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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury

▶ 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.lrs.gov/form990.

Open to Public Inspection

A F	or the	2014 calendar year, or tax year beginning OCT 1, 2014 and end	nding S						
	neck if	C Name of organization		D Employer identific	ation number				
at	plicable	O Namo or organization							
	Addres	Feeding America's Children, Inc.							
	Name	B		86-0986348					
H	Johange Initial		oom/suite	E Telephone number					
⊨	Jreturn Final		JUIII/Suite	· '	584-1360				
Ц	return/ termin	1711 II HOOG GALAGII LAIIG		T -	1,772,515.				
_	ated Ameno	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$					
<u> </u>	Jreturn Applic	PHOEHIX, AZ 85027		H(a) Is this a group re					
L.	Jtion pendin	F Name and address of principal officer.Elizabeth laylor	,	for subordinates					
		same as C above	<u> </u>	H(b) Are all subordinates in					
		mpt status: X 501(c)(3) 501(c) ()	527		list. (see instructions)				
		e: > www.feedingac.org	T	H(c) Group exemption					
		organization: X Corporation	L Year	of formation: 2000 M	State of legal domicile: AZ				
Ра	rt []	Summary							
ا بو		Bnefly describe the organization's mission or most significant activities Meetir							
Governance		of thousands of America's most impoverishe							
ern	2	Check this box 🕨 📖 if the organization discontinued its operations or disposed	d of more	than 25% of its net as	sets.				
ŏ		Number of voting members of the governing body (Part VI, line 1a)		3	5				
9	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 2014 (Part V, line 2a)		5	0				
viti	6	Total number of volunteers (estimate if necessary)		6	0				
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		. 7a	0.				
4	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.				
				Prior Year	Current Year				
ø.	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		2,897,406.	1,772,515.				
Revenue		Program service revenue (Part VIII, line 2g)	7	0.	0.				
eve	10	Investment income (Part VIII, column (A), lines 3, 4, 400/7d)	10	0.	0.				
ď	11	and the same of the SAN and the same of the SAN and the same of th	8	0.	0.				
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 13ely 2016. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	91 🗀	2,897,406.	1,772,515.				
_	13	Grants and similar amounts paid (Part IX, column (A), lines GDEM: 17	2 /	2,926,198.	1,733,708.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)	7	0.	0.				
ιo.		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<i> </i>	100.	100.				
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
Je.		Total fundraising expenses (Part IX, column (D), line 25)	n. 🗀						
찣		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	• –	44,269.	30,407.				
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,970,567.	1,764,215.				
				-73,161.	8,300.				
<u></u> = S	19	Revenue less expenses. Subtract line 18 from line 12	Do.	ginning of Current Year	End of Year				
Net Assets or Fund Balances	~~	Tabel assists (Dart V. Isra 40)	Бе	73,649.	68,205.				
SSe		Total assets (Part X, line 16)	-						
et o		Total liabilities (Part X, line 26)	-	100.	1,600.				
		Net assets or fund balances. Subtract line 21 from line 20		73,549.	66,605.				
	ırt II	Signature Block			u knowledge and halief it is				
	•	Ilties of perjury, I declare that I have examined this return, including accompanying schedules a			y knowledge and belief, it is				
true,	correc	t, and complete. Declaration of prepa rer (other than officer) is based on all information of which	on preparer	r flas any knowledge.	117				
		Signature of officer		Date	/. U.So				
Sig		,		54.0					
Her	е	Elizabeth Taylor, President Type or print name and title							
			-/	Date Check	PTIN				
.		Print/Type preparer's name	\mathbf{Y}	f -					
Paid		Cynthia Williams, EA Williams, The Control of the C	<u>j1</u>	L2/09/15 self-employ					
	arer	Firm's name James E. Raftery, CPA PC		Firm's EIN ▶	86-0503405				
Use	Only	Firm's address 606 N. Stapley Drive			0 005 1040				
		Mesa, AZ 85203 \ /		Phone no. 48	0-835-1040				
May	the I	RS discuss this return with the preparer shown above? (see instructions)		·	X Yes No				

