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Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047 Open to Public

Inspection

| A | For the | 2011 calendar year, or tax year beginning OCT 1, 2011 and ending | SEP 30, 2012 | | | | | |
|---|----------------|---|--------------------------------|-------------------------------|--|--|--|--|
| | Check if | | D Employer Identific | cation number | | | | |
| | Addres | Feeding America's Hungry Children | ŀ | | | | | |
| Ε | Name change | Doing Business As | 41-2 | 061798 | | | | |
| \vdash | Initial | Number and street (or P.O. box if mail is not delivered to street address) Room/st | ite E Telephone numbe | r | | | | |
| | Termin | | |)241-2873 | | | | |
| Γ | Amend | | G Gross receipts \$ | 4,912,037. | | | | |
| Г | Applic | Phoenix, AZ 85027 | H(a) Is this a group re | | | | | |
| | pendir | F Name and address of principal officer:Virgil Earls | for affiliates? | Yes X No | | | | |
| | | same as C above | H(b) Are all affiliates inc | cluded? Yes No | | | | |
| $\overline{}$ | Tax-axe | | | list. (see instructions) | | | | |
| | | e: www.feedingahc.org | H(c) Group exemptio | <u>-</u> | | | | |
| | | | | A State of legal domicile: AZ | | | | |
| | art I | Summary | | | | | | |
| _ | T 4 | Briefly describe the organization's mission or most significant activities: Rushing | lifesaving em | ergency | | | | |
| Activities & Governance | ' | food to impoverished families throughout Ame | | | | | | |
| пa | 2 | | | | | | | |
| Ž | 3 | Check this box if the organization discontinued its operations or disposed of n Number of voting members of the governing body (Part VI, line 1a) | | 5 | | | | |
| පි | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | | 5 | | | | |
| ಹ | A 5 | Total number of individuals employed in calendar year 2011 (Part V, line 2a) | | 0 | | | | |
| E | η ο | Total number of volunteers (estimate if necessary) | | 0 | | | | |
| ₽ | 6 - | Total unrelated business revenue from Part VIII, column (C), line 12 | | 0. | | | | |
| (G) | /a | | | 0. | | | | |
| 1 | Ь | Net unrelated business taxable income from Form 990-T, line 34 | Prior Year | Current Year | | | | |
| \mathfrak{Q} | | O 1 th three and accepte (Double)(III three 4th) | 3,747,917. | 4,912,037. | | | | |
| Revenue B | | Contributions and grants (Part VIII, line 1h) | 3,141,311. 0. | 0. | | | | |
| <u>~</u> € | | Program service revenue (Part VIII, line 2g) | 0. | | | | | |
| 爱 | 10 | Investment income (Part VIII, column (A), lines 3,4, and 7d) | | 0. | | | | |
| 3 | | Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 9c, 10c, and 11e) | 0. | 0. | | | | |
| シジンシー | | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 3,747,917. | | | | | |
| 3} | 13 | Grants and similar amounts paid (Part 12) Column (A) (lines 1-3) | 3,663,763. | | | | | |
| Ó | 14 | Benefits pald to or for members (Part IX, column; (A), line 4 | 0. | 0. | | | | |
| 8 | 15 | Salaries, other compensation, employee benefits (Part IX) column (A), lines 5-10) | 0. | 0. | | | | |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A) (ine 1)e) | 0. | 0. | | | | |
| ğ | b. | Total fundralsing expenses (Part X, column (D), line 25) | | | | | | |
| ш | 17 | Other expenses (Part IX, column (A) dines 11a-11d, 11f-24e) | 167,113. | | | | | |
| | 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 3,830,876. | 4,890,371. | | | | |
| | 19 | Revenue less expenses. Subtract line 18 from line 12 | <u>-82,959.</u> | 21,666. | | | | |
| 26 | | V | Beginning of Current Year | End of Year | | | | |
| Sec. | 20 | Total assets (Part X, line 16) | 164,400. | 186,095. | | | | |
| E | 21 | Total liabilities (Part X, line 26) | <u> </u> | 204. | | | | |
| Net Assets | 22 | Net assets or fund balances, Subtract line 21 from line 20 | 164,225. | 185,891. | | | | |
| P | art II | Signature Block | | | | | | |
| Unc | ler pena | Itles of perjury, 1-declare that I have examined this return, including accompanying schedules and sta | itements, and to the best of m | y knowledge and belief, it is | | | | |
| true | , correc | t, and complete. Declaration of preparer (other than officer) is based on all information of which prep | | | | | | |
| | | Markey ! | | 24/13 | | | | |
| Sig | m | Signature of efficer | Date | | | | | |
| He | | Virgil Earls, President/CEO | | | | | | |
| | | Type or print name and title | 1 | | | | | |
| | | Print/Type preparer's name Preparer's glochature | Date Check | PTIN | | | | |
| Pai | d | Cynthia Williams, RA Wittur Mun | 01/18/13 self-employ | ed P01222818 | | | | |
| | parer | Firm's name James E. Raftery/ CPA PC/ | Firm's EIN | 86-0503405 | | | | |
| | Only | Firm's address 606 N. Stapley Drive | | | | | | |
| Mesa, AZ 85203 / Phone no. 480-835-1040 | | | | | | | | |
| Ma | v the IF | RS discuss this return with the preparer shown above? (see instructions) | | X Yes No | | | | |
| | 001 01-2 | | | Form 990 (2011) | | | | |

| Pai | n 990 (2011) Feeding America's Hungry Children rt III Statement of Program Service Accomplishments | 41-2061798 | Page 2 |
|-----------|--|--|------------------|
| ı u | | | |
| | Check if Schedule O contains a response to any question in this Part III | | |
| 1 | Briefly describe the organization's mission Briefly describe the organization's mission Briefly describe the organization's mission Briefly describe the organization's mission | ioa throughs | + |
| | Rushing lifesaving emergency food to impoverished famil: | | out_ |
| | America. Providing for the desperate food needs of thou | isands of | |
| | hungry children here in America. | | |
| | | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on | | |
| | the prior Form 990 or 990-EZ? | Yes | X No |
| | If "Yes," describe these new services on Schedule O | | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | Yes | X No |
| | If "Yes," describe these changes on Schedule O. | | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as | measured by expense | s. |
| • | Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of | | |
| | others, the total expenses, and revenue, if any, for each program service reported. | grants and anocations t | |
| | | | |
| 4a | | ie\$ | , |
| | Rescuing and distribution of food to hungry individuals | <u>· </u> | |
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| | | | |
| 4b | (Code) (Expenses \$ including grants of \$) (Revenue) | ıe \$ | , |
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| | <u> </u> | | |
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| 4c | (Code) (Expenses \$ | ıe \$ |) |
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| | | | |
| 4d | Other program services (Describe in Schedule O.) | | |
| | (Expenses \$ including grants of \$) (Revenue \$ | | |
| <u>4e</u> | Total program service expenses ► 4,862,097. | | |
| | | Form 9 | 90 (2011) |

| | · | | Yes | No |
|------|---|------------|-------|----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| | If "Yes," complete Schedule A | _1_ | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | _2_ | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | _ | | ** |
| | public office? If "Yes," complete Schedule C, Part I | _3_ | | <u>X</u> |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | |
| | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | <u>X</u> |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | Х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | 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? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | |
| | Schedule D, Part III | _8_ | | X |
| 9 | Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide | | | |
| | credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | ĺ | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | | | |
| | as applicable | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | ٠, | |
| | Part VI | 11a | _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 | 446 | | v |
| _ | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | _X_ |
| С | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | x |
| 4 | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | 110 | | |
| u | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | x |
| | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | 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)? If "Yes," complete Schedule D, Part X | 11f | | Х |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI, XII, and XIII | 12a | X | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional | 12b | | <u>X</u> |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | 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? If "Yes," complete Schedule F, Parts I and IV | 14b | _X | <u> </u> |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization | | | |
| | or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 15 | X | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals | | | |
| | located outside the United States? If "Yes," complete Schedule F, Parts III and IV | _16 | X | |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | ا | | v |
| 4.00 | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | <u> </u> |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | v |
| 46 | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | 40 | | v |
| 20- | complete Schedule G, Part III | 19 | - | X |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20a 20b | | |
| | 11 165 to mie 20a, die trie organization attach a copy or its addited illianda statements to tris return? | | 990 (| 2011) |
| | | . 51111 | 700 | |

