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990

Department of the Treasury 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)

OMB No 1545-0047

Inspection

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

Open to Public

A	For the	e 2012 calendar year, or tax year beginning OCT 1, 2012 and ending	SEP 30, 2013	
В	Check if	C Name of organization	D Employer identific	eation number
	Addre	Feeding America's Hungry Children		
	Name		41-20	061798
	Initial return	, ,	' '	
	Termi	1741 W Rose Garden Dane	(602	<u>)241-2873 </u>
	Amen	City, town, or post office, state, and ZIP code	G Gross receipts \$	3,690,929.
L	Application pendi	PHOCHIX, AZ 65027	H(a) Is this a group re	
		F Name and address of principal officer: V1rg11 Ear15	for affiliates?	Yes X No
_	_	same as C above	H(b) Are all affiliates incl	
		empt status $X = 501(c)(3) = 501(c)(1)$ (insert no.) $4947(a)(1)$ or te: \rightarrow www.feedingahc.org	527 If "No," attach a H(c) Group exemption	ist (see instructions)
			ear of formation: 2002 M	
	art i	Summary	car or formation. 2002 W	State of legal doffficite. 222
		Briefly describe the organization's mission or most significant activities Rushing	lifesaving eme	ergency
Activities & Governance	`	food to impoverished families throughout Ame		
rna	2	Check this box if the organization discontinued its operations or disposed of n		
ove	3	Number of voting members of the governing body (Part VI, line 1a)	3	5
<u>ග</u> න	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	5
es	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	0
ixi		Total number of volunteers (estimate if necessary)	6	0
Act		Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
		Contributions and grants (Part VIII June 1h)	Prior Year 4,912,037.	Current Year 3,690,919.
Revenue		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	0.	0.
Ver	I .	Investment Income (Part VIII, column (A), lines 3, 4, and 7d)	0.	10.
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
		Total revenue radd lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,912,037.	3,690,929.
	13	Grants and similar amounts paid (Rart IX, column (A), lines 1-3)	4,773,809.	3,550,007.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
S	15	Salaries, other compensation, employee/benefits (Part IX, column (A), lines 5-10)	0.	0.
Expenses	16a	Professional fundraising fees/(Part/IX-column (A), line 11e)	0.	0.
ğ	b	Total fundraising expenses (Part IX) column (D), line 25)		
ш	17	Other expenses (Par IX, column (A) lines 11a-11d, 11f-24e)	118,409.	115,473.
	18	Total expenses. Add ines 1/3-17 (must equal Part IX, column (A), line 25)	4,892,218.	3,665,480.
<u></u>	19	Revenue less expenses. Subtract line 18 from line 12	19,819.	25,449.
ance		Total access (Part V line 16)	Beginning of Current Year 186,095.	End of Year 181, 429.
ASS	20 21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	204.	150.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20	185,891.	181,279.
	art II	Signature Block /	2007032.	202/2124
Und	ler pena	ilties of perjury, Leeclars that whave examined this return, including accompanying schedules and sta	itements, and to the best of my	knowledge and belief, it is
		et, and complete/ Declaration proreparer (other than officer) is based on all information of which prep		1
رب _ة		X TAUVE U	x X 1	1
∰ Şig	n	Signature of officer	Date (· ·
Her	'e	Jeri Fouts, Vice President		
<u>√.</u>		Type or print name and title	Date Check	T PTIN
Paid		Print/Type preparer's name Kristina Morgan, CPA	<i>N</i> 1,1 1	_
		Kristina Morgan, CPA	701/02/14 self-employe	□ P01370742 86-0503405 ~
اعاد معالاً	parer Only	Firm's name James E. Raftery, CPA PC Firm's address 606 N. Stapley Drive	Firm's EIN	00 0303403
ع ارتیا	Only	Mesa, AZ 85203	Phone no 45	30-835-1040
Ma	v the II	RS discuss this return with the preparer shown above? (see instructions)	Ti nono no. 40	X Yes No
,	01 12-1			Form 990 (2012)
SO.	S	ee Schedule O for Organization Mission State	ment Continuat	

	1990 (2012) Feeding America's Hungry Children 41-2061 rt IV Checklist of Required Schedules	<u> 798</u>	P	age 3
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		103	110
	If "Yes," complete Schedule A	1	х	
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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	•		
Ŭ	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	į .	х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ū	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
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,			
_	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	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 and XII	12a	Х	
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 and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		Х
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	
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_		Х
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,			
-	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
-	1c and 8a? If "Yes," complete Schedule G, Part II	18		_X_

Form 990 (2012)

19 20a

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

complete Schedule G, Part III

- 41	Checkist of Required Schedules (Continued)		,	,
			Yes	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	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? 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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	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		
25a	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		X.
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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, highest 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,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X_
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38_	X	

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Form 990 (2012) Feeding America's Hungry Children
Part V Statements Regarding Other IRS Filings and Tax Compliance