		a's Children, Inc.	86-0986348	Page 2
Par	rt III Statement of Program Service Accor	-		<u></u>
	Check if Schedule O contains a response or note	to any line in this Part III		
1	Briefly describe the organization's mission		_	
		food and medical supplies to	<u>needy</u>	
	<u>individuals.</u>			
2	Did the organization undertake any significant program	services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	· ······ · · · · · · · · · · · · · · ·	Yes	LX. No
	If "Yes," describe these new services on Schedule O			
3	Did the organization cease conducting, or make signifi	cant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.			
4		hments for each of its three largest program services, as	measured by expenses	3 .
		ed to report the amount of grants and allocations to oth		
	revenue, if any, for each program service reported	•		
4a		• including grants of \$ 1,733,708.) (Rever	nue \$)
	Providing food and medical	supplies to those in need by	directly	
	distributing food and medic	al supplies to the indigent	or resources	to
	other feeding programs.			
	Other recaring programmer	t t		
				
			· -	
			·	
				
				
4b	(Code) (Expenses \$	including grants of \$) (Rever	nue \$	
				
			<u> </u>	
4c	(Code) (Expenses \$	including grants of \$) (Reve	nue \$)
			-	
			_	
				-
	Other program con uses (December in Oak adula O.)			
4d	,	N. 6	\	
	(Expenses \$ including grants	of \$) (Revenue \$ 49,347.		
<u>4e</u>	Total program service expenses 1,	ヹ ヺ゚゚゚゚゚ヺ゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚	Form	990 (2014)
			1 01111	(2017)

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19

20a

20b

X

X

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

Form **990** (2014)

X

X

35b

36

37

36

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 199

If "Yes," complete Schedule R, Part V, line 2

Note. All Form 990 filers are required to complete Schedule O

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Form 990 (2014) Feeding America's Children, Inc. 86-0986348 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response
to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Q. See instructions

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			 1			
	Check if Schedule O contains a response or note to any line in this Part VI			X			
Sec	tion A. Governing Body and Management		1				
			Yes	<u>No</u>			
1a	Enter the number of voting members of the governing body at the end of the tax year						
	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 0.						
Ь	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			v			
	officer, director, trustee, or key employee?	2_		<u>X</u>			
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision			v			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockholders?	6		X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			v			
_	more members of the governing body?	7a		X			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			v			
_	persons other than the governing body?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	0-	v				
	The governing body?	8a	X				
	Each committee with authority to act on behalf of the governing body?	8b	Λ				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			х			
<u></u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Λ			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		V	NI -			
	District Annual Control of the Contr	40-	Yes	No X			
	Did the organization have local chapters, branches, or affiliates?	10a		^			
Þ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	406					
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х				
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		ļ			
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	Х				
12a	· · · · · · · · · · · · · · · · · · ·						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	Х				
	in Schedule O how this was done	12c	X				
13	Did the organization have a written whistleblower policy?	13	X				
14	Did the organization have a written document retention and destruction policy?	14					
15	Did the process for determining compensation of the following persons include a review and approval by independent	1					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-	v				
	The organization's CEO, Executive Director, or top management official	15a_	X				
b	Other officers or key employees of the organization	15b	^				
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			1			
тба	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-		x			
	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	16b		1			
500	exempt status with respect to such arrangements?	וטטו	L				
	List the states with which a copy of this Form 990 is required to be filed ►AZ , FL , NJ , WA , MA , NY , CA , CT , NO	TT					
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)						
18	·	avanal					
	for public inspection. Indicate how you made these available. Check all that apply. X Own website. X Upon request. Other (explain in Schedule O)						
40	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial				
19		u miali	oiai				
~	statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records:						
20	The Organization - 602-684-1360		-				
	1741 W Rose Garden Lane, No. 9, Phoenix, AZ 85027						
4000		Forn	990	(2014			
+3∠UU	6 11-07-14			,, ,			

