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990

### **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

20**13** 

Open to Public

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter Social Security numbers on this form as it may be made public.

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

Department of the Treasury Inspection Internal Revenue Service For the 2013 calendar year, or tax year beginning 20 D Employer identification number R C Name of organization World Hunger Ecumenical Arizona Task Force, Inc. Check if applicable: Doing Business As WHEAT Address change 74-2386488 Number and street (or P O, box if mail is not delivered to street address) Room/suite E Telephone number Name change Initial return 602-955-5076 Ste 118 City or town, state or province, country, and ZIP or foreign postal code Terminated Amended return G Gross receipts \$ F Name and address of principal officer: Tamera Zivic, PhD, Exec Director/CEO Application pending H(a) is this a group return for subordinates? Yes No H(b) Are all subordinates included? Tyes No 4000 N 7th St, Ste 118; Phoenix, AZ 85014 If "No," attach a list (see instructions) ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527 **✓** 501(c)(3) 501(c) ( Tax-exempt status Website: ▶ www.HungerHurts.org H(c) Group exemption number ▶ Form of organization Corporation Trust Association ☐ Other ► L Year of formation. M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: The mission of WHEAT is to educate, advocate, motivate and empower individuals to action in the fight against hunger. WHEAT's major empowerment programs include the Activities & Governance the Hand to Hand Project, a fair trade initiative; The Clothes Silo, WorkWear for Men and Management Training& Mentoring. 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . 17 4 Number of independent voting members of the governing body (Part VI, line 1b) 17 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 7 Total number of volunteers (estimate if necessary) . . . . . 6 569 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0.00 Net unrelated business taxable income from Form 990-T, line 34 0.00 **Prior Year** Contributions and grants (Part VIII, line 1h) . 8 437,660.00 651,605.00 Revenue 9 Program service revenue (Part VIII, line 2g) 244,271.00 436,219.00 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 10 693.00 917.00 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . 11 0.00 Total revenue—add lines & through-11 (must equal Part VIII, column (A), line 12) 12 874,572.00 896,793.00 Grants and similar amounts paid (Part IX, column)(A), lines 1-3) . . . . . 13 0.00 0.00 14 0.00 0.00 15 173,450.00 219,300.00 16a Professional fundraising fees (Part IX, column (A). line 11e) 0.00 0.00 Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX) column (A), lines 11a-11d, 11f-24e) 17 572,966.00 630,870.00 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 746,416,00 852,889.00 Revenue less expenses. Subtract line 18 from line 12 15,196,00 43,904.00 **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 748,339.00 792,245.00 21 Total liabilities (Part X, line 26) . 359.00 361.00 22 Net assets or fund balances. Subtract line 21 from line 20 747,980.00 791,884.00 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge, and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 100 Sign Here aenia Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 if Paid self-employed Preparer Firm's name Firm's EiN ▶ **Use Only** Firm's address ▶ Phone no May the IRS discuss this return with the preparer shown above? (see instructions) 🗌 Yes 🦳 No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No. 11282Y

Form **990** (2013)

	0 (2013)	Page 2
Part	· · · · · · · · · · · · · · · · · · ·	
	Check if Schedule O contains a response or note to any line in this Part III	<u>. L</u>
1	Briefly describe the organization's mission:	
	The mission of WHEAT is to educate, advocate, motivate and empower individuals to action in the fight against hunger. WHEA major empowerment programs include its fair trade initiative, the Hand to Hand Project; the Clothes Silo providing free, profess	
	clothing to women in need; WHEAT's WorkWear for Men providing appropriate clothing for men in need; and its Educational	ionai
	Program including the Managment Training with those who are unemployed or underemployed leading to living wage jobs.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
		<b></b> ✓ 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?	Z 88 -
	services <i>r</i>	✓ No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured to the organization of the control o	ired h
·	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code: 611430 ) (Expenses \$ 579,820.00 including grants of \$ 0.00 ) (Revenue \$ 373,870.00	<del></del>
	WHEAT's education programs provide awareness, ongoing training and tools for action in the fight against hunger including	,
	workshops, presentations, skill building. Programs include the Norma Johansen Hunger Library providing resources of all kind	ds.
	free of charge, for book discussion, motivating youth, teaching a class and more WHEAT's Training and Mentoring program pro	
	management level training including on-the-job, workshops, personal and professional development seminars in volunteer, ret	ail
	and office management to people in poverty. This job training gives the participants marketable skills to become gainfully	
	employed. Job Training and Mentoring also includes WHEAT's Youth Leadership programs, providing mentors to youth at	
	risk, while they receive job experience and attend workshops on career development and future educational opportunities.	
	Recipients receive TANF and/or are Arizona low income residents.	<del>-</del> -
		<b></b>
4b	(Code: 62411 ) (Expenses \$ 95,563.00 including grants of \$ 0.00 ) (Revenue \$ 91,923.00	)
	The Clothes Silo and Workwear for Men projects provide free, professional clothing to men and women in need who are entering	9
	or re-entering the workforce. Serving 7,124 women and 734 men in 2013, the program provides clothing, as well as personal	
	shoppers who give the clients special attention to find just the right outfit. The programs also provide special networking	
	opportunities and additional workshops for the clients throughout the year. The clothing is also available for much-reduced pr	
	to the public to support the expenses associated with the programs, as well as to provide a great source of professional wear for	
	those employed who have little extra to spend business attire. Decipients receive TANE and/or are Arizona law income recident	or
	those employed who have little extra to spend business attire. Recipients receive TANF and/or are Arizona low income residen	ts.
	those employed who have little extra to spend business attire. Recipients receive TANF and/or are Arizona low income residen	or ts.
	those employed who have little extra to spend business attire. Recipients receive TANF and/or are Arizona low income residen	ts.
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	those employed who have little extra to spend business attire. Recipients receive TANF and/or are Arizona low income residen	or ts.
		ts.
4c	(Code: 62411 ) (Expenses \$ 74,134.00 including grants of \$ 0.00 ) (Revenue \$ 78,933.00	ts. )
4c	(Code: 62411 ) (Expenses \$ 74,134.00 including grants of \$ 0.00 ) (Revenue \$ 78,933.00 Another of WHEAT's major empowerment programs includes its fair trade initiative, the Hand to Hand Project, featuring fairly tr	ts. )
4c	(Code: 62411 ) (Expenses \$ 74,134.00 including grants of \$ 0.00 ) (Revenue \$ 78,933.00 Another of WHEAT's major empowerment programs includes its fair trade initiative, the Hand to Hand Project, featuring fairly tr handicrafts from artisans in 43 countries, including the United States. Purchases of these quality items help the artisans become	ts. ) aded
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					- 000
4e	Total program se	ervice expenses > 755,017	7.00		
	(Expenses \$	ervices (Describe in Schedule O.) 5,500.00 including grants of \$	0.00) (Revenue \$	0.00 )	
4d	Other program s	ervices (Describe in Schedule O.)			
			·		
			·		