Form 990 (2011) Feeding America's Hungry Children

Part IV Checklist of Required Schedules (continued)

| | · · | | res | NO |
|-------------|--|------------|-----------|----------|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the | | | |
| | United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | <u>_X</u> | |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, | | 77 | |
| | column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | <u> </u> | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | x |
| 04- | Schedule J | 23_ | | - |
| 2 4a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | |
| | Schedule K. If "No", go to line 25 | 24a | | x |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | 240 | | |
| Ŭ | any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a | | | |
| | disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | х |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 25b | | _X_ |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified | | | |
| | person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | _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? If "Yes," complete Schedule L, Part III | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | |
| | instructions for applicable filing thresholds, conditions, and exceptions): | | | ,, |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | X |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | 00. | | ₹. |
| ~ | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c 29 | Х | X |
| 29 30 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | 29 | | |
| 30 | contributions? If "Yes," complete Schedule M | 30 | | x |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | |
| ٠. | If "Yes," complete Schedule N, Part I | 31 | | x |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? | | | |
| | If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | <u> </u> |
| b | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of | | | |
| | section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | X |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | ٦, |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? | 00 | X | |
| | Note. All Form 990 filers are required to complete Schedule O | 38 Form | | 2011) |
| | | FOIII | JJU (| 2011) |

Form 990 (2011) Feeding America's Hungry Children
Part V Statements Regarding Other IRS Filings and Tax Compliance

| | . Check if Schedule O contains a response to any question in this Part V | | | | |
|-----|--|--------------------|------------|-------|----------|
| | | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | 0 | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b | 0 | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | gaming | | i | |
| | (gambling) winnings to prize winners? | | 1c | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | | |
| | filed for the calendar year ending with or within the year covered by this return | 0 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | | 2b | | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | | 3a_ | | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | over, a | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | • | 4a | | X |
| b | If "Yes," enter the name of the foreign country. ▶ | | | | |
| | See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | 5a | | _X_ |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | 5b | | X |
| С | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization | ation solicit | | | |
| | any contributions that were not tax deductible? | | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gri | fts | | | |
| | were not tax deductible? | | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services prov | ided to the payor? | 7a | | _X_ |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | 7b | | |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was require | d | | | |
| | to file Form 8282? | | 7c | | X |
| đ | • | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | 7e | | <u> </u> |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | _ | 7f | | <u> </u> |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 | i | 7 <u>g</u> | _ | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a | | 7h | _ | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supp | - | | | |
| _ | organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time d | uring the year? | 88 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | _ | | |
| | Did the organization make any taxable distributions under section 4966? | | 9a | | |
| | Did the organization make a distribution to a donor, donor advisor, or related person? | | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | | |
| 11 | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: | | | | |
| ''a | Gross income from members or shareholders | | | | |
| _ | Gross income from other sources (Do not net amounts due or paid to other sources against | | | | |
| D | amounts due or received from them.) | | | | |
| 122 | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | 124 | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | | 13a | | |
| a | Note. See the instructions for additional information the organization must report on Schedule O. | | | | |
| h | Enter the amount of reserves the organization is required to maintain by the states in which the | | | | |
| | organization is licensed to issue qualified health plans | | | | |
| c | Enter the amount of reserves on hand | | | | |
| _ | Did the organization receive any payments for indoor tanning services during the tax year? | ·· | 14a | | X |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | • • | 14b | | |
| | | | | 990 (| 2011) |

Form 990 (2011) Feeding America's Hungry Children 41-2061798 Page
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.

| | | | | \mathbf{x} |
|-----------------|--|---------|---------------|----------------|
| 500 | Check if Schedule O contains a response to any question in this Part VI | | _ | |
| Sec | tion A. Governing Body and Management | | V | N _a |
| 10 | Enter the number of voting members of the governing body at the end of the tax year | | Yes | No |
| ıa | If there are material differences in voting rights among members of the governing body, or if the governing | 4 | | |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | |
| h | Enter the number of voting members included in line 1a, above, who are independent 1b | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | 1 | | |
| - | officer, director, trustee, or key employee? | 2 | | х |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | |
| • | of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | Х |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | 6 | | X |
| 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? | 7a | | Х |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | |
| | persons other than the governing body? | 7b | | Х |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| а | The governing body? | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | X | |
| 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 | 9 | | X |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) | | | |
| | | | Yes | No |
| | Did the organization have local chapters, branches, or affiliates? | 10a | | _X_ |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Х | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | _ <u>X</u> _ | |
| b | | 12b | X | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | |
| | In Schedule O how this was done | 12c | _X_ | |
| 13 | Did the organization have a written whistleblower policy? | 13_ | X | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | X | |
| 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? | 45- | v | |
| | The organization's CEO, Executive Director, or top management official | 15a | X | \vdash |
| D | Other officers or key employees of the organization | 15b | | |
| 16- | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | |
| IVa | taxable entity during the year? | 16a | | х |
| h | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | 104 | | |
| | In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | | | |
| | exempt status with respect to such arrangements? | 16b | | |
| Sec | tion C. Disclosure | 1.00 | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed AZ, FL, NJ, WA, MA, NY, CA, CT, NC | ·IL | | |
| 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) | | | |
| - | for public inspection. Indicate how you made these available. Check all that apply | | | |
| | X Own website Another's website X Upon request | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an | d finar | ncial | |
| | statements available to the public during the tax year. | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization | tion. | > . | _ |
| | The Organization - (602)241-2873 | | | |
| | 1741 W Rose Garden Lane, No. 9, Phoenix, AZ 85027 | | | |
| 13200 01-23- | 12 | Form | 990 | (2011) |

Form 990 (2011) Feeding America's Hungry Children 41-20 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Charles have been decay to a second and a second and a second and a second as a second as