a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		Check if Schedule O contains a response to any question in this Part V					
b Enter the number of Forms W2G included in line 1a Enter o-Info applicable of Drift the organization comply with backup withholding rules for reportable payments to vendors and reportable garning (gambling) winnings to prize winners? 22 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 3 b If a tieses one is reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 3 b If was a filed a form 950 Tor this year? If 250, yourny be required to e-file fee instructions, which is a filed a form 950 Tor this year? If 250, yourny be required to e-file fee instructions, and a start filed a form 950 Tor this year? If 250, yourny be required to e-file fee instructions, and a start filed a form 950 Tor this year? If 250, yourny be required to e-file fee instructions, and a start filed a form 950 Tor this year? If 250, yourny be required to e-file fee instructions, and a start filed a form 950 Tor this year? If 250, yourny be required to e-file fee instructions, and a start filed a form 950 Tor this year? If 250 Tor 150 Years, and yourned to the organization of 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 accounts? 5 b If 150 If 250						Yes	No
c Del the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gambling) withings to prize without some state of the calendar year ending with or within the year covered by this return 2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return 3 If all earn on the calendar year ending with or within the year covered by this return 3 If Yes, Thas it field a Form 990-Tro this year? If Yho, "provide an explanation file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-free (see instructions) 3 If Yes, "has it field a Form 990-Tro this year? If Yho," provide an explanation in Schedule O 3 If Yes, "has it field a Form 990-Tro this year? If Yho," provide an explanation in Schedule O 4 At any time the name of the roegin country (such as a bank account, securities account, or other financial account; or interest my or a synathrough of the country of the organization in the roegin country. Pesse enstructions for fining requirements for Form TD F00.221, Report of Foreign Benk and Financial Accounts 5 Was the organization a party to a prohibited tax shetler transaction at any time during the tax year? 5 If Yes, "to lise a 50, did the organization that it was or is a party to a prohibited tax shetler transaction? 6 If Yes, "to lise a 50, did the organization in that it was or is a party to a prohibited tax shetler transaction? 6 If Yes, "to lise the organization has been that a second the property of the companization solicition and explanation and party organization file form 1990. The second property organization is file for granization in the property and to the Form 8899 as required? 7 If Yes, "indicate the number of Forms 8282 filed during the year	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	1			
gambling) winnings to prize winners? 8 Effect the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return 9 In a least one is reported on line 2a, did the organization file all required federal employment tax returns? 9 Note, if the sum of lines 1 and 2a is greater than 250, you may be required to e-fibe (see instructions). 9 a Ut the organization have unrelated business gross income of \$1,000 or more during the year? 9 A A rany time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly? 9 A In any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly? 9 A In any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly? 9 B In a sea of 50, did the organization that it was or is a party to a prohibited tax shelter transaction? 9 B In any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 9 B In any time the same of the foreign country is promised to the prograzion as party to a prohibited tax shelter transaction? 9 B In any time the same of the foreign country is promised to the prograzion as the same transaction as a party to a prohibited tax shelter transaction? 9 B In any time the same of the foreign country is promised to the prograzion as the same transaction is a party to a prohibited tax shelter transaction? 9 B In any time the same of the foreign country is the comparization and expert that are normally greater than \$100,000, and did the organization solitation that were not tax eductible is a contribution on a party to pods and services provided to the payor? 10 B In a second the prograzion transaction to tax second to the same transaction and the same transaction and the same transaction and transac	_	•		0			
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tied for the calendar year ending with or within the year covered by this return? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Dot the organization have unrelated business gross income of \$1,000 or more during the year? 3b If If year, his it filed a form 900-71 for this year If If No, provide an explanation in Schedule O 4a A rany time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly (such as a bank account, securities account, or other financial accountly? 4b If Yes, "inter the name of the foreign country," If No, provide an explanation in Schedule O 5c West, "other the name of the foreign country," If No, provide an explanation or other financial accountly? 5c West, "other the name of the foreign country," If No, provide an explanation or other financial accountly? 5c West, "other the name of the foreign country," If No, provide an explanation of the financial Accounts 5d Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5d Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax eductibles of a charitable contributions? 5d If Yes," other than any receive deductible contributions under section 170(c). 6d If the organization shall may receive deductible contributions under section 170(c). 6d If the organization shall may receive deductible contributions under section 170(c). 6d If the organization section and party for goods and services provided to the payor? 7d If Wes," indicate the number of Forms 8282? filed during the year 9d Unit the organization received a contribution of goods or services provided? 1d the organization received a contribution of care, boats, and party to pay premiums on a personal benefit contract? 7e X 7f Yes," of the organization received a contribution of care, boats, and					1c	X	
b If at least one is reported on line 2e, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a Form 990-Tre this year? If "No," provide an explanation in Schedule O 3c 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 accountly) 5c A tar with the financial account in a foreign country (such as a bank account, securities account, or other financial account) 5c A tar with the financial account in a foreign country (such as a bank account, securities account, or other financial account) 5c A tar with the financial account in a foreign country (such as a bank account, securities account, or other financial account) 5c A tar with the financial account in a foreign country (such as a bank account, securities account, or other financial account) 5c A tar with the financial accountry of the organization that it was or is a party to a prohibited tax shaller transaction? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shaller transaction? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shaller transaction? 5c If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c A X 6d If "Yes," that were not tax deductible as charitable contributions under section 170(c). 8d If "Yes," did the organization neceive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payment of the section of	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? If Yes, 'thas it filed a Form 990-ff for this year? If No, 'provide an explanation in Schedule O As A tany 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. Implication is a bank account, securities, account, or other financial accountly? 4a X X b If Yes, 'there the name of the foreign country. Implication is a bank account, securities, account, or other financial accountly? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Id any taxable party notify the organization file Form 888617. 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solution any contributions that were not tax deductible is a chariable contributions. 5c If Yes, 'did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solution any contributions that were not tax deductible as chariable contributions. 5c If Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 If Yes, 'did the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 7 Organization serve a payment in excess of \$75 made party as contribution of or the value of the goods or serveces provided? 7 Organization serve a segment in excess of \$75 made party as contributions and party for goods and services provided to the payor? 8 If Yes, 'nindicate the number of Forms 8282 filed during the year 9 Organization serve and party and party and party and party and par		filed for the calendar year ending with or within the year covered by this return	_2a	0			
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from them sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b if "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b 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 13b	_			h+2	70		Y
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			_13c				v
	D	if tes, has it filed a Form (20 to report these payments (if No, provide an explanation in Schedul	.			990	(2012)