Part	V Checklist of Required Schedules	-		
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		✓
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		1
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,			1
_	Part III	5		<u> </u>
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	١.		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		✓
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	l _	<b>[</b>	,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		✓
•	complete Schedule D, Part III			,
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	8		<b>✓</b>
•	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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			· ·
	VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		✓
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		✓
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		✓
đ	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		✓
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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	l		
19 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		<b>✓</b>
12 0	Schedule D. Parts XI and XII		<b>✓</b>	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a		
_	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>▼</b>
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		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<b>\</b>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
10	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
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			_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		<b>✓</b>
	If "Yes," complete Schedule G, Part III			,
20 a		19		<b>√</b>
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b	$\vdash$	1

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or 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		1
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		1
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 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
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		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
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		1
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):	2-42		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<b>√</b>
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28b 28c		1
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 contributions? If "Yes," complete Schedule M	29 30	✓	<b>✓</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>√</b>
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		1
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		1
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		<b>√</b>
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		<b>√</b>
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		1
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,			
38	Part VI	37		✓
	19? Note. All Form 990 filers are required to complete Schedule O	38		✓

Form 99	0 (2013)		ı	Page
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			. [
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a	,	,	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1	,	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	<b>√</b>	
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 2a 7			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<b>√</b>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		1
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		1
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.			i I
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	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 solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts 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 provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		✓
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			١.
_	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>✓</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>√</b>
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b>√</b>
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<b>√</b>
	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.	8		
a	Did the organization make any taxable distributions under section 4966?	00		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a		├
10	Section 501(c)(7) organizations. Enter:	9b		
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 . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	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?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
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?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		اختيا	
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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	الحب	
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part	<u> </u>	See ins	for a tructi	ons.
Section	on A. Governing Body and Management	• •	<del></del>	<u> </u>
00011	A do to many body and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a 17			
	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.		:	
ь 2	Enter the number of voting members included in line 1a, above, who are independent .   Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
3	any other officer, director, trustee, or key employee?	2		<b>√</b>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6	Did the organization have members or stockholders?	6		7
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		<b>√</b>
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	<u> </u>	
ь 9	Each committee with authority to act on behalf of the governing body?	8b	<u> </u>	ļ
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	1	1
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	iue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
ь	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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		Î	
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	✓	
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	1	
13	Did the organization have a written whistleblower policy?	13	<b>√</b> _	
14 15	Did the organization have a written document retention and destruction policy?	14	<b>✓</b>	
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-	1	
a b	The organization's CEO, Executive Director, or top management official	15a 15b	<b>√</b>	-
16a	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	130		
.00	with a 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	;	. Éx
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► Arizona			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(	c)(3)s	only)
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	erest	policy	y, and
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	•	
	organization: The Organization, 4000 N 7th St, Ste 188, Phoenix, AZ 85014 6032/955.5076			

		(2013)	
comn	MMI	1/013)	

