2e		<u>) .</u>
3	Subtract line 2e from line 1			3	6,566,647	•
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1 }				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		4 1		
b	Other (Describe in Part XIV)	4b		4 1	_	_
C	Add lines 4a and 4b			4c		<u>) .</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	manta Mid	h Everence no	5	6,566,647	•
	t XIII Reconciliation of Expenses per Audited Financial Stater	nents wii	in Expenses per	T -		_
1	Total expenses and losses per audited financial statements			1	6,511,246	<u> </u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 . 1		1		
а	Donated services and use of facilities	2a		-		
р	Prior year adjustments	2b		-		
C	Other losses	2c_		-		
ď	Other (Describe in Part XIV)	_2d		- 1	•	
е	Add lines 2a through 2d			_2e	<u> </u>	<u> -</u>
3	Subtract line 2e from line 1			3	6,511,246	<u>) •</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	1.1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1 1		
	Other (Describe in Part XIV)	_4b		-	•	
_ C	Add lines 4a and 4b			4c		<u>) .</u>
5 Da	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) t XIV Supplemental Information			5	6,511,246	<u>) •</u>
		LIII linna 1a	and 4 Dark IV has a		Db. Dart V. Ima 4. Dart	
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also con					Ĺ
A, III I	e 2, Part XI, line 6, Part XII, lines 20 and 40, and Part XIII, lines 20 and 40. Also con	ilbiete triis b	art to provide arry ad	unionai	mormation.	
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Schedule F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

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г	vame	OΤ	tne	organization

Employer identification number

	ding America	's Hungr	y Childr	en	41-20617	98
Par	t I General Info	rmation on A	ctivities Out	tside the United States. Compl	ete if the organization answered	"Yes"
	to Form 990, Par	rt IV, line 14b.				
1	_	_		ds to substantiate the amount of the g		
	grantees' eligibility for the	ne grants or assi	stance, and the	selection criteria used to award the gra	ants or assistance?	Yes No
2	For grantmakers. Desc	cribe in Part IV th	e organization's	procedures for monitoring the use of g	grant funds outside the United St	ates
3				Iditional space is needed.)		-
	(a) Region	(b) Number of	1	(d) Activities conducted in region	(e) If activity listed in (d)	(f) Total
		offices in the region	employees or agents in	(by type) (i.e., fundraising, program services, grants to	is a program service, describe specific type	expenditures for region
		in the region	region	recipients located in the region)	of service(s) in region	10/ Tegion
		ĺ				
			1		1	
<u>Nort</u>	h America			Program Services	Feeding Programs	1,057,009,
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Tota	ls >	· <u> </u>	0			1,057,009.
LHA	For Privacy Act and Pa	aperwork Reduc	tion Act Notice	e, see the Instructions for Form 990.	Schedule F	(Form 990) 2009

932071 02-01-10

24

15100504 733951 41398

(i) Method of valuation (book, FMV, appraisal, other) Page 2 Schedule F (Form 990) 2009 3 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any (h) Description of non-cash assistance /arious food 7,568,1tems (g) Amount of non-cash assistance 41-2061798 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by of cash grant cash disbursement (f) Manner of 0 (e) Amount recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Feeding America's Hungry Children the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (d) Purpose of Feeding Programs grant Use Schedule F.1 (Form 990) if additional space is needed. (c) Region North America Enter total number of other organizations or entities (b) IRS code section and EIN (if applicable) Schedule F (Form 990) 2009 (a) Name of organization Part II N က

41-2061798 Feeding America's Hungry Children

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Use Schedule F-1 (Form 990) if additional space is needed.