232005 12-10-12

Form 990 (2012) Feeding America's Hungry Children 41-2061798 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent 1h 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 officer, director, trustee, or key employee? 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a 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 X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 X Did the organization have a written document retention and destruction policy? 14 14 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? a The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 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 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization The Organization - (602)241-2873

12-10-12

.741 W Rose Garden Lane, No. 9, Phoenix, AZ

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

- 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) Name and Title	(B) Average			((Pos	C) ition	1		(D) Reportable	(E) Reportable	(F) Estimated
Hame and the	hours per week	box	not c	heck ss pe	more rson	than is bot or/trus	h an	I .	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Virgil Earls	5.00	1						_		_
President		X		X				0.	0.	0.
(2) Jeri Fouts	1.00				ĺ					_
Vice President		X		X				0.	0.	0.
(3) Romel Clariza	1.00								_	_
Secretary		X		Х				0.	0.	0.
(4) Suzie Hankins	1.00			ļ					_	_
Trustee		X				ļ		0.	0.	0.
(5) Dennis Williamson	1.00							_	_	_
Trustee		X						0.	0.	0.

Par	t VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)				
	(A)	(B)			_ (0				(D)	(E)			(F)	
	Name and title	Average	(do		Pos		ì ≀than	one	Reportable	Reportable		Es	stimate	∍d
		hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensatio		ar	nount	
		week (list any	-	T a		1	1	100)	from the	from related organization		com	other opensa	
		hours for	direct				-			(W-2/1099-MIS		ı	rom th	
		related	6 6	stee			nsate		(W-2/1099-MISC)	(** =: *********************************	,		janizat	
		organizations	Individual frustee or director	institutional trustee		oyee	Highest compensated employee					an	d relat	:ed
		below	Mdua	othu	Officer	Кеу етрюуее	hest	E E				org	anızatı	ons
		line)	르	IIIS	₹	ē.	물통	효						
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	Cub total	· -		<u> </u>	L	1	_	<u> </u>	0.		0.			0.
	Sub-total	/II Continu A							0.		0.			0.
	Total from continuation sheets to Part V	ni, Section A							0.		0.			0.
	Total (add lines 1b and 1c) Total number of individuals (including but	not limited to th		linte	-d al	hav.	ابداد	20 10		1000 of reportab				
2	compensation from the organization	not iimited to ti	1056	IISLE	o a	OUV	e) wi	10 16	eceived more than \$100	,000 or reportable	.6			(
	compensation from the organization			-									Yes	No
3	Did the organization list any former officer	director or tri	icto	a ka	w or	nnlo	WAA	orl	highest compensated a	mnlovee on				
J	line 1a? If "Yes," complete Schedule J for			5, NC	, y C	пріс	yee	, 01 1	nighest compensated e	inployee on		3		х
4	For any individual listed on line 1a, is the s			nmn	ensa	ation	n and	d oth	her compensation from	the organization				
7	and related organizations greater than \$15	-		-						ino organization		4		X
5	Did any person listed on line 1a receive or									dual for services				
Ŭ	rendered to the organization? If "Yes," con							0.4.	ou organization of that			5		Х
Sec	tion B. Independent Contractors	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u></u>										
1	Complete this table for your five highest co	ompensated in	depe	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of com	npens	ation	from	
	the organization Report compensation for										·			
	(A)								(B)			((C)	
	Name and busines	s address	N	INC	3				Description of s	ervices			nsatio	ก
										1				
										ļ				
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										}				
2	Total number of independent contractors		ot li	mite	d to		_	sted	l above) who received m	ore than				
	\$100,000 of compensation from the organ	ization >				(0			,				

232008 12-10-12

		Check if Schedule O con	tains a response	to any question	in this Part VIII			
		0.1000.11 (0.100.11)		io any quotion	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1 a	Federated campaigns	1a	170,869.				
ran Jun		Membership dues	1b					
i, G		Fundraising events	1c		j			
ifts ar A		Related organizations	1d		1			
s, G nik		Government grants (contribut			1			
Sir		All other contributions, gifts, gran						
her	•	similar amounts not included abo		520,050.				
ઉ	_			450,007.				
Contributions, Gifts, Grants and Other Similar Amounts	-	Noncash contributions included in lines Total, Add lines 1a-1f	s 1a-11 \$		3,690,919.			
<u> </u>	''	Total, Add lines 14 11		Business Code				
e l	2 a							
vic.	b						•	
Ser	c							
E Š	d							-
Program Service Revenue	e							
Pro		All other program service reve	enue					
		Total. Add lines 2a-2f	5.1.45					
	3	Investment income (including	dividends, intere					
	_	other similar amounts)	,	>	10.			10.
	4	Income from investment of ta	x-exempt bond o	_				
	5	Royalties	onop. one.p	•				
		Hoyamoo	(i) Real	(ii) Personal			•	
	6 a	Gross rents	() 1104	(ii) i oroona.	1			
	b				1			
	c	5			1			
	ď		L	•	1			
		Gross amount from sales of	(i) Securities	(ii) Other	,			
	, a	assets other than inventory	(l) Cecanics	(ii) Otrioi				
	ь							
		and sales expenses						
	С	• • • • • • • • • • • • • • • • • • • •			1			
	d			•	1			
_	8 a		na events (not		-			
Jue	Ų ū	including \$	of					
Other Revenu		contributions reported on line						
Ğ,		Part IV, line 18	а					
Ę.	h	Less direct expenses	b					
Ò		Net income or (loss) from fund		•	1			
		Gross income from gaming a						
		Part IV, line 19	а					
	ь	Less: direct expenses	b					
		Net income or (loss) from gan			1			
		Gross sales of inventory, less						
		and allowances	а					
	ь	Less. cost of goods sold	b		1			
		Net income or (loss) from sale		•	1			
	Ť	Miscellaneous Revenu		Business Code				
	11 a]			
	۰. u							
	c							
	d							
	e	Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			3,690,929.	0.	0.	10.
23200 12-10-	9							Form 990 (2012)