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization	nor any relate	d org	aniz	atic	n c	ompe	nsa	ated any currer	nt officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  (D) Reportable compensation compensely (list any						(E) Reportable compensation from related	(F) Estimated amount of other	
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Colleen Boles										
Chairperson/Director	1	1		1				o	ا ا	O
(2) Elaine Groppenbacher										
Vice Chair/Director	1	✓		1				l 0	o	O
(3) Eugenia Mancuso							Г			
Secretary/Treasurer/Director	1	✓		1				l 0	o	0
(4) Caitlin Acker										<u>_</u>
Director	1	✓						l 0	اه	0
(5) John Bazuscj								<u>_</u>		
Director	1	✓						o	اها	0
(6) Teri Conrad										<del></del>
Director	1	✓						0	o	O
(7) Olivia Gonzalez										
Director	1	1						o	o	0
(8) Tony Herrera										
Director	1	1						0	o	O
(9) Gurukirn Kaur Khalsa										
Director	1	1						0	اه	0
(10) Roberta Lasin										
Director	1	1						o	اه	O
(11) Vesta Noble						1	Π			
Director	1	1						o	اه	O
(12) Marjan Nobel								<u>_</u>	<b>-</b>	
Director	1	1					1	0	o	0
(13) Cheryl Thompson								<u> </u>		
Director	1	✓						0	o	0
(14) Trish Thompson-Winters			ļ				ļ -	1		
Director	1	✓						l 0	ol	O

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/005			lighes	st C	ompensated E	mployees (conti	nued)
						C) ition					
	(A)	(B)	(do n				than o	one	(D)	(E)	(F)
	Name and title	Average hours per					is both		Reportable compensation	Reportable compensation from	Estimated amount of
		week (list any					or/trust	—	from	related	other
		hours for related	Individual to or director	nsti	Officer	9	臺	Former	the	organizations	compensation
		organizations	ed id		9	9	Se est	<b> </b> ਊ	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		below dotted	악하	ᆲ		Key employee	# 8		,		and related
		line)	trustee	Institutional trustee		8	Pen				organizations
				8			Highest compensated employee				
(15) Ka	ren Willard				-			-			
Directo		1	✓						0	0	
(16) Le	land Wilson	 									
Directo		1	<b>✓</b>		L.		_	_	0	0	
	villa Jungman										
Directo		1	<b>✓</b>					<u> </u>	0	0	
	mera Zivic, PhD ive Director/CEO	40+	1	1	1	1	1		67.000.00		
(19)	ive Director/CEO	40+		•	_	_	_	┝	67,000.00	0	
.:. <del>-1</del>		<b></b>									
(20)											
								_			
(21)											
(22)								_			
(22)											
(23)						_					
J											
(24)											
										·-·	
(25)											
1b	Sub-total	L						_			
C	Total from continuation sheets to Part	VII Sectio	 п.А	•	•		•		67,000.00	0	
d				•	•		•		67,000.00		
2	Total number of individuals (including but						above	) w			
	reportable compensation from the organi	zation >	_								
_									<del></del> -		Yes No
3	Did the organization list any former of	ficer, direc	tor, o	r tr	uste	е,	key e	mp	oloyee, or high	est compensate	<del></del>
_	employee on line 1a? If "Yes," complete s										3 🗸
4	For any individual listed on line 1a, is the	sum of rep	oortat	ole d	com	per	nsatio	n a	nd other comp	ensation from the	ne l
	organization and related organizations individual	greater tha	an \$1	50,0	000	7 11	"Yes	s, "	complete Sch	edule J for su	
5		· · ·		•				• •			4 🗸
5	Did any person listed on line 1a receive of for services rendered to the organization?	r accrue co	omoli	ısat ete :	ion Sch	iror edi.	n any ıle .l fi	ors	related organiz such nerson	ation or individu	5 <b>✓</b>
Section	n B. Independent Contractors		<u> </u>					-	der percen	· · · · ·	5     4
1	Complete this table for your five highest of	compensate	ed inc	lepe	ende	ent :	contr	acto	ors that receive	ed more than \$1	00.000 of
	compensation from the organization. Repyear.	ort compe	nsatio	n fo	or th	e c	alend	ar y	rear ending wit	h or within the o	rganization's tax
-	Name and business add								(B)		(C)
	Name and business add						-		Description of s	er vices	Compensation
									<del></del>		<u> </u>
		<del></del>					-				
											<u>~</u>
2	Total number of independent contractor	rs (includir	a bu	t no	ot I	imit	ed to	th	ose listed abo	ove) who	