Schedule F (Form 990) 2009

1	ı		1 .	Ì	1	ı	ı	ı	i	ı
(h) Method of	(book, FMV, appraisal, other)	AM-								
(g) Description of	non-cash assistance	Various food items								
(f) Amount of	assistance	1046180								
(e) Manner of	cash dispursement									
(d) Amount of	casn grant	0								
umber of	recipients	2 218							-	
if additional space is ne		North America								
(a) Type of grant or assistance		Direct clients								

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009 Feeding America's Hungry Children 41-2061798 Page Part IV Supplemental Information
Complete this part to provide the information required in Part I, line 2, and any additional information.
Schedule F, Part I, Line 2: Monitoring 990 and Monthly reporting.
Schedule F, Part I, Line 3: Wire
Schedule F, Part III, Col (c): Direct clients - The number of recipients
assisted is an actual tally recorded by ID Cards scanned each time an
individual comes to take food items. Individuals register for ID Cards
and use the cards to obtain food no more than once daily.

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

of the Treasury

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.

2009 Open to Public Inspection	
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2 Employer identification number 41-2061798 (h) Purpose of grant or assistance X Yes Feeding Programs eeding Programs eeding Programs eeding Programs Feeding Programs Feeding Programs recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 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 (g) Description of non-cash assistance Various food Various food Narious food /arious food Parlous food Various food items tems tems tems tems items (f) Method of valuation (book, FMV, appraisal, other) air Market air Market air Market air Market air Market air Market Value 59,271, Value 60,540, Value 23,157, Value 10,782, Value 171,840, Value 15 381 (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant o, Ö 196,500 ન Feeding America's Hungry Children (c) IRC section if applicable 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) Enter total number of section 501(c)(3) and government organizations 30-0396918 73-1330955 71-1184980 74-2217350 71-0593529 41-2179075 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization Community Food Pantry of Benson Capital Area Food Bank of Texas Oklahoma - 1304 Kenosha Avenue Community Food Bank of Eastern 15455 N Greenway Hayden Loop Feed My Hungry People, Inc. 482 E Loma Catarina Drive or government 8201 S. Congress Ave. Scottsdale, AZ 85260 Fort Smith, AR 72902 Name of the organization Las Vegas, NV 85115 4190 N Pecos Road Benson, AZ 85602 TX 78745 Tulsa, OK 74106 Armful of Help Three Squares PO Box 8288 Part I Part II Austin Q

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

932101 02-02-10

Schedule I (Form 990) 2009

Page 2 (f) Description of non-cash assistance Jarious food items 41-2061798 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information recorded by ID Cards scanned each time an individual comes to take food The number of recipients assisted is an actual tally Individuals register for ID Cards and use the cards to obtain Schedule I, Part I, Line 2: Monitoring 990 and Monthly reporting. 3, 226, 878, FMV (d) Amount of non-cash assistance Feeding America's Hungry Children 0, (c) Amount of cash grant (b) Number of recipients 4227 food no more than once daily. (a) Type of grant or assistance Direct Client Walk ins Direct clients Schedule I (Form 990) 2009 items. Part III

29

Schedule I (Form 990) 2009

Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

Name of the organization

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Feeding America's Hungry Children

OMB No 1545-0047

Open to Public Inspection Employer identification number

41-2061798

(h) Purpose of grant or assistance

Feeding Programs Feeding Programs (g) Description of non-cash assistance Various food Various food Various food temai Ltems Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (book, FMV, appraisal, other) (f) Method of valuation 'air Market air Market air Market 476,249, Value 8,103, Value (e) Amount of assistance non-cash 。 (d) Amount of cash grant o (c) IRC section if applicable 86-6006686 501(c)(3) 501(c)(3) 48-0959213 (p) EIN (a) Name and address of organization or government Children's Feeding Network Gethsemane Food Ministry San Luis, AZ 85349 Wichita, KS 67211 Kansas Food Bank 1919 E Douglas PO Box 2067 PO Box 1193

Feeding Programs

tems

159,023, Value

501(c)(3)

48-0971077

Emergency Food Shelf Network

Fenton, MO 63026

8501 54th Avenue North

New Hope, MN 55428

eding Programs

Narious food

air Market

160,206, Value

501(c)(3)

41-1246404

tems.

eeding Programs

Various food

air Market

108,345, Value

0

501(c)(3)