sect	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon			ompiete column (A)	
Do 7b.	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		САРОПОСО	goriorar experiess	охроносо
	organizations in the United States. See Part IV, line 21	3,022,879.	3,022,879.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	227,129.	227,129.		
3	Grants and other assistance to governments,	-			
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	299,999.	299,999.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes			-	
11	Fees for services (non-employees).				
а	Management				
b	Legal	10 100		10 100	
С	Accounting	10,100.		10,100.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	07 100	06 400	0 020	0.00
	column (A) amount, list line 11g expenses on Sch O.)	97,190.	86,400.	9,830.	960.
12	Advertising and promotion	2 024		2,024.	
13	Office expenses	2,024.		2,024.	
14	Information technology				
15	Royalties	3,600.	3,600.		
16	Occupancy	3,000.	3,000.		
17	Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials Conferences, conventions, and meetings				
19 20	Interest				
20	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,559.	2,047.	512.	
23	Insurance	2,000.			
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		-			
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,665,480.	3,642,054.	22,466.	960.
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)		1		

Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (B) (A) End of year Beginning of year 87,814. 58,063. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 2 121,395. 89,537. 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete 5 Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L. 6 Notes and loans receivable, net 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 12,796. 10a basis. Complete Part VI of Schedule D 8,718. 6,637. 4,078. 10b 10c b Less accumulated depreciation Investments - publicly traded securities 11 11 12 Investments · other securities See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 Intangible assets 14 14 15 Other assets. See Part IV, line 11 15 186,095 181.429 Total assets. Add lines 1 through 15 (must equal line 34) 16 204. 150 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 150. 204. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 185,891. 181,279. Unrestricted net assets 27 27 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 185,891. <u> 181,279.</u> 33 Total net assets or fund balances 186,095. 181,429. Total liabilities and net assets/fund balances

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

232012

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

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

Inspection

Department of the Treasury Internal Revenue Service

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

Name or	tne organizat			_		-		-		identificati		
Don't	D		America's H						4	<u>1-2061</u>	<u>798</u>	
Part I	'		ity Status (All organiz					tructions.				
The organ			because it is: (For lines	_								
1 🖳			s, or association of chur			ection 170	(b)(1)(A)(i)).				
2			′0(b)(1)(A)(ii). (Attach Sc	-								
3 🖳	•	•	tal service organization of									
4	A medical re	search organization	operated in conjunction	with a hos	pital desci	ribed in se	ection 170	(b)(1)(A)(ii	ii). Enter t	the hospital	's nam	ie,
	city, and stat											
5 📖	_	•	benefit of a college or ur	niversity o	wned or or	perated by	a governi	mental un	t describ	ed in		
		(b)(1)(A)(iv). (Comple	·									
6 📙	A federal, sta	ate, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).					
7 X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	rıbed ı	n
		(b)(1)(A)(vi). (Comple	•									
8 📙			section 170(b)(1)(A)(vi).									
9 📖	•	•	eives. (1) more than 33 1						-	-	-	
			nctions - subject to certa									
			axable income (less sect	tion 511 ta	ıx) from bu	sinesses a	acquired b	y the orga	anization a	after June 3	0, 197	5
		509(a)(2). (Complete				_						
10	_	_	perated exclusively to te								_	
11 📖	_	-	perated exclusively for the									or
			ations described in section				2) See see	ction 509(a)(3). Che	eck the box	that	
		· · · · · · · · · · · · · · · · · · ·	organization and comple		_			. — -	- 111 - 61	- . . 1		
	a Type			• •	nctionally	•				n-functional		•
e			at the organization is not									n
		-	han one or more publicly						9(a)(1) or	section 505	(a)(2)	
f	_		ten determination from t	the IRS tha	atitis a ly	pe I, Type	II, or Type	9 111				
		rganization, check th					-646 - 6-11		0			<u> </u>
g	_		organization accepted ar									
			lirectly controls, either al	one or tog	etner with	persons o	iescribed	ın (II) and (iii) below,		Yes	No
	•	• .	upported organization?							11g(i)		
	• •		n described in (i) above?		-0					11g(ii)		
		· ·	person described in (i) o							11g(iii)		
h	Provide the t	ollowing information	about the supported org	ganization	(S)							
	-		I	that la the s		(A) Did vo	u notificatho	(vi) Is	the			
	of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your		tion in col.	organizati	on in col.	(vii) Amount		netary
orga	anızatıon				document?			(i) organiz U.S	ed in the	Sup	port	
			(see instructions))	Yes	No	Yes	No	Yes	No			
				103	110	103	10	100	1.0			
								 				
				-								
	-			-								
			ļ									
	•			 								
Total												
	Paperwork Re	duction Act Notice	, see the Instructions fo	or	• • • • • • • • • • • • • • • • • • • •		•	Schedul	e A (Forr	n 990 or 99	0-EZ)	2012

Form 990 or 990-EZ.

(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.)