- 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

| (A) | (B) | (C) Position | | | | | | (D) | (E) | (F) | |
|---|-------------------|---------------------|--|----------|--------------|---------------------------------|----------|---------------------------------|-------------------------|--------------------------|--|
| Name and Title | Average hours per | | (do not check more than one box, unless person is both an | | | | | Reportable compensation | Reportable compensation | Estimated amount of | |
| | week | offi | officer and a director/trustee) | | | | tee) | from | from related | other | |
| | (describe | trustee or director | | | | | | the | organizations | compensation | |
| | hours for related | p so as | stee | | | sated | | organization (W-2/1099-MISC) | (W-2/1099-MISC) | from the organization | |
| | organizations | truste | lal trus | |) se | omper. | | (** 2) 1000 111100) | | and related | |
| | ın Schedule | Individual | Institutional trustee | Officer | Key employee | Highest compensated employee | me | | | organizations | |
| | O) | 를 | E | 8 | ş. | 울통 | 휸 | | | | |
| (1) Virgil Earls | 1 00 | | | ٠, | | | | • | 0 | 0 | |
| President/Former Vice President | 1.00 | X | - | X | - | - | | 0. | 0. | 0. | |
| (2) Jeri Fouts | 1 00 | 7.7 | | ٠, | | | ļ | 0 | • | • | |
| Vice President | 1.00 | X | - | X | | | | 0. | 0. | 0. | |
| (3) Romel Clariza | 1 00 | Į., | | . | ŀ | | | | 0 | 0 | |
| Secretary/Treasurer | 1.00 | ^ | - | X | | | | 0. | 0. | 0. | |
| (4) Mark Ostreicher | 0.00 | v | | x | | | | 0. | 0. | 0. | |
| Former President-end Jan 12 (5) Dennis Williamson | 0.00 | ^ | - | ^ | | | | 0. | | <u> </u> | |
| Director | 1.00 | v | | | | | | 0. | 0. | 0. | |
| (6) Suzie Hankins | 1.00 | A | | | | | | • | <u>0.</u> | | |
| Director | 1.00 | x | | | | | | 0. | 0. | 0. | |
| (7) Lon Taylor | | <u> </u> | | | | | | | | | |
| Founder | 5.00 | ļ | | x | | | | 0. | 0. | 0. | |
| | | | | | | | | | | | |
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| 132007 01-23-12 | | | | Ь | | | Щ | | <u> </u> | Form 990 (2011) | |

Program Service

Form **990** (2011)

0.

0.

912,037

d All other revenue e Total. Add lines 11a-11d

Total revenue. See instructions.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

| Do | Check if Schedule O contains a responnot include amounts reported on lines 6b, | (A) | (B) | (C) | (D) Fundraising |
|----|--|----------------|--------------------------|---------------------------------|---------------------------------------|
| | 8b, 9b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | expenses |
| 1 | Grants and other assistance to governments and | | | | |
| | organizations in the United States. See Part IV, line 21 | 4,158,850. | 4,158,850. | | |
| 2 | Grants and other assistance to individuals in | | | | |
| | the United States. See Part IV, line 22 | 306,045. | 306,045. | | · · · · · · · · · · · · · · · · · · · |
| 3 | Grants and other assistance to governments, | | | | |
| | organizations, and individuals outside the | | | | |
| | United States. See Part IV, lines 15 and 16 | 308,914. | 308,914. | | |
| 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) | | | | · - w. |
| 7 | Other salaries and wages | | | | |
| 8 | Pension plan accruals and 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 | 12,910. | | 12,910. | |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other | 1,253. | | 1,253. | |
| 12 | Advertising and promotion | _500. | | | 500 |
| 13 | Office expenses | 2,627. | | 2,627. | |
| 14 | Information technology | | | | |
| 15 | Royalties | | <u>-</u> . | | |
| 16 | Occupancy | | | | |
| 17 | Travel | 10,781. | 8,870. | 1,911. | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | _ | | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates . | | | | |
| 22 | Depreciation, depletion, and amortization | 2,241. | 1,793. | 448. | <u> </u> |
| 23 | Insurance | | | | |
| 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 0.) | | | | |
| а | Program development | 86,250. | 77,625. | 8,625. | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | All other expenses | | | | <u> </u> |
| 25 | Total functional expenses. Add lines 1 through 24e | 4,890,371. | 4,862,097. | 27,774. | 500 |
| 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) | | | | |

| Pai | rt X | Balance Sheet | | | | | |
|-----------------------------|------|--|--------------|-----------------------|--------------------------|----------|--------------------|
| | • | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | | 45,529. | 1 | 58,063. |
| | 2 | Savings and temporary cash investments | • | | | 2 | |
| | 3 | Pledges and grants receivable, net | | 111,904. | 3 | 121,395. | |
| | 4 | Accounts receivable, net | | 4 | | | |
| | 5 | Receivables from current and former officers, di | | | | | |
| | | employees, and highest compensated employee | | | | | |
| | | of Schedule L | | 5 | } | | |
| | 6 | Receivables from other disqualified persons (as | define | d under section | | | |
| | • | 4958(f)(1)), persons described in section 4958(c | | Į. | | | |
| | | employers and sponsoring organizations of section | | | | | |
| | | employees' beneficiary organizations (see instru | | | | 6 | |
| ţ | _ | Notes and loans receivable, net | CHOIS | ' - | | 7 | |
| Assets | 7 | Inventories for sale or use | • | • | | 8 | |
| ¥ | 8 | Prepaid expenses and deferred charges | • | • | | 9 | |
| | 9 | | Į | | | 9 | |
| | าบล | Land, buildings, and equipment cost or other | 40- | 12 706 | | | |
| | | basis Complete Part VI of Schedule D | 10a 10b | 12,796. 6,159. | 6 067 | | 6 627 |
| | | · | 6,967. | | 6,637 | | |
| | 11 | Investments - publicly traded securities | - | 11 | | | |
| | 12 | Investments · other securities. See Part IV, line | · · | 12 | | | |
| | 13 | Investments - program-related See Part IV, line | | 13 | | | |
| | 14 | Intangible assets | | 14 | | | |
| | 15 | Other assets. See Part IV, line 11 | | - | 4.5.4.400 | 15 | 406.005 |
| | 16 | Total assets. Add lines 1 through 15 (must equ | 34) . | 164,400. | 16 | 186,095 | |
| | 17 | Accounts payable and accrued expenses | 175. | 17 | 204 | | |
| | 18 | Grants payable | | 18 | | | |
| | 19 | Deferred revenue | | , | | 19 | |
| | 20 | Tax-exempt bond liabilities | | - | ···· | _20_ | |
| es | 21 | Escrow or custodial account liability Complete | | ř | | 21_ | |
| ≣ | 22 | Payables to current and former officers, director | s, trus | tees, key employees, | | | |
| Liabilities | | highest compensated employees, and disqualifi | ed per | sons Complete Part II | | | |
| _ | | of Schedule L | | <u> </u> | | 22 | |
| | 23 | Secured mortgages and notes payable to unrela | ated th | ird parties | | _23_ | |
| | 24 | Unsecured notes and loans payable to unrelate | d third | parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, pa | yables | to related third | | | |
| | | parties, and other liabilities not included on lines | 17-24 |). Complete Part X of | | | |
| | | Schedule D | | | | _25_ | |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 175. | 26 | 204. |
| | | Organizations that follow SFAS 117, check he | ere 🕨 | · LX and complete | | | |
| es | | lines 27 through 29, and lines 33 and 34. | | | | | |
| anc S | 27 | Unrestricted net assets | | _ | 164,225. | 27 | 185,891. |
| 3al | 28 | Temporarily restricted net assets | | | | 28 | |
| <u> </u> | 29 | Permanently restricted net assets | | | _29 | | |
| Ξ | | Organizations that do not follow SFAS 117, c | | | | | |
| Net Assets or Fund Balances | | complete lines 30 through 34. | | | | | |
| ets | 30 | Capital stock or trust principal, or current funds | | [| | 30 | |
| 188 | 31 | Paid-in or capital surplus, or land, building, or ed | uipme | nt fund . | | 31 | |
| et / | 32 | Retained earnings, endowment, accumulated in | come, | or other funds | | 32 | |
| Ž | 33 | Total net assets or fund balances | | Ţ | 164,225. | _33_ | 185,891 |
| | 34 | Total liabilities and net assets/fund balances | | | 164,400. | 34 | 186,095. |