94-3041517

Food Link for Tulare County

Visalia, CA 93279

PO Box 1544

900 Pennsylvania Avenue San Francisco Food Bank

San Francisco, CA 94107

tems

Feeding Programs

Various food

Pair Market

59,129, Value

Ö

501(c)(3)

94-2558802

tems

30,035, Nalue 225,812, Value LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(c)(3) 17-8421400 501(c)(3) 43-1208665 Harvesters Community Food Network Kansas City, MO 64129 Monark Baptist Church 3801 Topping Avenue 18472 Linden Drive Neosho, MO 64850

Schedule I-1 (Form 990) 2009

Feeding Programs

Various food

air Market

Reding Programs

Parious food

'air Market

tems

30

SCHEDULE I-1 (Form 990) Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047
2009
Open to Public

Schedule I-1 (Form 990) 2009 (h) Purpose of grant or assistance Employer identification number 41-2061798Inspection Peeding Programs (g) Description of non-cash assistance Various food items Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (book, FMV, appraisal, other) (f) Method of valuation air Market 280,578, Value (e) Amount of non-cash assistance Ö (d) Amount of cash grant For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Feeding America's Hungry Children (c) IRC section if applicable 85-0278525 501(c)(3) (p) EIN (a) Name and address of organization or government Albuquerque, NM 87106 Roadrunner Food Bank Name of the organization 2645 Baylor Dr. SE LHA

SCHEDULE M (Form 990)

Noncash Contributions

organizations answered "Yes" on Form

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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

	Feeding America's Hungry Children					41-2061798			
Par	Part I Types of Property		(b) Number of	(c) Revenues reported on	(d) Method of dete		ning		
		applicable	contributions	Form 990, Part VIII, line 1g	reven				
	Aut Minden of out	 	 		 				
•	Art - Works of art Art - Historical treasures	<u> </u>			 				
2	Art - Fractional interests		 		 				
_	Books and publications				 				
	·	<u> </u>			 				
	Clothing and household goods Cars and other vehicles	<u> </u>		 	 				
-	Boats and planes		<u> </u>	 	 				
7	•	<u> </u>		 	 			——	
	Intellectual property	ļ	 	 					
	Securities - Publicly traded Securities - Closely held stock	<u> </u>	 	 	 				
		<u> </u>		 	 				
11	Securities - Partnership, LLC, or		<u> </u>						
	trust interests				 				
12	Securities - Miscellaneous				 				
13	Qualified conservation contribution -)					
	Historic structures			<u> </u>	 	-			
14	Qualified conservation contribution Other								
15	Real estate - Residential			 	 				
16	Real estate - Commercial		 	<u></u>	<u> </u>				
17	Real estate - Other	<u> </u>			 				
18	Collectibles	17	 	6 116 054	77.2				
19	Food inventory	X	1	6,116,954.	Fair Market	<u>va</u>	Tue		
20	Drugs and medical supplies				 				
21	Taxidermy	<u> </u>			 				
22	Historical artifacts	<u> </u>	ļ	 					
23	Scientific specimens			ļ	 				
24	Archeological artifacts	<u> </u>			ļ				
25	Other ()	ļ	 						
26	Other ()	ļ			ļ				
27	Other ()			ļ 	 				
<u> 28</u>	Other ()	L	l	<u> </u>	İ				
29	Number of Forms 8283 received by the organ		-	1 1					
	for which the organization completed Form 82	283, Part IV,	Donee Acknowled	gment 29					
							Yes	No	
30a	During the year, did the organization receive b	-		•			1		
	at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for								
	the entire holding period?					30a	ļ	<u>X</u>	
b	If "Yes," describe the arrangement in Part II.							_	
31							<u> </u>	X	
32a	2a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash							1	
	contributions?					32a	L	X	
b	If "Yes," describe in Part II.]	
33	If the organization did not report revenues in o	column (c) fo	r a type of propert	y for which column (a) is ch	ecked,		1		
	describe in Part II.						<u> </u>		
LHA	For Privacy Act and Paperwork Reduction	n Act Notice	e, see the Instruct	ions for Form 990.	Schedule I	M (For	n 990	2009	