Part	VIII	Statement of Reve				!:-	. :	Do-4.1/89				_
		Check if Schedule O		a res	ponse or note to	Total re		(B) Related or exempt function revenue	(C) Unrelated business revenue	exclud unde	(D) evenue led from er sectio 12-514	
nts	1a	Federated campaigns	3	1a	0.00		ł		:			
iou Iou	b	Membership dues .		1b	0.00		İ			l		
ts, ( Am	С	Fundraising events .		1c	0.00		1					
G∰	d	Related organizations		1d	0.00							
ъў.	е	Government grants (con		<u>1e</u>	0.00		}			1		
Ajio er S	f	All other contributions, gi and similar amounts not inc	ms, grants,	١			I					
출활					651,605.00							
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions includ			0.00							
<u> </u>	h	Total. Add lines 1a-1	· · ·	<u>· · · </u>	Business Code	65	1,605.00			<del> </del>		***************************************
Program Service Revenue	2a	Education				-	. 445 00	70 445 00	0.00	<b></b>		
ě	b	Workwear for Men and	Women		611430 62411		3,415.00	73,415.00	0.00			0.00
8	C	Hand to Hand Project	440111611		62411		1,923.00 3,933.00	91,923.00 78,933.00	0.00			0.00
2	ď				02411		3,333.00	78,933.00	0.00	<u> </u>		0.00
S	-											
<u>B</u>	f	All other program sen	vice reveni	ue .			0.00	0.00	0.00	<del> </del>		0.00
2	g	Total. Add lines 2a-2				24	4,271.00	0.00	0.00	<del></del> }		0.00
	3	Investment income	(including	divid	ends, interest,		,,					
		and other similar amo	ounts) .				917.00	917.00	0.00			0.00
	4	Income from investmen	t of tax-exe	mpt be	ond proceeds ▶		0.00	0.00	0.00		<del></del> -	0.00
	5	Royalties	<u> </u>				0.00	0.00	0.00			0.00
			(ı) Rea	J	(ii) Personal	****	*55		*** ***	,	4,52	2.0
	6a	Gross rents		0.00	0.00	* m	- ik ave	. Since . Sinc	A ŠV S	La		. °€.
	b	Less: rental expenses		0.00	· · · · · · · · · · · · · · · · · · ·	~ ~		, and 34	., .,	7		&
	C	Rental income or (loss)		0.00								18
	d	Net rental income or (	(IOSS) .	<u> </u>	▶		0.00	0.00	0.00		<del></del>	0 00
	7a	Gross amount from sales of assets other than inventory	(i) Securi		<del> </del>	ا دير،	r i	*** *			· #	resp.
	ь	Less: cost or other basis		0.00	0.00				. ,	1		
	"	and sales expenses .		~ ~~			4 ,	»· .	<b>.</b> -	ļ. ļ.	ž».	*
	c	Gain or (loss)	<u> </u>	0.00	<del>                                     </del>		Ì					
	ď	Net gain or (loss) .		0.00			0.00	0.00	0.00	<del>                                     </del>		0.00
•						À		- , ;		į.	∠F1	۰.۰۰
venue	8a	Gross income from fu	_			, å	"				•	
		events (not including \$		<u>.00</u>		*		, pri	~	<u> </u>	4	,~-
Other Re		of contributions reported See Part IV, line 18 .	ea on line 1	•			1			ļ.	•	
٦	١.	•		· a		+29	, 4	. ¥.	*		-	p.50
δ	L	Less: direct expenses Net income or (loss) f			0.00					<del> </del>		
		Gross income from ga		_	events .		0.00		0.00	<del> </del>		0.00
	34	See Part IV, line 19 .			0.00		]			}		
	ь	Less: direct expenses			0.00		,					
	C	Net income or (loss) f			0.00		0.00	0.00	0.00	<del>                                     </del>	·	0.00
	1 -	Gross sales of in	_	•		<del></del>	0.00	0.00	0.00	<del> </del>		
		returns and allowance		. а	0.00							
	ь	Less: cost of goods s	sold	. b		l						
	С	Net income or (loss) f				<u> </u>	0.00	0.00	0.00			0.00
•		Miscellaneous F			Business Code				2.30			
	11a									Ī		
	Ь											
	С											
	d	All other revenue .		•	0.00		0.00	0.00	0.00			0.00
	е	Total. Add lines 11a-			🟲	<b> </b>	0.00			<u> </u>		
	ı <b>12</b>	Total revenue. See in	nstructions	S		00	6 793 NA İ	896 793 00	I	1		

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service expenses (D) Fundraising (C) Management and 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 0.00 0.00 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . 0.00 0.00 3 Grants and other assistance to governments. organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . 0.00 በ በበ Benefits paid to or for members . . . . . 0.00 0.00 Compensation of current officers, directors, trustees, and key employees . . . . 67,000.00 62,310.00 4,690.00 0.00 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 0.00 0.00 0.00 0.00 7 Other salaries and wages . . . . . . 152,300.00 131,184.00 20,179.00 937.00 Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) 0.00 0.00 0.00 0.00 ٥ Other employee benefits . . . . . . 0.00 0.00 0.00 0.00 10 Payroll taxes . . . . . . . . . 5,358.00 4,930.00 374.00 54.00 11 Fees for services (non-employees): Management . . . . . . . а 0.00 0.00 0.00 0.00 b 0 00 0.00 0.00 0.00 C Accounting . . . . . . . . 500.00 452.00 48.00 0.00 Lobbying . . . . . . . . d 0.00 0.00 0.00 0.00 Professional fundraising services. See Part IV, line 17 e 0.00 0.00 f Investment management fees . . . . . 0.00 0.00 0.00 0.00 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . 0.00 0.00 0.00 0.00 12 Advertising and promotion . . . . . 27,500.00 27,500.00 0.00 0.00 13 Office expenses . . . . . 49,500.00 44,505.00 4,950.00 45.00 Information technology . . . . 14 36,750.00 11,778.00 23,289.00 1,683.00 15 Royalties . . . . . . . . 0.00 0.00 0.00 0.00 16 63,550.00 62,950.00 600.00 0.00 17 8,795.00 8,795.00 0.00 0.00 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0.00 0.00 0.00 0.00 19 Conferences, conventions, and meetings . . 4,350.00 4,350.00 0.00 0.00 20 670.00 670.00 0.00 0.00 21 Payments to affiliates . . . . . . . 0.00 0.00 0.00 0.00 22 Depreciation, depletion, and amortization . 0.00 0.00 0.00 0.00 23 5,517.00 3,787.00 1,730.00 0.00 24 Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e, If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) **PROGRAM MATERIALS** 383,174.00 383,174.00 0.00 0.00 **EDUCATIONS TOOLS & EQUIPMENT** ь 29,310.00 16,547.00 12,763.00 0.00 STORE EQUIPMENT C 13,115.00 9,015.00 4,100.00 0.00 VOLUNTEER APPRECIATION 5,500.00 d 5,000.00 500.00 0.00 All other expenses 0.00 Total functional expenses. Add lines 1 through 24e 25 852,889.00 776,947.00 73,223.00 2,719.00 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) if