Form **990** (2011)

Form 990 (2011)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization Employer identification number 41-2061798 Feeding America's Hungry Children 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 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 that describes the type of supporting organization and complete lines 11e through 11h. _ Type I ьL _ Type iI cL Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (ii) EIN (vii) Amount of organizátion in col. organization in col. (i) listed in your organization in col. (i) organized in the U.S.? organization support (described on lines 1-9 laovernina document? (i) of your support? above or IRC section (see instructions)) Yes No Yes Yes No Total

132021 01-24-12 Schedule A (Form 990 or 990-EZ) 2011

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2011 Feeding America's Hungry Children 41-2061798 Page 2

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

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

| Sec | tion A. Public Support | | | | | | |
|------------|---|-----------------------|---------------------------------------|------------------------|---------------------|---------------------------------------|--------------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 1035845. | 3522186. | 6566632. | 3747917. | 4912037. | 19784617. |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 1035845. | 3522186. | 6566632. | 3747917. | 4912037. | 19784617. |
| 5 | The portion of total contributions | | | | | | i |
| | 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) | | | | | | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 19784617. |
| Sec | tion B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) ► | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 7 | Amounts from line 4 | 1035845. | 3522186. | 6566632. | 3747917. | 4912037. | 19784617. |
| 8 | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar sources | | | | | | |
| 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 IV.) | | | 15. | | | 15. |
| 11 | Total support. Add lines 7 through 10 | | | | | , | <u> 19784632.</u> |
| 12 | Gross receipts from related activities, | etc. (see instruction | ons) | | | 12 | |
| 13 | First five years. If the Form 990 is for | the organization's | first, second, third | d, fourth, or fifth ta | x year as a section | n 501(c)(3) | |
| | organization, check this box and stor | | | • | | | |
| Sec | tion C. Computation of Publ | ic Support Pei | rcentage | | | · · · · · · · · · · · · · · · · · · · | |
| 14 | Public support percentage for 2011 (I | ıne 6, column (f) dı | vided by line 11, c | olumn (f)) | | 14 | 100.00 % |
| | Public support percentage from 2010 | | · · · · · · · · · · · · · · · · · · · | | Ì | 15 | <u>100.00 %</u> |
| 16a | 33 1/3% support test - 2011. If the o | organization did no | t check the box or | line 13, and line | 14 is 33 1/3% or m | nore, check this be | |
| | stop here. The organization qualifies | | - | | | | $\triangleright x$ |
| b | 33 1/3% support test - 2010. If the o | | | | line 15 is 33 1/3% | or more, check t | his box |
| | and stop here. The organization qual | | • • • | | | | ▶∟ |
| 17a | 10% -facts-and-circumstances tes | - | | | | | |
| | and if the organization meets the "fac | | | • | • | t IV how the orga | nization |
| | meets the "facts-and-circumstances" | = | • | | _ | • | ▶□ |
| b | 10% -facts-and-circumstances tes | _ | | | | | |
| | more, and if the organization meets the | | - | | • | | 9 |
| | organization meets the "facts-and-circ | | = | · · | | | > |
| <u> 18</u> | Private foundation. If the organization | n did not check a | box on line 13, 16a | a, 16b, 17a, or 17b | , check this box a | nd see instruction | |

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Se | ction A. Public Support | | , | | | | |
|-----------|--|----------------------|----------------------------|-----------------------|--------------------|---------------------|-----------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (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 bus- iness under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| | Amounts included on lines 1, 2, and | | | | | | |
| | 3 received from disqualified persons | | | | | | |
| ŀ | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| • | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line 7c from line 6) | | | | <u> </u> | | |
| Se | ction B. Total Support | | • | | <u>,</u> | | |
| Cale | ndar year (or fiscal year beginning in) ► | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10 | a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| ł | Unrelated business taxable income | - | | | | | |
| | (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| • | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is 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) | | | | | | |
| 14 | First five years. If the Form 990 is fo | r the organization's | s first, second, thu | d, fourth, or fifth t | ax year as a secti | on 501(c)(3) organi | zation, |
| | check this box and stop here . | | · | | | | . ▶□ |
| <u>Se</u> | ction C. Computation of Publ | ic Support Pe | rcentage | | | | |
| 15 | Public support percentage for 2011 (| line 8, column (f) d | livided by line 13, o | column (f)) | | 15 | % |
| | Public support percentage from 2010 | | | | | 16 | % |
| <u>Se</u> | ction D. Computation of Inve | stment Incom | e Percentage | | | | |
| | Investment income percentage for 20 | | | ne 13, column (f)) | | 17 | % |
| | Investment income percentage from | | | | | 18 | % |
| 19: | a 33 1/3% support tests - 2011. If the | organization did r | not check the box | on line 14, and lin | e 15 is more than | 33 1/3%, and line | 17 is not |
| | more than 33 1/3%, check this box a | and stop here. The | organization qua | lifies as a publicly | supported organi | zation | |
| 1 | 33 1/3% support tests - 2010. If the | _ | | | • | | |
| | line 18 is not more than 33 1/3%, che | eck this box and s | t op here. The orga | anızatıon qualıfies | as a publicly supp | ported organization | ▶∐ |
| 20 | Private foundation. If the organization | on did not check a | box on line 14, 19 | a, or 19b, check t | his box and see in | structions | |

132023 01-24-12

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

Feeding America's Hungry Children 41-2061798 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year 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? 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? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 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 an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Total acreage restricted by conservation easements 2h Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIV, 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to 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 XIV, 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) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Revenues included in 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) 2011