Se	ction A. Public Support	, notod bolow, piod	oo oompleto i alt	··· /	-			
	indar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
	Gifts, grants, contributions, and	(a) 2000	(6) 2000	(6) 2010	(0) 20,11	(6) 2012	(i) Total	
•	membership fees received (Do not							
	include any "unusual grants.")	3522186.	6566632.	3747917.	4912037.	3660868.	22409640.	
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			·		-		
Ŭ	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	3522186.	6566632.	3747917.	4912037.	3660868.	22409640.	
	The portion of total contributions	0022200	0000000	0,1,32,0				
Ū	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the	ĺ						
	amount shown on line 11,							
	column (f)							
6	Public support. Subtract line 5 from line 4	-					22409640.	
	ction B. Total Support	<u> </u>					<u> </u>	
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
	Amounts from line 4	3522186.	6566632.	3747917.	4912037.	3660868.	22409640.	
	Gross income from interest,			0.1.01.1				
Ŭ	dividends, payments received on				,			
	securities loans, rents, royalties		,					
	and income from similar sources		·					
a	Net income from unrelated business							
3	activities, whether or not the							
	business is regularly carried on			1				
40	Other income Do not include gain				-			
10	or loss from the sale of capital							
	assets (Explain in Part IV.)		15.				15.	
44	Total support. Add lines 7 through 10		13.				22409655.	
	Gross receipts from related activities,	etc. (see instruction	ne)		L	12	22407033.	
	First five years. If the Form 990 is for	·		d fourth or fifth ta	ax vear as a sectio			
13	organization, check this box and stor	_	mat, second, triii	a, rourtil, or marka	in year as a section	11001(0)(0)	ightharpoons	
Se	ction C. Computation of Publ		rcentage				<u>F</u> _	
	Public support percentage for 2012 (I			column (f))		14	100.00 %	
	Public support percentage from 2011		•	· · · · · · · · · · · · · · · · · · ·		15	100.00 %	
	33 1/3% support test - 2012. If the o			n line 13, and line	14 is 33 1/3% or m			
	stop here. The organization qualifies	•				,	►X	
Ł	33 1/3% support test - 2011. If the o		-		line 15 is 33 1/3%	or more, check t		
	and stop here. The organization qual					ŕ	▶□	
17a	10% -facts-and-circumstances tes	•			e 13, 16a, or 16b, a	and line 14 is 10%	or more.	
	and if the organization meets the "fac	_						
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							
F	10% -facts-and-circumstances tes	_				17a, and line 15 is	10% or	
•	more, and if the organization meets the	_						
	organization meets the "facts-and-circ				-		•	
18	Private foundation. If the organization						ns 🕨	
				,, / / %			or 990-EZ) 2012	

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, places complete Port II.)	

Se	ction A. Public Support	now, please com	piete i ait ii.j				
	indar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that					_	
Ŭ	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-	-					
7	ization's benefit and either paid to						
	or expended on its behalf						
_	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
^	· · · · · · · · · · · · · · · · · · ·					- 	
	Total. Add lines 1 through 5				 		<u> </u>
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons Amounts included on lines 2 and 3 received			-			
•	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6) ction B. Total Support				į.		
				1	1 1 2011	1 1 2242	40 T . 1
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
-	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses			1			
	acquired after June 30, 1975						
C	: Add lines 10a and 10b			_			
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income Do not include gain				_		
	or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thii	d, fourth, or fifth to	ax year as a secti	on 501(c)(3) organiz	zation,
	check this box and stop here_						▶ □
Sec	ction C. Computation of Publi	c Support Pe	rcentage				
15	Public support percentage for 2012 (li	ne 8, column (f) d	livided by line 13, o	column (f))		15	%
16	Public support percentage from 2011	Schedule A, Part	: III, line 15			16	%
Sec	ction D. Computation of Inves	tment Incom	e Percentage				
17	Investment income percentage for 20	12 (line 10c, colui	mn (f) divided by lii	ne 13, column (f))		17	%
18	Investment income percentage from 2	:011 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2012. If the			on line 14, and line	e 15 is more than	33 1/3%, and line 1	17 is not
	more than 33 1/3%, check this box ar	-					▶□
b	33 1/3% support tests - 2011. If the	-	-		_		and
	line 18 is not more than 33 1/3%, che	-					. —
20	Private foundation. If the organization		-				▶□_

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
2012
Open to Public Inspection

Name of the organization

Feeding America's Hungry Children

Employer identification number

Da	Feeding America's		41-2061/98
Pa			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year .		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be i	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose o	conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an hist	torically important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form o	of a conservation easement on the last
	day of the tax year.		
	,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu	ire
_	listed in the National Register	,	2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
_	year▶	,	
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,		uring the year
7	Amount of expenses incurred in monitoring, inspecting, and		•
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?	, .	Yes No
9	In Part XIII, describe how the organization reports conservati	ion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizar		
	conservation easements.		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtheran	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pub	olic 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		▶ \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial	
-	the following amounts required to be reported under SFAS 1		-
а	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. 232051 12-10-12

Schedule D (Form 990) 2012

		America's							61798	
Par	3.3									
3	Using the organization's acquisition, accessi	on, and other recor	ds, check a	ny of the	e following tha	at are a si	gnıfıcant	use of its	collection	items
	(check all that apply):									
а	Public exhibition	!			change progr	ams				
b	Scholarly research	•	e Ll Oth	ner						
С	Preservation for future generations									
4	Provide a description of the organization's co		-		_			ose in Par	t XIII.	
5	During the year, did the organization solicit of					ier similar	assets	_	_	
	to be sold to raise funds rather than to be m								Yes	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		lete if the or	ganızatı	on answered	"Yes" to	Form 990), Part IV, I	line 9, or	
	Is the organization an agent, trustee, custod		diant for co	atribuitio	ne or other as	ecte not	ıncluded	-		
та		an or other interme	diary for coi	itributio	ons or other as	55612 1101	iiiciuueu		Yes	No
_	on Form 990, Part X?	and complete the f	ollowna tab	lo:				<u> </u>	_ res	NO
D	If "Yes," explain the arrangement in Part XIII	and complete the i	ollowing tab	i e :			[Amount	
	Barrage balance						4-		Amount	
	Beginning balance						1c			
a	Additions during the year						1d			
e	Distributions during the year						1e			
7-	Ending balance	aum 000 Dart V lin	- 010				1f	Г	Yes	□ No
	Did the organization include an amount on F			aa baa	a arounded in	Doet VIII		<u> </u>	_ tes	
Par	t V Endowment Funds. Complete						0			
[rai	Endowment runds. Complete				(c) Two yea			years back	(e) Four y	voare back
4	Decimalization of the balance	(a) Current year	(b) Prio	year	(C) TWO yea	15 Dack	(a) Tillee	years Dack	(e) roury	cais Dack
1a	Beginning of year balance									
D	Contributions		<u> </u>							
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses		 							
g	End of year balance		<u> </u>						_	
2	Provide the estimated percentage of the cur	•		column	(a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c shou									
3a	Are there endowment funds not in the posse	ession of the organia	zation that a	re held	and administe	ered for th	ne organiz	zation		
	by:									<u>es No</u>
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations								3b	
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm									
	Description of property	(a) Cost or basis (invest	I		st or other s (other)		ccumulate preciation		(d) Book	value
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment				12,796.		8,7	18.	4	<u>,078.</u>
е	Other									
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Par	t X, column	(B), line	10(c).)				4	<u>,078.</u>