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 29,450.00 31,945.00 2 Savings and temporary cash investments . . . . . . . . . 2 422,951.00 473,850.00 3 3 0.00 0.00 4 0.00 4 0.00 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 0.00 5 0.00 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 0.00 6 7 7 0.00 Inventories for sale or use . . . . . . 8 8 295,938.00 286,450.00 Prepaid expenses and deferred charges 0.00 9 0.00 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 0.00 10b Less: accumulated depreciation . . . . b 0.00 0.00 10c 0.00 11 0.00 11 0.00 12 Investments—other securities. See Part IV, line 11 . . . . . . . . . 12 0.00 0.00 13 Investments—program-related. See Part IV, line 11 . . . . . 13 0.00 0.00 14 14 0.00 0.00 15 15 0.00 0.00 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . 16 748,339.00 792,245.00 17 17 0.00 0.00 18 18 0.00 0.00 19 19 0.00 0.00 20 20 0.00 0.00 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 0.00 21 0.00 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . 22 0.00 0.00 23 Secured mortgages and notes payable to unrelated third parties . . . 23 0.00 0.00 Unsecured notes and loans payable to unrelated third parties . . . 0.00 24 0.00 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 359.00 361.00 26 Total liabilities. Add lines 17 through 25 359.00 26 361.00 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 747,980.00 27 791,884.00 28 28 0.00 0.00 29 29 0.00 0.00 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 0.00 30 Capital stock or trust principal, or current funds . . . . . . . . . 0.00 0.00 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 0.00 32 Retained earnings, endowment, accumulated income, or other funds. 32 0.00 0.00 33 33 747,980.00 791,884.00 Total liabilities and net assets/fund balances . . . . 748,339.00 34 792.245.00 Form 990 (2013)

Form	aan	(2013)	
	330	120131	

Page 12

Part	XI Reconciliation of Net Assets	-			<u> </u>
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			793.00
2	Total expenses (must equal Part IX, column (A), line 25)	2			389.00
3	Revenue less expenses. Subtract line 2 from line 1	3		43,9	904.00
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		747,9	980.00
5	Net unrealized gains (losses) on investments	5			0.00
6	Donated services and use of facilities	6			0.00
7	Investment expenses	7			0.00
8	Prior period adjustments	8			0.00
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.00
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	i 1			
	33, column (B))	10		791,8	384.00
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>	<del></del>	<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🗎 Other		_	1	
	If the organization changed its method of accounting from a prior year or checked "Other," exchedule O.	(plain i	n		
0-					
28	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	<b>√</b>	
	If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both:	ipilea c	)r	1 70	
	•			1	
	Separate basis Consolidated basis Both consolidated and separate basis		O.L		
D	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audit		. 2b	<b>√</b>	
	separate basis, consolidated basis, or both:	ea on	a		
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			S. Charles	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	versial	nt.		
•	of the audit, review, or compilation of its financial statements and selection of an independent acco	untant?	2c		1
	If the organization changed either its oversight process or selection process during the tax year, e				
	Schedule O.	Apiaiiii	1 2 3		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	in Exercise	2.50	
-	the Single Audit Act and OMB Circular A-133?		. 3a		1
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	erao th		+-	<del>                                     </del>
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such		3b		
				m <b>990</b>	(2013)