20

| | | America's | | | | | | | | Page 2 |
|-------|---|--|-------------|---------------|----------------|------------|-------------|------------|----------------|---------------|
| Par | t III Organizations Maintaining C | | | | | | | | | |
| 3 | ⊎sing the organization's acquisition, accession | on, and other record | ds, checl | k any of the | following that | at are a s | significant | use of its | collection | items |
| | (check all that apply): | | | | | | | | | |
| а | Public exhibition | C | <u>ا</u> يا | Loan or exc | hange progra | ams | | | | |
| b | Scholarly research | • | . | Other | | | | | | |
| С | Preservation for future generations | | | | | | | | | |
| 4 | Provide a description of the organization's co | llections and expla | in how th | ney further t | he organizati | on's exe | empt purpo | ose in Pai | t XIV | |
| 5 | During the year, did the organization solicit or | r receive donations | of art, hi | storical trea | sures, or oth | er sımıla | r assets | | | |
| | to be sold to raise funds rather than to be ma | untained as part of | the orga | nization's co | ollection? | | | | Yes | No_ |
| Par | t IV Escrow and Custodial Arrang | gements. Compl | ete if the | organizatio | n answered | "Yes" to | Form 990 | , Part IV, | line 9, or | |
| | reported an amount on Form 990, Par | t X, line 21 | | | | | | | | |
| 1a | Is the organization an agent, trustee, custodia | an or other interme | diary for | contribution | ns or other as | sets no | t included | | | |
| | on Form 990, Part X? | | - | | | | | | Yes | ☐ No |
| b | If "Yes," explain the arrangement in Part XIV | and complete the fo | ollowing | table | | | • | | | |
| | , , | • | J | | | | | | Amount | |
| С | Beginning balance | | | | | | 1c | | | |
| d | Additions during the year | | | | | | 1d | | | |
| e | Distributions during the year | | • | | | | 1e | | | |
| f | Ending balance | | | | | | 1f | | | - |
| 2a | Did the organization include an amount on Fo | orm 990. Part X. line | 212 | | | | | | Yes | No |
| | If "Yes," explain the arrangement in Part XIV. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | | |
| Par | | the organization at | nswered | "Yes" to Fo | rm 990. Part | IV. line | 10. | | | |
| | | (a) Current year | | Prior year | (c) Two year | | | rears hack | (a) Four | years back |
| 1a | Beginning of year balance | (a) Current year | (6) | noi yeai | (C) TWO YOU | 13 Dack | (d) Tilloo | rours buok | (e) rour | yours baok |
| h | Contributions | | | | · · · · · · | | | | | |
| 0 | | | | | | | | | | - |
| ن | Net investment earnings, gains, and losses | | | | | | | | <u> </u> | |
| a | Grants or scholarships | | | | | | | | | |
| е | Other expenditures for facilities | | | | | | | | Ì | |
| | and programs | | | | | | | | | |
| T | Administrative expenses | | | | | | | | | |
| g | End of year balance | | | | L | | | | ! . | |
| 2 | Provide the estimated percentage of the curr | ent year end baland | | g, column (a | a)) neid as: | | | | | |
| а | Board designated or quasi-endowment | | _% | | | | | | | |
| b | Permanent endowment | % | | | | | | | | |
| С | Temporarily restricted endowment | % | | | | | | | | |
| | The percentages in lines 2a, 2b, and 2c shou | • | | | | | | | | |
| За | Are there endowment funds not in the posses | ssion of the organiz | ation tha | at are held a | ind administe | ered for t | the organiz | zation | г | |
| | by. | | | | | | | | | Yes No |
| | (i) unrelated organizations | | | | | | | | 3a(i) | |
| | (ii) related organizations | | | | | | | | 3a(ii) | |
| b | If "Yes" to 3a(ii), are the related organizations | • | | | | | | | 3b | |
| 4 | Describe in Part XIV the intended uses of the | | | | | | | | | |
| Pai | rt VI Land, Buildings, and Equipm | ent. See Form 99 | 0, Part X | , line 10 | | 1 | | | | |
| | Description of property | (a) Cost or o | | • • | or other | | ccumulate | | (d) Book | value |
| | | basis (invest | ment) | basis | (other) | de | preciation | | | |
| 1a | Land | | | | | | | | | |
| b | Buildings | | | | | | | | | <u>_</u> |
| С | Leasehold improvements | | | | | | | | | |
| d | Equipment | | | 1 | 2,796. | | 6,1 | 59. | (| <u>5,637.</u> |
| е | Other . | | | | | | | | | |
| Total | Add lines 1a through 1e (Column (d) must e | gual Form 990 Pan | X colur | nn (R) line 1 | 10(c)) | | | | - 6 | 5.637. |

Schedule D (Form 990) 2011

| | dule D (F | orm 990) 2011 Feeding America's Hungry Children | | | 41-2 | 061798 | Page 4 |
|-----------|-----------|--|-----------|---|-------|-----------------|----------------------|
| Pa | | Reconciliation of Change in Net Assets from Form 990 to Audited Finan | icial S | itate | ment | | |
| 1 | Total re | venue (Form 990, Part VIII, column (A), line 12) | 1 | | | 4,912 | |
| 2 | Total ex | penses (Form 990, Part IX, column (A), line 25) | 2 | | | 4,890 | <u>,371.</u> |
| 3 | Excess | or (deficit) for the year. Subtract line 2 from line 1 | 3 | | | 21 | <u>,666.</u> |
| 4 | Net unre | ealized gains (losses) on investments | 4 | | | | |
| 5 | Donated | d services and use of facilities | 5 | | | | |
| 6 | Investm | ent expenses | 6 | | | | |
| 7 | Prior pe | riod adjustments . | 7 | | | | |
| 8 | Other (D | Describe in Part XIV.) | 8 | | | | |
| 9 | Total ad | ljustments (net). Add lines 4 through 8 | 9 | | | | |
| 10 Do: | | or (deficit) for the year per audited financial statements. Combine lines 3 and 9 Reconciliation of Revenue per Audited Financial Statements With Reve | 10 | or D | | 21 | <u>,666.</u> |
| | | · · · · · · · · · · · · · · · · · · · | nue p | ei M | | 4 012 | 027 |
| 1 | | venue, gains, and other support per audited financial statements | | | 1 | 4,912 | ,037. |
| 2 | | s included on line 1 but not on Form 990, Part VIII, line 12: | | | | | |
| a | | ealized gains on investments 2a | | | | | |
| b | | d services and use of facilities 2b | | | | | |
| c | | ries of prior year grants 2c | | | | | |
| d | | Describe in Part XIV.) | _ | | | | 0 |
| e | | es 2a through 2d | | ŀ | 2e | 4,912 | 0.27 |
| 3 | | tt line 2e from line 1 | | ŀ | 3 | 4,912 | ,03/. |
| 4 | | is included on Form 990, Part VIII, line 12, but not on line 1: | | | | | |
| a | | ent expenses not included on Form 990, Part VIII, line 7b | | | | | |
| b | • | Describe in Part XIV.) | | | | | 0 |
| | | es 4a and 4b | | • | 4c | 4,912 | 0. |
| 5 Par | H XIII | venue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements With Expe | 2020 | ner | | | ,037. |
| | | penses and losses per audited financial statements | 511000 | | 1 | 4,890 | 371 |
| 1 | | is included on line 1 but not on Form 990, Part IX, line 25. | | • | | 4,000 | , 3 / 1 • |
| 2 | | d services and use of facilities 23. | | | | | |
| a | | ar adjustments 2b | | | | | |
| D | Other lo | · | | | | | |
| ن | | Describe in Part XIV.) | - | | | | |
| d e | | es 2a through 2d | | | 2e | | Λ |
| 3 | | t line 2e from line 1 | | ŀ | 3 | 4,890 | 371. |
| 4 | | s included on Form 990, Part IX, line 25, but not on line 1: | | ŀ | - | +,050 | , , , , , , |
| ٠, | | ent expenses not included on Form 990, Part VIII, line 7b | | | | | |
| | | Describe in Part XIV.) | | | | | |
| | | es 4a and 4b | | | 4c | | 0. |
| 5 | | penses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | | ı | 5 | 4,890 | .371. |
| | | Supplemental Information | | ' | | 2,000 | , , , _ , |
| | L . | part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, P. | art IV. I | nes 1t | and 2 | o; Part V. line | 4, Part |
| | • | XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to pro | | | | | , |
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SCHEDULE F (Form 990)