	1				
Sche	edule D (Form 990) 2012 Feeding America's Hungry Chil			<u> 2061798</u>	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements	With Revenue per R	eturr		
1	Total revenue, gains, and other support per audited financial statements		1	3,660,	<u>,868.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1		' 	
а	Net unrealized gains on investments	9			
b	Donated services and use of facilities 2)			
С	Recovenes of prior year grants) <u> </u>			
d	Other (Describe in Part XIII)	t			
е	Add lines 2a through 2d		_2e		0.
3	Subtract line 2e from line 1		3	3,660,	,868.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	,			
b	Other (Describe in Part XIII.)	22.22	1		
c	Add lines 4a and 4b		4c	30.	061.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	3,690,	929.
	rt XII Reconciliation of Expenses per Audited Financial Statements	With Expenses per			
1	Total expenses and losses per audited financial statements		1	3,665,	480.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.			-,,	
a	Donated services and use of facilities 2	.			
b	Prior year adjustments 21	-			
c	Other losses 20				
d	Other (Describe in Part XIII)	i			
e	Add lines 2a through 2d	<u> </u>	2e		٥.
	Subtract line 2e from line 1		3	3,665,	480
3			3	3,003,	, =00.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	. 1		İ	
a	Investment expenses not included on Form 990, Part VIII, line 7b		}		
b	Other (Describe in Part XIII.)	0	ا . ا		0
C	Add lines 4a and 4b		4c	2 665	400
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	3,665	400.
	rt XIII Supplemental Information	4 14 5 1841 4		0. 5	4.5.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, line			2b; Part V, line	4, Part
X, lın	e 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provi	de any additional informat	ion.		
_					
<u>Pa</u>	ct XI, Line 4b - Other Adjustments:				
<u> </u>	lowance for uncollectible pledges			29,	<u>846.</u>
Rei	fund of contributions			·-	215.
<u>Tot</u>	tal to Schedule D, Part XI, Line 4b	_		30_,	<u>,061.</u>

Schedule D (Form 990) 2012

SCHEDULE F (Form 990)

Department of the Treasury

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
2012
Open to Public Inspection

Internal Revenue Service

Name of the organization

Employer identification number

Fe	eding America	's Hunor	y Childr	·en	41-2061	798
	rt I General Info	rmation on A	ctivities Ou	tside the United States. Compl		
	to Form 990, Par	t IV, line 14b.				
1	For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gr		
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assistance?	X Yes No
2	United States.		-	procedures for monitoring the use of it		outside the
3			_	an be duplicated if additional space is		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
Nort	-h Amorica	0	0	Program Services	Feeding Programs	299,999,
MOIT	th America			PIONI DELAICES	rearring stoutemine	233,333,
	Sub-total Total from continuation	0				299,999.
С	sheets to Part I Totals (add lines 3a and 3b)	0	0			299,999,
LHA	For Paperwork Reduct	ion Act Notice.	see the Instruc	tions for Form 990.	Schedule	F (Form 990) 2012

232071

Page 2

Part II 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 recipient who received more than \$5,000. Part II can be duplicated if additional space is needed

Feeding America's Hungry Children

Schedule F (Form 990) 2012

(g) Amount of (h) Description (i) Method of non-cash of non-cash assistance assistance appraisal, other)					exempt by
(f) Manner of cash disbursement					recognized as tax-e
(e) Amount of cash grant					 foreign country,
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
(c) Region					is listed above that are reliance that are relianced a section
(b) IRS code section and EIN (if applicable)			ı		recipient organization he grantee or counsel
1 (a) Name of organization					2 Enter total number of r the IBS, or for which the

Schedule F (Form 990) 2012

232072 12-10-12

Feeding America's Hungry Children

Page 3

41-2061798

Schedule F (Form 990) 2012

2000	(h) Method of valuation (book, FMV, appraisal, other)	Fair Market Value					
V, line 16.	(g) Description of non-cash assistance	198,863 lbs of fresh produce					
o Form 990, Part I	(f) Amount of non-cash assistance	1 298,295,					
Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.	(e) Manner of cash disbursement						
tes. Complete if the	(d) Amount of cash grant	0.					
de the United States.	c) Number of recipients	16,572					
e to Individuals Outsid	(b) Region	North America				:	
Part III Grants and Other Assistance to Individuals Outside Part III can be duplicated if additional space is needed.	(a) Type of grant or assistance	Direct Client - Feeding Programs					

Schedule F (Form 990) 2012

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

Schedule F (Form 990) 2012

Yes X No

6

for Form 5713)