### SCHEDULE A (Form 990 or 990-EZ)

## **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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization						E	Employer id	lentification	number		
World Hunger Ecumenical Arizona Task Force Inc						74-2386488					
		ity Status (All orga						nstructio	ns.		
<ul> <li>2  A school describ</li> <li>3  A hospital or a c</li> <li>4  A medical resear</li> </ul>	ntion of church led in <b>section</b> coperative hos ch organizatio	nes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza n operated in conjund	churches h Schedu ition desc	describe ule E.) cribed in s	ed in sec section 1	tion 170( 70(b)(1)(	(b)(1)(A)(i) (A)(iii).		(iii). Enter	the	
5 An organization	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 section 170(b)(1)(A)(iv). (Complete Part II.)										
<ul><li>6 ☐ A federal, state,</li><li>7 ☑ An organization</li></ul>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
8 A community tru	st described in	section 170(b)(1)(A)	( <b>vi).</b> (Con	nplete Pa	rt II.)						
9 An organization receipts from ac support from gr	that normally i ctivities related ross investmen	receives: (1) more that I to its exempt functing income and unrelater June 30, 1975. Se	an 331/3% ions—sub lated bus	of its su oject to d siness tax	pport fro ertain ex cable inc	ceptions	s, and (2) ss section	no more	than 33	1/3% of its	
11 An organization purposes of one	organized and or more pub	operated exclusively doperated exclusive licly supported organ describes the type of secondary.	ely for th	e benefit described	of, to p	perform to ion 509(a	the funct i)(1) or se	ions of, ection 50	9(a)(2). Se		
a 🗌 Type I	<b>b</b> ☐ Type	II c ☐ Type III	I–Functio	nally inte	arated	d □.	Type III-N	lon-funct	ionally int	tegrated	
or section 509(a)	lation manage (2). on received a	rs and other than one written determination	e or more	publicly	support	ed organi	izations o	łescribed	in sectio	n 509(a)(1)	
•	7, 2006, has th	ne organization accer	oted any	gift or co	ontributio	n from a	ny of the	•		🗆	
(i) A person wh	o directly or in	ndirectly controls, eithody of the supported o	her alone organizati	or toget	her with	persons	describe	d in (ii) ar	nd 11g(i)	Yes No	
(iii) A 35% contr	olled entity of a	on described in (i) abo a person described in on about the support	(i) or (ii) a	above?.					11g(ii) 11g(iii)		
(i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-9 in col (i) listed governing documents of the color of		Is the organization (s).  Is the organization of (i) listed in your verning document?  (v) Did you notify the organization in col. (i) of your support?		nization in of your			(vii) Amount of monetary support				
		(see instructions))	Yes	No	Yes	No	Yes	No	1		
(A)											
(B)											
(C)											
(D)											
(E)											
	A STATE OF THE STA										

Part	Support Schedule for Organiza	ations Descri	bed in Secti	ons 170(b)(1	)(A)(iv) and 1	70(b)(1)(A)(vi	<u> </u>
	(Complete only if you checked the						
	Part III. If the organization fails to						,
Section	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and			, ,		\-,	
	membership fees received. (Do not	1					
	include any "unusual grants.")	325,110.00	362,300.00	508,223.00	437,660.00	651,605.00	1,832,990.00
2	Tax revenues levied for the			·-··	· · · · · · · · · · · · · · · · · · ·	············	<del></del>
	organization's benefit and either paid						
	to or expended on its behalf	0 00	0 00	0.00	0.00	0.00	0.00
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	0.00	0 00	0.00	0.00	0.00	0.00
4	Total. Add lines 1 through 3	325,110 00		508,223.00	437,660.00		1,832,990.00
_	=						1,002,777,0100
5	The portion of total contributions by each person (other than a	] 		77		;	
	governmental unit or publicly		传奏:	1000	Part of an		
	supported organization) included on					, K	
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						0.00
6	Public support. Subtract line 5 from line 4.		The state of the s				1,832,990.00
	on B. Total Support	the contract of the second	and the state of t		3.14	·	1,032,770.00
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	325,110 00	362,300.00	508,223.00	437,660.00	651,605.00	1,832,990.00
8	Gross income from interest, dividends,	323,110 00	302,300.00	300,223.00	437,000.00	051,005.00	1,032,770.00
0	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	417.00	(10.00	722.00	(02.00	047.00	2 5 4 2 2 2
•		617.00	619.00	723.00	693.00	917.00	3,569.00
9	Net income from unrelated business activities, whether or not the business						
	is regularly carried on						
40		0.00	0.00	0.00	0.00	0.00	0.00
10	Other income. Do not include gain or						
	loss from the sale of capital assets					_	
	(Explain in Part IV.)	231,018 00	233,130.00	198,540.00	436,219 00		
11	Total support. Add lines 7 through 10						3,179,737.00
12	Gross receipts from related activities, etc	•	•			12	0.00
13	First five years. If the Form 990 is for the				-		n 501(c)(3)
Cardi	organization, check this box and stop he on C. Computation of Public Suppor				<u> </u>	<del></del>	
				4 1 (0)			
14	Public support percentage for 2013 (line 6		-	• • • • • • • • • • • • • • • • • • • •		14	58 %
15	Public support percentage from 2012 Sch					15	58 %
16a	331/3% support test—2013. If the organization and					•	
	box and <b>stop here.</b> The organization qua	-		_			. ▶ ☑
ь	331/3% support test—2012. If the organ					15 is 331/3%	or more,
	check this box and stop here. The organ		-	· · · · · · ·			. •
17a	10%-facts-and-circumstances test - 20						
	10% or more, and if the organization me						
	Part IV how the organization meets the "f	acts-and-circu	mstances" tes	t. The organiza	ation qualifies	as a publicly s	upported
	organization						. ▶ □
Ь	10%-facts-and-circumstances test-20	012. If the orga	nization did no	ot check a box	on line 13. 16	a, 16b. or 17a.	and line
	15 is 10% or more, and if the organizat						
	Explain in Part IV how the organization m						
	supported organization				_		`. <b>▶</b> □
18	Private foundation. If the organization di	d not check a l	box on line 13,	16a, 16b, 17a	, or 17b, chec	k this box and	see
	instructions		,	•	•		▶ ┌