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

2011

Open to Public

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

| | • | | | | į | | |
|------|--|--------------------|--|--|------------------|--------------------|---------------------|
| Fee | eding America | 's Hunar | y Childr | en | | 41-20617 | 98 |
| Pai | t I General Info | rmation on A | ctivities Ou | tside the United States. Comple | ete if the orgar | nization answered | "Yes" |
| | to Form 990, Par | t IV, line 14b. | | | | 1 | |
| 1 | | | | ds to substantiate the amount of its gra | | | . — |
| | the grantees' eligibility for | or the grants or a | assistance, and | the selection criteria used to award the | grants or assi | stance? . X | Yes No |
| _ | | | | | | | |
| 2 | - | ribe in Part V the | e organization's | procedures for monitoring the use of its | s grants and of | ther assistance ou | tside the |
| 2 | United States. | ho following Dort | l line 2 teble er | on he dunkented if additional appears o | andad \ | | |
| 3 | (a) Region | (b) Number of | | an be duplicated if additional space is r (d) Activities conducted in region | | vity listed in (d) | (f) Total |
| | (a) Negion | offices | employees, | (by type) (e g , fundraising, program | | gram service, | expenditures |
| | | ın the region | employees, agents, and independent | services, investments, grants to | | specific type | for and investments |
| | | | contractors in region | recipients located in the region) | of service | ce(s) in region | in region |
| | | | | | | | |
| | | | | - | | | |
| | | | | | | | |
| Nort | h America | 0 | 0 | Program Services | Feeding Pro | grams | 308,914. |
| | | | | | | | |
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| | | | | | | | |
| | Cub total | _ | | | | | |
| | Sub-total . | 0 | 0 | | | | 308,914. |
| D | Total from continuation sheets to Part I | 0 | _ | | | | _ |
| ^ | Totals (add lines 3a | - | 0 | | | | 0. |
| C | and 3b) | _ | 0 | | | | 308,914, |
| | | | <u> </u> | <u>. </u> | | | 1 200,214, |

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

Schedule F (Form 990) 2011

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 41-2061798 Feeding America's Hungry Children Schedule F (Form 990) 2011 Part II

recipient who received more than \$5,000 Check this box if no one recipient received more than \$5,000

Part II can be duplicated if additional space is needed

Page 2

(i) Method of valuation (book, FMV, appraisal, other) Actual Value ltems - 6,465 lbs Fair Market Value 9,698, of fresh produce (h) Description of non-cash assistance Various food (g) Amount of non-cash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by cash disbursement (f) Manner of Wire 7,500. of cash grant (e) Amount the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (d) Purpose of Feeding Programs Feeding Programs grant North America (c) Region North America 3 Enter total number of other organizations or entities (b) IRS code section and EIN (if applicable) (a) Name of organization

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Schedule F (Form 990) 2011

132072 01-23-12 41-2061798

Page 3

Feeding America's Hungry Children

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 Schedule F (Form 990) 2011

Part III can be duplicated if additional space is needed.

| | | _ | | | |
|---|---|---|--|--|--|
| (h) Method of valuation (book, FMV, appraisal, other) | Fair Market Value | | | | |
| (g) Description of non-cash assistance | Various food items – 192,436 lbs of fresh produce | | | | |
| (f) Amount of non-cash assistance | Various 192,436 288,654,produce | | | | |
| (e) Manner of cash disbursement | | | | | |
| (d) Amount of cash grant | 0 | | | | |
| c) Number of recipients | 3,849 | | | | |
| (b) Region | North America | | | | |
| (a) Type of grant or assistance (b) Region | Direct clients | | | | |

Schedule F (Form 990) 2011

| Sched | ule F (Form 990) 2011 Feeding America's Hungry Children | 41-2061798 | Page 4 |
|-------|--|------------|--------|
| Part | | | |
| 1 | Was the organization a U.S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | Yes [| X No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and | | |
| | Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S Owner (see Instructions for Forms 3520 and 3520-A) | Yes | X No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471) | Yes | X No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) | Yes | X No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865) | Yes [| X No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) | Yes | X No |

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" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

2011 Open to Public.

Inspection

25. Schedule I (Form 990) (2011) ž **Employer identification number** 41-2061798 (h) Purpose of grant or assistance eeding Programs Feeding Programs eeding Programs Feeding Programs Feeding Programs Feeding Programs X Yes 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 recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed 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 non-cash assistance (g) Description of tems - 162,000 tems - 425,010 items - 44,000 tems - 98,500 tems - 75,840 bs of fresh /arious food bs of fresh Various food lbs of fresh /arious food bs of fresh Various food /arious food lbs of fresh roduce roduce roduce roduce produce (f) Method of valuation (book, FMV, appraisal, 0.Actual Value air Market Fair Market air Market air Market air Market Value 113,760, Value 243,000,Value Value 66,000, Value 147,750. 637,515, (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. ୌ ċ 42,305 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Feeding America's Hungry Children (c) IRC section LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. if applicable 501(c)(3)501(c)(3) 501(c)(3) 501(c)(3)501(c)(3)Enter total number of other organizations listed in the line 1 table 84-0731930 73-1184980 13-3170676 71-0593529 45-3327957 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization Oklahoma - 1304 N Kenosha Avenue Community Food Bank of Eastern 1741 W. Rose Garden Lane, #9 Colorado Springs, CO 80915 Long Island City, NY 11101 Care and Share Food Bank or government Los Angeles, CA 90027 5138 Sunset Blvd #16 East Texas Food Bank 3201 Robertson Road Name of the organization 2605 Preamble Point Phoenix, AZ 85027 Save The Animals 55-01 2nd Street Tulsa, OK 74106 Tyler, TX 75701 Armful of Help City Harvest Partl Part N

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132101 01-27-12

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Page 1

| rait II) Continuation of drafts and other Assistance to Governments and Organizations in the Office States (Schedule 1) rait II), rait II) | Assistante to do | veriments and organ | | וופח סימינים לייייי | udic 1 (1 01111 000) | <i>(</i> ·, | • |
|--|------------------|----------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| | | | | | | Various food | |
| Feeding South Dakota | | | | | | items - 44,000 | |
| 5 | | | | | fair Market | lbs of fresh | |
| Sioux Falls, SD 57104 | 36-3293534 | 501(c)(3) | 0 | 66,000 | Value | produce | Feeding Programs |
| | | | | | | Various food | |
| Kansas Food Bank | | | | | | items - 135,484 | |
| 1919 E Douglas | | | | | air Market | lbs of fresh | |
| Wichita, KS 67211 | 48-0959213 | 501(c)(3) | 0 | 203,226. | Value | produce | Feeding Programs |
| | | | | | | | |
| Northwest Harvest | | | | | | items - 40,000 | |
| 911 S Third Street | | | | | Fair Market | lbs of fresh | ; |
| Yakima, WA 98901 | 91-0826037 | 501(c)(3) | 0 | 60,000 | Value | produce | Feeding Programs |
| | | | | | | Various food | |
| Emergency Food Shelf Network | | | | | | items - 80,000 | |
| 8501 54th Avenue North | | | | 173 | Fair Market | lbs of fresh | |
| Minneapolis, MN 55428 | 41-1246504 | 501(c)(3) | 0 | 120,000. | Value | produce | Feeding Programs |
| | | | | | | Various food | |
| San Francisco Food Bank | | | | | | items - 41,750 | |
| 900 Pennsylvania Avenue | | | | | air Market | lbs of fresh | |
| San Francisco CA 94107 | 94-3041517 | 501(c)(3) | 0 | 62,625. | Value | produce | Feeding Programs |
| | | | | | | Various food | |
| Food Bank of the Rockies | | | | | | items - 43,600 | |
| 10700 E 45th Avenue | | | | - 1 | air Market | lbs of fresh | |
| Denver, CO 80239 | 84-0772672 | 501(c)(3) | 0. | 65,400. | Value | produce | Feeding Programs |
| | | | | | | Various food | |
| Harvesters Community Food Network | | | | | | items - 275,148 | |
| 3801 Topping Avenue | | | | | Fair Market | lbs of fresh | |
| Kansas City, MO 64129 | 12-5378370 | 501(c)(3) | 0. | 412,722. | Value | produce | Feeding Programs |
| | | | | | | Various food | |
| Houston Food Bank | | | | | | items - 88,000 | |
| 535 Portwall Street | | | | | Fair Market | lbs of fresh | |
| Houston, TX 77029 | 74-2181456 | 501(c)(3) | 0. | 132,000. | Value | produce | Feeding Programs |
| | | | | | | Various food | |
| San Antonio Food Bank | | | | | | items - 44,000 | |
| 古 | | | ı | | Fair Market | lbs of fresh | |
| San Antonio, TX 78227 | 74-2122979 | 501(c)(3) | 0. | 66,000,Value | /alue | produce | Feeding Programs |
| | | | | | | | Schedule I (Form 990) |