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					nan ˈ	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated 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 organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Elizabeth Taylor	5.00	х		х				100.	0.	0
President	1.00	<u> </u>		1				100.	•	
(2) Mary Higby Schweitzer, PhD	1.00	X		x				0.	0.	C
Jice President	1.00	A.		Λ	-	 		0.	•	
(3) Bob Pasha	1.00	X		X				0.	0.	(
Secretary (4) Marcia Barfnecht	1.00	1		72					0.	
Board Member	1.00	x						0.	0.	(
(5) John Lepley	1.00	 				-				
Board Member	1100	x						0.	0.	(
		+								

Form 990 (2014)

Section	on 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon			mplete column (A).	
Do n	not include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
	3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	36,820.	36,820.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	1,446,888.	1,446,888.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign		252 222		
	individuals. See Part IV, lines 15 and 16	250,000.	250,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	100	0.0		
	trustees, and key employees	100.	80.	20.	
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		<u> </u>		
10	Payroll taxes	<u>.</u>			
11	Fees for services (non-employees):				
a	Management				
b	Legal Accounting	9,500.		9,500.	
ن م	Lobbying	9,500.			
d	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)	12,844.	10,519.	1,125.	1,200.
12	Advertising and promotion	750.	20/0250		
13	Office expenses	2,273.		343.	1,930.
14	Information technology				
15	Royalties				
16	Occupancy	5,040.	5,040.		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,764,215.	1,749,347.	10,988.	3,880.
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)	'			

Feeding America's Children, Inc. 86-0986348 Page 11 Form 990 (2014) Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 36,420. 22,474. Cash - non-interest-bearing 1 2 Savings and temporary cash investments 37,229 45,731. 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . 5 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 Notes and loans receivable, net Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment. cost or other basis Complete Part VI of Schedule D 10a 10b 10c Less: accumulated depreciation Investments - publicly traded securities 11 11 12 Investments other securities See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 73,649 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third

parties, and other liabilities not included on lines 17-24) Complete Part X of

Organizations that follow SFAS 117 (ASC 958), check here

Organizations that do not follow SFAS 117 (ASC 958), check here

30

1,600.

66,605.

25

26

31

32

33

100.

73,549.

73,549.

73,649.

66,605. 68,205.

Form 990 (2014)

Net Assets or Fund Balances

Schedule D

Total liabilities. Add lines 17 through 25

Unrestricted net assets .. Temporanly restricted net assets

Permanently restricted net assets

Total net assets or fund balances

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Paid in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

complete lines 27 through 29, and lines 33 and 34.

26

27

28

30

31

32

33

orm	990 (2014) Feeding America's Children, Inc.	86-0986	348	Pag	_{1e} 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)		<u>,772</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2 1	,764	1,2	<u> 15.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>00.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u> </u>	<u>3,5</u>	<u>49.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<u>-1</u>	5,2	<u>44.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	6(5,6	<u>05.</u>
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
			\rightarrow	Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	-	2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			ļ
	separate basis, consolidated basis, or both:				İ
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both				Í
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u>X</u>	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O.			ĺ
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	igle Audit			1
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audıt			
	or guidite, explain why in Schodulo O and describe any steps taken to undergo such guidits		36		1

Form **990** (2014)

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.

| 2014

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-EZ.