Schadel	le A (Form 990 or 990-EZ) 2013						Page <b>3</b>
Part		ne box on line	9 of Part I o	r if the organ			<u> </u>
Secti	on A. Public Support				·		
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513			-			
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Secti	on B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>. 13</b>	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for torganization, check this box and stop he	ere			n, or fifth tax ye		
	ion C. Computation of Public Suppo						
15	Public support percentage for 2013 (line						%
16	Public support percentage from 2012 Sc			<u></u>	<u></u>	16	%
	ion D. Computation of Investment In						
17	Investment income percentage for 2013	(line 10c, colur	nn (f) divided b	y line 13, colu	mn (f))	17	%

331/s% support tests-2013. If the organization did not check the box on line 14, and line 15 is more than 331/s%, and line 17 is not more than 331/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization .  $\blacktriangleright$ 331/3% support tests-2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

	Form 990 or 990-EZ) 2013 Page
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Part II, Sec	tion B, line 10: Income described is from program service revenue through clothes Silo, Workwear for Men, Hand to Hand
Project and	l Educational Programs.
***************************************	······································
••••••	
•••••	

#### SCHEDULE D (Form 990)

Department of the Treasury

### **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.

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

Open to Public Inspection

OMB No. 1545-0047

2013

Internal Revenue Service Name of the organization Employer identification number World Hunger Ecumenical Arizona Task Force, Inc. 74-2386488 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 1 Total number at end of year . . . . 2 Aggregate contributions to (during year) . Aggregate grants from (dunng year) . . 3 Aggregate value at end of year . . . . 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . ☐ Yes ☐ No 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 2 easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 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 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 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) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" 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 XIII, the text of the footnote to its financial statements that describes these items. 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: 

Assets included in Form 990, Part X .

Part									
3	Using the organization's acquisition, a collection items (check all that apply):	accession	, and other	records, o	check any of th	ne follov	ving that are a s	ignificant us	se of its
а	☐ Public exhibition			d 🗆 L	oan or exchan	ge prog	rams		
b	☐ Scholarly research			e 🗌 (	Other				
С	☐ Preservation for future generations								
4	Provide a description of the organizat XIII.	ion's coll	ections and	explain h	ow they further	the org	ganization's exen	npt purpose	in Part
5	During the year, did the organization	solicit or	receive don	ations of	art, historical t	reasure	s, or other simila	ır	
	assets to be sold to raise funds rather			as part o	of the organizat	ion's co	ellection?	☐ Yes	□ No
Part	Complete if the organization 990, Part X, line 21.	answere	ed "Yes" to				•		orm
1a	Is the organization an agent, trustee, included on Form 990, Part X?							ot Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and	d complete t	he followi	ng table:				
							A	mount	
C	Beginning balance					10	:		
d	Additions during the year					10			
е	Distributions during the year					1e			
f	Ending balance						<del></del>		
2a	Did the organization include an amour		-	•		-	. , , ,	_	□ No
	If "Yes," explain the arrangement in Pa	art Aill. Cr	leck nere ii t	ne explan	ation has been	provide	ed in Part XIII .	· · · ·	<u></u>
, Gi	Complete if the organization	answere	ed "Yes" to	Form 99	O Part IV line	<b>-</b> 10			
	Complete if the organization	(a) Curre		(b) Prior year			(d) Three years back	(e) Four year	ars back
1a	Beginning of year balance							<del>                                     </del>	
b	Contributions						,	<b> </b>	
C	Net investment earnings, gains, and losses					-			
d	Grants or scholarships	<del></del>						<del>                                     </del>	
e	Other expenditures for facilities and							<u> </u>	
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t			alance (lın	e 1g, column (a	a)) held	as:		
a	Board designated or quasi-endowmer		%						
b	Permanent endowment	%	0/						
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2		%						
3a	Are there endowment funds not in the				n that are held	and ad	ministered for th	Δ.	
Ju	organization by:	z possess		gariizatio	ii tilat are lielu	and ad	illilistered for th	-	s No
	(i) unrelated organizations							3a(i)	13 110
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organi							3b	+
4	Describe in Part XIII the intended uses		ganization's	endowme	ent funds.			<u> </u>	
Part									
	Complete if the organization	answere	ed "Yes" to	Form 99	0, Part IV, line	e 11a. S	See Form 990,	Part X, line	<del>:</del> 10
	Description of property	(a)	Cost or other b (investment)	asis (b) (	Cost or other basis (other)		Accumulated epreciation	(d) Book va	alue
1a	Land	. 1							
b	Buildings								
C	Leasehold improvements								
d	Equipment								
e	Other	<u> </u>				L			
Total.	Add lines 1a through 1e. (Column (d) n	nust equal	l Form 990, l	Part X, col	lumn (B), line 1	0(c).)	<u>•</u>		