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Page 1

| Schedu | le I (Form 990) | Feeding A | merica's | Hungry Ch | hildren | | | 4 | 1-2061798 |
|---------|-----------------|---------------------|------------------|-----------------|--|--------------------|-----------------------------|--------|-----------|
| Part II | Continuation of | of Grants and Other | Assistance to Go | vernments and (| Descripent of the United States (Schedu | nited States (Sche | dule I (Form 990), Part II. | t II.) | |
| | | | | | | | | | |

| (a) Name and address of (b) EIN (c) IRC section organization or government if applicable cash grant non-cash (book, FMV, assistance appraisal, other) | (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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| John Calvin Presbyterian Church 12567 Natural Bridge Road Bridgeton. MO 63044 | | | 0 | 56,715, | Fair Market Value | Various food items - 37,810 lbs of fresh produce | Feeding Programs |
| Roadrunner Food Bank 5840 Office Blvd NE Albuquerque, NM 87109 | 85-0278525 | 501(c)(3) | 0 | | Fair Market Value | Various food items - 410,875 lbs of fresh produce | Feeding Programs |
| Mercy Airlift PO Box 90452 Los Angeles, CA 90009 | | 501(c)(3) | 0, | 299,583, | Fair Market Value | Various food items – 199,722 lbs of fresh produce | Feeding Programs |
| North Texas Food Bank 4500 S Cockrell Hill Road Dallas, TX 75236 | 75-1838348 | 501(c)(3) | 0 | 195,000. | Fair Market Value | Various food items - 130,000 lbs of fresh produce | Feeding Programs |
| | | 501(c)(3) | 47,000 | 0 | Actual Value | | Feeding Programs |
| Mesquite Outreach PO Box 90452 Mesquite, NV 89024 | | | 0, | 26,547, | Fair Market Value | Various food items - 17,698 lbs of fresh produce | Feeding Programs |
| Rotary First Harvest 3200 First Avenue South Seattle, WA 98134 | 91-1229941 | 501(c)(3) | 0 | 198,000. | Fair Market Value | Various food items - 132,000 lbs of fresh produce | Feeding Programs |
| The 3000 Club 1741 W. Rose Garden Lane, #9 Phoenix, AZ 85027 | 27-3295358 | 501(c)(3) | 18,346, | 0 | Actual Value | | Feeding Programs |
| Northwest Harvest 22220 68th Avenue South Kent, WA 98032 | 91-0826037 | 501(c)(3) | 0 | 64,125. | Fair Market Value | Various food items - 42,750 lbs of fresh produce | Feeding Programs |
| | | | | | | | Schedule I (Form 990) |

| 41-2061798 Page 1 | • |
|---|---|
| Schedule (Form 990) Feeding America's Hungry Children | Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) |

| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Orgar | nzations in the Un | ilted States (Sche | oule I (Form 990), Par | t 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 |
| The Food Depot 1222 Siler Road Santa Fe, NM 87507 | 85-0416803 | 501(c)(3) | •0 | 126,816, | Fair Market Value | Various food items - 84,544 lbs of fresh produce | Feeding Programs |
| World Emergency Relief 27715 Jeferson Avenue, #205 Temecula, CA 92590 | 95-4014743 | 501(c)(3) | 0 | 64 833 | Fair Market Value | Various food items - 43,222 lbs of fresh produce | Feeding Programs |
| Children's Emergency Medical Fund 1741 W. Rose Garden Lane, #9 Phoenix, AZ 85027 | 86-1004356 | 501(c)(3) | 5,850, | 4.0 | Actual Value | | Feeding Programs |
| | | | | | | | |
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| | | | | | | | Schedule I (Form 990) |

Schedule I (Form 990) (2011) (f) Description of non-cash assistance. Various food items - 204,030 lbs of fresh produce (e) Method of valuation (book, FMV, appraisal, other) 306,045, Fair Market Value Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information number based on each recipient taking approximately 50 lbs of food. - The number of recipients assisted is an estimated Schedule I, Part I, Line 2: Monitoring 990 and Monthly reporting. (d) Amount of non-cash assistance ં (c) Amount of cash grant 33 (b) Number of recipients 4081 (a) Type of grant or assistance Direct clients Direct Clients 132102 01-27-12

Page 2

41-2061798

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

Feeding America's Hungry Children

Schedule I (Form 990) (2011)

Part III

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

990, Part IV, lines 29 or 30. ► Attach to Form 990.

Feeding America's Hungry Children

Employer identification number 41-2061798

| Par | rt I Types of Property | | | | | | | |
|----------|--|-------------------------------|---------------------------|--|--------------------|--|--------|-----------|
| | | (a) Check if applicable | (b) Number of contributed | (c) Noncash contribute amounts reported Form 990, Part VIII, I | on noncash | (d) nod of determin contribution ar | | :s |
| 1 | Art - Works of art | | iterna communea | Om 550, rait viii, ii | ine ig | | | |
| 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 - Closely field stock Securities - Partnership, LLC, or | | | | | | | |
| " | trust interests | | | | | | | |
| 40 | Securities - Miscellaneous | | | | | | | |
| 12 13 | Qualified conservation contribution - | | | | - | | | |
| 13 | Historic structures | | | | | | | |
| 14 | Qualified conservation contribution - Other | | | | | | | |
| | Real estate - Residential | | | | | | | |
| 15 | | | | | | | | |
| 16 | Real estate - Commercial | | | | | | | |
| 17 | Real estate - Other | | | | | | | |
| 18 | Collectibles . | Х | 1 | A 651 20 | 88. Fair Ma | mkot Vo | 1,,, | |
| 19 | Food inventory | | <u> </u> | 4,051,30 | o. rall Ma | irket va. | Tue | |
| 20 | Drugs and medical supplies | | - | | - | | | |
| 21 | Taxidermy | | | | | | | |
| 22 | Historical artifacts | | | | | | | |
| 23 | Scientific specimens | | | | | - | | |
| 24 | Archeological artifacts | | | | | | | |
| 25 | Other () | | | | | | | |
| 26 | Other () | | | | | | | |
| 27 | Other () | | | | | | | |
| 28 | Other () | | <u> </u> | <u> </u> | | | | |
| 29 | Number of Forms 8283 received by the organiz | | | | _ | | | |
| | for which the organization completed Form 828 | 83, Part IV, | Donee Acknowled | gement 2 | 9 | | | |
| | | | | | | — | Yes | No |
| 30a | During the year, did the organization receive by | | | | | 1 1 | | |
| | at least three years from the date of the initial of | contribution | , and which is not | required to be used for | or exempt purposes | t 1 | | |
| | the entire holding period? | • | | | • | 30a | | <u> X</u> |
| b | If "Yes," describe the arrangement in Part II. | | | | | | | |
| 31 | Does the organization have a gift acceptance p | - | | | | 31 | | X |
| 32a | Does the organization hire or use third parties contributions? | or related or | rganizations to soli | icit, process, or sell no | oncash | 32a | | _x_ |
| b | If "Yes," describe in Part II. | | | | | | | 1 |
| 33 | If the organization did not report an amount in | column (c) | for a type of prope | rty for which column (| a) is checked, | | | 1 |
| | describe in Part II. | | | | | | | |
| LHA | For Paperwork Reduction Act Notice, see | the Instruc | tions for Form 99 | ю. | Sche | edule M (Form | 990) (| (2011) |