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

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

OMB No 1545-0047 Open to Public

Inspection

22. 23. **2** Employer identification number 41-2061798 (h) Purpose of grant or assistance eeding Programs eeding Programs eding Programs Feeding Programs Feeding Programs eeding 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 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance 37,800 lbs of 39,040 lbs of fresh produce 40,000 lbs of resh produce resh produce 32,400 lbs of fresh produce fresh produce 70,940 lbs of (f) Method of valuation (book, FMV, appraisal, other) Actual Value air Market air Market air Market air Market air Market 60,000, Nalue 106,410, Value 48,600, Value 56 700 Nalue 560 Nalue (e) Amount of assistance non-cash 58, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000 Part II can be duplicated if additional space is needed. ٥. 0 ٥. ö 0 (d) Amount of 50,000 cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Children (c) IRC section if applicable Hungry 501(c)(3) 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 Feeding America's 45-3327957 73-1184980 84-0731930 13-3170676 48-0959213 91-0826037 General Information on Grants and Assistance (P) 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 # Colorado Springs, CO 80915 Long Island City, NY 11101 1741 W. Rose Garden Lane, Care and Share Food Bank Northwest Harvest-Yakima or government 2605 Preamble Point Name of the organization 911 S Third Street Phoenix, AZ 85027 Wichita, KS 67211 Save The Animals 55-01 2nd Street Kansas Food Bank Yakima, WA 98901 Tulsa, OK 74106 1919 E Douglas City Harvest Part II Part I N

232101 12-18-12

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

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Schedule I (Form 990) (2012)

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Schedule I (Form 990) Feeding America's Hungry	merica's	Hungry Chil	Children	de Olympia	OO NOO misself to be		41-2061798 Page 1
(a) Name and address of (b) EIN (c) IRC section organization or government (a) Amount of (b) Amount of (c) IRC section (d) Amount of (e) Amount of (f) Method of (f) Metho	(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
Emergency Food Shelf Network 8501 54th Avenue North Minneapolis, MN 55428	41-1246504	501(c)(3)	0.0	154,308.	Fair Market Value	102,872 lbs of fresh produce	Feeding Programs
Harvesters Community Food Network 3801 Topping Avenue Kansas City, MO 64129	43-1208665	501(c)(3)	0	865.	Fair Market Value	185,910 lbs of fresh produce	Feeding Programs
Houston Food Bank 535 Portwall Street Houston, TX 77029	74-2181456	501(c)(3)	0	380,802	Fair Market Value	253,868 lbs of fresh produce	Feeding Programs
Roadrunner Food Bank 5840 Office Blvd NE Albuquerque, NM 87109	85-0278525	501(c)(3)	0	520,971.	Fair Market Value	347,314 lbs of fresh produce	Feeding Programs
North Texas Food Bank 4500 S Cockrell Hill Road Dallas, TX 75236	75-1785357	501(c)(3)	0	49,920.	Fair Market Value	33,280 lbs of fresh produce	Feeding Programs
Mesquite Veterans Center 840 Hafen Lane Mesquite, NV 89027	26-3415545	501(c)(3)	0	16,317.	Fair Market Value	10,878 lbs of fresh produce	Feeding Programs
Rotary First Harvest 3200 First Avenue South Seattle, WA 98134	91-1229941	501(c)(3)	0	111,000.	Fair Market Value	74,000 lbs of fresh produce	Feeding Programs
The 3000 Club 1741 W. Rose Garden Lane, #9 Phoenix, AZ 85027	27-3295358	501(c)(3)	50,000	0	Actual Value		Feeding Programs
Northwest Harvest-Kent 22220 68th Avenue South <u>Kent, WA</u> 98032	91-0826037	501(c)(3)	0	Fair 224,274, Nalue	Fair Market Value	149,516 lbs of fresh produce	Feeding Programs
							Schedule I (Form 990)

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Page 1

Schedule I (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) Feeding America's Hungry Children

(a) Name and address of (b) EIN (c) IRC seconganization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	ction (d) Amount of (e) Amount of cash grant non-cash (book, FMV, assistance 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	Fair 155,880, Value	Fair Market Value	103,920 lbs of fresh produce	Feeding Programs
High Plains Food Bank P.O. Box 331803 Amarillo, TX 79120	75-1838348	501(c)(3)	0	160,554.	Fair Market Value	107,036 lbs of fresh produce	Feeding Programs
Jacobs & Cushman San Diego Food Bank - 9850 Distribution Ave - San Diego, CA 92121	20-4374795	501(c)(3)	0	157,845.	Fair Market Value	105,230 lbs of <u>fresh prod</u> uce	Feeding Programs
Greater Chicago Food Depository 4100 West Ann Lurie Place Chicago, IL 60632	36-2971864	501(c)(3)	0	152,823.	Fair Market Value	101,882 lbs of fresh produce	Feeding Programs
Hoosier Hills Food Bank 2333 W Industrial Pk Dr Bloomington, IL 47402	31-1051402	501(c)(3)	0	61,200.	Fair Market Value	40,800 lbs of fresh produce	Feeding Programs
Arkansas Department of Corrections Hwy 65 & Hwy 388 Grady, AR 71644	71-0847443		0,0	.000,09	Fair Market Value	40,000 lbs of fresh produce	Feeding Programs
Feeding South Dakota 3511 N. 1st Ave Sioux Falls, SD 57104	36-3293534	501(c)(3)	0	. 25,500	Fair Market Value	37,000 lbs of fresh produce	Feeding Programs
Food Bank of Lincoln 4840 Doris Bair Cr. Ste. A Lincoln, NE 68504	47-0640293	501(c)(3)	0	Fair 52,350, Value	Fair Market Value	34,900 lbs of fresh produce	Feeding Programs
							Schedule I (Form 990)

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) (2012) Part III

Page 2

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Neighborhood Agents	953	0	17, 151,	17,151,Fair Market Value	Various food items - 11,434 lbs of fresh produce
Direct Clients	11665	.0	209,978.		Various food items - 139,985 lbs of fresh produce
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Schedule T. Part T. Line 2: Monitoring 990 and Monthly reporting.	de the information	nrequired in Partl, and Month	nequired in Part I, line 2, Part III, column (b), and Monthly reporting.	n (b), and any other additional in ກຕຸ	formation.