Part VII	Investments—Other Securities.				
	Complete if the organization answer	red "Yes" to For			
	(a) Description of security or category (including name of security)		(b) Book value	1 ''	hod of valuation -of-year market value
(1) Financial					
• •	neld equity interests				
(3) Other					
(A)				<u> </u>	
(B)					
(C)					
(D)					<del></del>
(E) (F)			·	<del> </del>	
(F) (G)					
(H)			<del></del>	<del>                               </del>	
Total. (Column (	b) must equal Form 990, Part X, col. (B) line 12.)	· · · · · · · · · · · · · · · · · · ·		(Air Agricon Maria	
Part VIII	Investments—Program Related.		000 0 - 104 5	44 0 5	000 D + 1/4 II + 40
	Complete if the organization answe	red "Yes" to For			
	(a) Description of investment		(b) Book value		thod of valuation -of-year market value
(1)					
(2)					
(3)				<del> </del>	
(4)					
(5)				<del> </del>	
(6)					
<u>(7)</u>					<del>_</del>
<u>(8)</u> (9)		<del></del>		<u></u>	<del></del>
	b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.			and the section of th	re sen, a rea, a como en estado en estado en exemplos de destado en el exemplo de destado en el estado en encuente en el entre
	Complete if the organization answe	red "Yes" to For	m 990, Part IV, lin	e 11d. See Form	990, Part X, line 15.
	(a) D	escription			(b) Book value
_(1)					
(2)		· · · · · · · · · · · · · · · · · · ·			
_(3)				<u></u>	
_(4)					
(5)		<del></del>	<del></del>	<del> </del>	
<u>(6)</u>					<del></del>
<u>(7)</u>					
<u>(8)</u> (9)			<del></del>	·····	<del>  </del>
Total. (Colu	mn (b) must equal Form 990, Part X, col.	(B) line 15.)		>	
Part X	Other Liabilities. Complete if the organization answelline 25.				e Form 990, Part X,
1.	(a) Description of liability	(b) Book value		raannan yyyggaa jan saattiid taa 100 daga — ahis diibin na sarraanna.	
(1) Federal in	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)		<del></del>			
(9)	A) and and Fare Coo Bad Variable Cook				
	(b) must equal Form 990, Part X, col. (B) line 25.)	the tout of the feet	oto to the decision of		
2. LIADILITY TO	r uncertain tax positions. In Part XIII, provide 's liability for uncertain tax positions under Fl	THE TEXT OF THE TOOLS	iole to the organization	n s financial stateme	ents that reports the
organization	s hability for uncertain tax positions under FI	14 40 (MOU / 40). UNE	SOW LIGITALITY (EXT. OL	me loomote has bee	EL PLOVIGEO IU PAR XIII

Par	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Retu	m.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	896,793.00
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	0 1	
b	Donated services and use of facilities	0	
C	Recoveries of prior year grants	0	3
d	Other (Describe in Part XIII.)	0	
е	Add lines 2a through 2d	2e	0.00
3	Subtract line 2e from line 1	3	896,793.00
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	, e se sem se	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 0.0	D	
b	Other (Describe in Part XIII.)	D Section 1	
C	Add lines 4a and 4b	4c	0.00
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		896,793.00
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Re	turn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	852,889.00
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments	0	
C	Other losses	0	
đ	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	0.00
3	Subtract line 2e from line 1	3	852,889.00
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	Pa	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 0.00	D .	
b	Other (Describe in Part XIII.)	o P	
С	Add lines 4a and 4b		0.00
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	852,889.00

Part XIII Supplemental Information.

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

Schedule D (Fo	m 990) 2013	tion (continued)	 	Page 5
Part XIII	Supplemental Informa	ition (continuea)	 	<del></del> -
		•		
			• •	
-				

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection Employer identification number

World Hunger Ecumenical Arizona Task Force Inc	74-2386488
Part III. Statement of Program Service Accomplishments 4d Other Program Services: Expenses relat	ed to Volunteer Support Services
Part VI. Governance, Management, and Disclosure: Section B. Policies:	
Line 11b: The Organization's accountant and treasurer reviews the completed Form 990 with the full	board at a regularly scheduled
board meeting. The board then votes to accept or reject the completed Form 990; the Form 990 is NOT	signed and sent in until the full board
unanimously agrees to accept the Form 990.	
Line 12c: Each board member, officer and staff person is required to disclose and sign any conflicts	of interest, annually, through the
Organization's written Conflict of Interest form.	
Line 15a/b: The Organization's board determines the compensations of its executive director and ot	her staff based on research and
profiles done of other similar organizations and trends by it Human Resource Committee.	
Line 19: The Organization's governing documents, conflict of interest policy and financial statement	s are available to the public throughwri
written and verbal request; by email and on the internet on the Organization's website and through Gu	idestar.org
·	
	····

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Schedule O (Form 990 or 990-EZ) (2013)  Name of the organization	Employer identification number
World Hunger Ecumenical Arizona Task Force Inc	74-2386488
World Hanger Economical / a Politic Nash / Order No	74-2300-100
······································	
	***************************************
•••••••••••••••••••••••••••••••••••••••	