132141

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

| Feeding America's Hungry Children | 41-2061798 | | | | | | | |
|--|--------------------|--|--|--|--|--|--|--|
| Form 990, Part I, Line 1, Description of Organization Mission: | | | | | | | | |
| desperate food needs of thousands of hungry children here | e in America. | | | | | | | |
| | | | | | | | | |
| Form 990, Part VI, Section B, line 11: The 990 is reviewed | ed and approved at | | | | | | | |
| the annual board meeting. | | | | | | | | |
| | | | | | | | | |
| Form 990, Part VI, Section B, Line 12c: At the annual boa | ard meeting, | | | | | | | |
| compliance is checked. | | | | | | | | |
| | | | | | | | | |
| Form 990, Part VI, Section B, Line 15: The salary for the | E CEO and other | | | | | | | |
| officers is determined by the Board of Directors based or | n salary | | | | | | | |
| comparisons for CEOs and other officers of other charities | es serving in a | | | | | | | |
| comparable capacity. Because of the size of the charity, the CEO and other | | | | | | | | |
| officers are volunteers and do not receive a salary. | | | | | | | | |
| | | | | | | | | |
| Form 990, Part VI, Section C, Line 18: The Organization m | makes its Forms | | | | | | | |
| 1023 and 990 available to the public upon request. The C | Organization also | | | | | | | |
| makes its Form 990 available on its website. | | | | | | | | |
| | | | | | | | | |
| Form 990, Part VI, Section C, Line 19: The Organization m | nakes its | | | | | | | |
| governing documents, conflict of interest policy and fina | ancial statements | | | | | | | |
| available to the public upon request. The Organization a | also makes its | | | | | | | |
| financial statements available on its website. | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

The Organization made no changes to its audit oversight or selection LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2011)

132211 01-23-12

Form 990, Part XII, Line 2c

| Name of the or | ganization | Feed: | ing Ame | rica's | s Hungry | Child | ren | Employer identification numbe 41-2061798 |
|----------------|---------------------------------------|-------|---------------------------------------|----------------|-------------|--------|---------------------------------------|--|
| nrogogg | | | | | | | e return. | |
| process | quring | CIIE | TISCAL | year | covered | Dy CII | e recurn. | |
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Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

990

OMB No 1545-0172

➤ See separate instructions. Name(s) shown on return Business or activity to which this form relates

Identifying number

| | eding America's Hun | gry Child | ren | Form 9 | 90 Pa | age 10 | _ | 41-2061798 |
|----------------|--|--|---|-------------------|--------------------|--|------------|----------------------------|
| Pai | Tt Election To Expense Certain Prope | rty Under Section 1 | 79 Note: If you have | any listed pr | operty, c | omplete Part \ | / before y | |
| 1 N | Maximum amount (see instructions) | • | • | | | | 1 | 500,000. |
| 2 T | otal cost of section 179 property plac | 2 | | | | | | |
| 3 T | hreshold cost of section 179 property | before reduction | ın lımıtatıon | | | | 3 | 2,000,000. |
| 4 F | Reduction in limitation. Subtract line 3 | 4 | | | | | | |
| 5 c | ollar limitation for tax year Subtract line 4 from line | e 1 If zero or less, enter | -0- If married filing separa | tely, see instruc | ions | | 5 | |
| 6 | (a) Description of pi | roperty | (b) Cos | st (business use | only) | (c) Elected | cost | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 7 L | isted property Enter the amount from | n line 29 | | - | 7 | | | |
| | otal elected cost of section 179 prope | | s in column (c), lines | 6 and 7 | • | | 8 | |
| | entative deduction Enter the smaller | • | ,,, | | | | 9 | |
| | Carryover of disallowed deduction from | | 010 Form 4562 | | | | 10 | |
| | Business income limitation. Enter the s | - | | an zero) or I | ne 5 | | 11 | |
| | Section 179 expense deduction. Add I | | • | • | | | 12 | |
| | Carryover of disallowed deduction to 2 | • | | | 13 | | | |
| | ; Do not use Part II or Part III below fo | | | | | • | | |
| Pa | | | | t include list | ed prope | rty.) | - | |
| | Special depreciation allowance for qua | | | | | | | |
| | he tax year | amou proporty (oa | ioi tilaitilotoa propo | ,, placea . | | | 14 | |
| | Property subject to section 168(f)(1) el | ection | | | | • | 15 | |
| | Other depreciation (including ACRS) | | | • • | | | 16 | 2,177. |
| | rt III MACRS Depreciation (Do no | nt include listed pi | roperty) (See instruc | ctions.) | | | | |
| | | | Section A | | | | | |
| 17 N | MACRS deductions for assets placed | in caniica in tay vi | | | | | 17 | |
| _ | • | • | • • | | naak hara | ▶ □ | ı | |
| 10 11 | you are electing to group any assets placed in ser Section B - Assets | | e During 2011 Tax | | | eral Deprecia | tion Syste | em |
| | (a) Classification of property | (b) Month and year placed in service | (c) Basis for deprecia (business/investment only - see instructio | tion (d) | Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
| 19a | 3-year property | | | | | | | |
| b | 5-year property | | | | | | | |
| c | 7-year property | | | | | - | | |
| d | 10-year property | | | | | | | |
| e | 15-year property | - | | | | | | |
| f | 20-year property | | | | | | | |
| | 25-year property | - | | | 5 yrs | 1 | S/L | |
| g | 20 year property | | | | '.5 yrs. | мм | S/L | _ |
| h | Residential rental property | / | | | .5 yrs. | MM | S/L | |
| | | <u> </u> | | | | MM | S/L | |
| i | Nonresidential real property | | | | 9 yrs. | MM | S/L | |
| | Section C - Assets I | Placed in Service | During 2011 Toy V | oor Hoing t | ao Altorn | | | |
| | | Placed III Service | During 2011 Tax 1 | ear Using ti | ie Aiteiii | Tative Deprec | | otern |
| <u>20a</u> | Class life | | <u></u> | | | | S/L | |
| b | 12-year | | | | 2 yrs. | 1 1414 | S/L | |
| Do | 40-year | | <u> </u> | | 0 yrs. | MM | S/L | |
| | rt IV Summary (See instructions.) | | | | - | | | |
| | sted property Enter amount from lin | | | | | | 21 | |
| | Total. Add amounts from line 12, lines | = | | | | | | 0 1 |
| | Enter here and on the appropriate lines | • | | | see instr | <u> </u> | 22 | 2,177. |
| 23 F | or assets shown above and placed in | service during th | e current year, enter | the | | | | |
| | portion of the basis attributable to sec | tion 263A costs | | | 23 | | | |
| 11625 11-21 | | n Act Notice, see | separate instruction | ons. | | | | Form 4562 (2011) |

Part VI | Amortization (d) (f) (b) (c) (e) (a) Amortizable amount Description of costs Code section Amortization for this year begins period or percentage Amortization of costs that begins during your 2011 tax year: 43 43 Amortization of costs that began before your 2011 tax year 44 44 Total. Add amounts in column (f). See the instructions for where to report

Form 4562 (2011)