Direct Clients are individuals who are given perishable and non-perishable food from food banks. The number of recipients assisted is an estimated numbers based on each recipient receiving 12 lbs of fresh produce.

non-perishable food to clients who are unable to come in to food banks. The Neighborhood Agents are individuals who distribute perishable and

number of recipients is an estimated numbers based on each recipient

Schedule I (Form 99	90)	I	eeding America's Hungry Children	<u>41-2061798</u>	Page 2
Part IV Supr	lemental	Infor	Feeding America's Hungry Children nation		
· · · · · · · · · · · · · ·					
		_			
<u>receiving</u>	12 lbs	of	fresh produce.		
		_	· · · · · · · · · · · · · · · · · · ·		
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				<u>-</u>	
				1 1 6 11	
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SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

Name of the organization

Attach to Form 990.

Feeding America's Hungry Children

Inspection Employer identification number

41-2061798

Pai	τl	Types of Property								
			(a) Check if applicable	(b) Number of contributions or	(c) Noncash contr amounts repor Form 990, Part VI	ted on	(d) Method of d noncash contrib	etermın		s
	Δrt	- Works of art		items continuated	Form 990, Fait Vi	iii, iii le 1g				
1 2		- Works of art								
_		- Fractional interests								
3								•		
4		bks and publications								
5		Clothing and household goods								
6		Cars and other vehicles								
7		ats and planes					· · · · · · · · · · · · · · · · · · ·			
8		ellectual property				_			-	
9		curities - Publicly traded						 -		
10		curities - Closely held stock								
11		curities - Partnership, LLC, or								
		st interests								
12		curities - Miscellaneous								
13		alified conservation contribution								
		toric structures						_		
14		alified conservation contribution - Other								
15		al estate · Residential								
16		al estate - Commercial								
17	Rea	al estate - Other							.	
18	Coll	lectibles								
19		Food inventory X 1 3,450,007. Fair Market Value								
20	Dru	gs and medical supplies	_							
21	Tax	udermy					. <u>.</u>			
22	Hist	torical artifacts					·- ·- ·-			
23	Sci	entific specimens								
24	Arc	heological artifacts								
25	Oth	er 🕨 ()							_	
26	Oth	er 🕨 ()								
27	Oth	er > ()								
28	Oth	er ▶ ()								
29	Nur	mber of Forms 8283 received by the organiz	zation during	g the tax year for c	contributions					
	for v	which the organization completed Form 828	33, Part IV, I	Donee Acknowled	gement	29				
									Yes	No
30a	Dur	ing the year, did the organization receive by	contribution	on any property rep	oorted in Part I, line	es 1 <i>-</i> 28 tha	at it must hold for			
	at le	east three years from the date of the initial o	contribution	, and which is not	required to be use	d for exem	pt purposes for			1
	the	entire holding period?						30a		X
b	If "Y	res," describe the arrangement in Part II.								1
31		Ooes the organization have a gift acceptance policy that requires the review of any non-standard contributions?								
		pes the organization hire or use third parties or related organizations to solicit, process, or sell noncash								
_		itributions?			-			32a		X
b		Yes," describe in Part II.								
33		ne organization did not report an amount in	column (c) f	or a type of prope	rty for which colun	nn (a) is ch	ecked,			l
		cribe in Part II			<u>-</u>					
LHA		or Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.		Schedule M	(Form	990) (2012)

Schedule M	(Form 990) (2012)	<u>Feeding</u>	<u>America's</u>	Hungry	Children	<u>41-2061798</u>	Page 2
Part II	Supplemental the organization is Also complete this	Information reporting in Part part for any add	Complete this part I, column (b), the relational information	t to provide th number of conf	e information requir tributions, the numb	red by Part I, lines 30b, 32b, and 33, a per of items received, or a combination	ind whether n of both.
				<u>-</u>			

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32142 12-20-1	2					Schedule M (Forn	n 990) (2012

SCHEDULE O

(Form 990 or 990-EZ)

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

2012
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Feeding America's Hungry Children

Employer identification number 41 – 2061798

reeding America's nungry children \$1-2001790
Form 990, Part I, Line 1, Description of Organization Mission:
desperate food needs of thousands of hungry children here in America.
Form 990, Part VI, Section B, line 11: The 990 is reviewed and approved at
the annual board meeting.
Form 990, Part VI, Section B, Line 12c: At the annual board meeting,
compliance is checked.
Form 990, Part VI, Section B, Line 15: The salary for the CEO and other
officers is determined by the Board of Directors based on salary
comparisons for CEOs and other officers of other charities 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 makes its Forms
1023 and 990 available to the public upon request. The Organization also
makes its Form 990 available on its website.
Form 990, Part VI, Section C, Line 19: The Organization makes its
governing documents, conflict of interest policy and financial statements
available to the public upon request. The Organization also makes its
financial statements available on its website.
Form 990, Part XI, line 9, Changes in Net Assets:
Allowance for uncollectible pledges -29,846.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012)

232211 01-04-13

Schedule O (Form 990 or 9	990-EZ) (2012)	Page 2
Name of the organization	Feeding America's Hungry Children	Employer identification number 41-2061798
Membership du	es refunded	-215.
Total to Form	990, Part XI, Line 9	-30,061.
Form 990, Par	t XII, Line 2c	
The Organizat	ion made no changes to its audit oversight	or selection
process durin	g the fiscal year covered by the return.	
		···