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

Employer identification number

		Feed	ing Americ	a's Children	, Inc			86-0986348					
Part	I	Reason for Public (Charity Status (A	All organizations must co	mplete th	ıs part) Se	e instructions.						
he org	janiza	ation is not a private found											
1	_	church, convention of chi)(A)(i).						
2	□ △	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
з [\neg				ection 170	(b)(1)(A)(ii	i).						
4	\neg	medical research organiza						nter the hospital's name,					
_	crty, and state:												
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in												
_	section 170(b)(1)(A)(iv). (Complete Part II.)												
6 	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).												
7 🖸													
, ,		ection 170(b)(1)(A)(vi). (Co	•	iniai part or its support	ioin a gov	ciriiriciitai	driit or from the ger	ierai public described iri					
8 	\neg			(4)(A)(vi) (Complete Bar	• 11 \								
	\neg	community trust describe											
9 L_		-		•	•		•	es, and gross receipts from					
			•	•				oport from gross investment					
		ncome and unrelated busin		(less section 511 tax) fr	om busine	sses acqu	rea by the organiza	auon arter June 30, 1975.					
	\neg	See section 509(a)(2). (Cor		trakisa saas fii II	.f.a O = :	Al - 55	-NA						
10 -		An organization organized a	•		-								
i1 L		An organization organized a	•	•	•		•	• •					
		nore publicly supported or	-					(3). Check the box in					
	<u> </u> "	nes 11a through 11d that											
а		Type I. A supporting orga	•	•			, , , , ,						
		the supported organization	• •	• ,	a majority	of the direc	ctors or trustees of	the supporting					
		organization. You must c	complete Part IV, Se	ections A and B.									
b		Type II. A supporting orga	anization supervised	or controlled in connec	tion with it	s supporte	ed organization(s), b	y having					
		control or management o	f the supporting orga	anization vested in the s	ame perso	ons that co	ntrol or manage the	e supported					
		organization(s). You mus	t complete Part IV,	Sections A and C.									
С		Type III functionally inte	grated. A supporting	g organization operated	in connec	tion with, a	and functionally inte	grated with,					
		its supported organization	n(s) (see instructions	You must complete	Part IV, Se	ections A,	D, and E.						
d		Type III non-functionally	y integrated. A supp	orting organization opei	ated in co	nnection v	rith its supported or	rganızatıon(s)					
		that is not functionally int	egrated The organiz	zation generally must sa	tisfy a dist	nbution re	quirement and an a	ttentiveness					
		requirement (see instruct	ions) You must con	nplete Part IV, Sections	s A and D,	and Part	V.						
е		Check this box if the orga			•			oe III					
		functionally integrated, or					3 3 3.						
f E	nter	the number of supported of		, , ,	3 - 3 -								
		le the following information	-	ed organization(s)									
		Name of supported	(II) EIN	(III) Type of organization	(IV) Is the o	rganization	(v) Amount of mone	tary (vi) Amount of					
		organization		(described on lines 1-9		n your document?	support (see	other support (see					
				above or IRC section (see instructions))	Yes	No	Instructions)	Instructions)					
				(see instructions))									
					1								
							•						
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Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 Feeding America's Children, Inc. 86-0986348 Page 2

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

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

Sec	tion A. Public Support		<u> </u>				
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and	(8) 2010	(0) 2011	(0) 2012	(0) 2010		
•	membership fees received. (Do not						
	include any "unusual grants ")	1332125.	1686506.	2002449.	2882909	1772515.	9676504.
2	Tax revenues levied for the organ-	1332123.	1000300.	2002113.	20023031	17723131	
~	ization's benefit and either paid to						
	or expended on its behalf						
2	The value of services or facilities			-			
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1332125.	1686506.	2002449.	2882909.	1772515.	9676504.
	The portion of total contributions	1552125.	1000300.	2002117.	2002303.	17720201	30703011
9	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
_	Public support. Subtract line 5 from line 4					1	9676504.
	etion B. Total Support					-	70703011
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	1332125.	1686506.	2002449.	2882909.	1772515.	9676504.
	Gross income from interest,	10021201	200000				<u> </u>
G	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
۵	Net income from unrelated business						
9	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
44	Total support. Add lines 7 through 10				,		9676504.
	Gross receipts from related activities	etc (see instructi	nns)	L	<u> </u>	12	15 0 , 0 0 0 0 0
13				d fourth or fifth to	 ax vear as a sectio		
13	organization, check this box and stop		3 mot, 6000ma, mm	a, 10a1.11, 0. 111.11 to	an your do a coolio		
Se	ction C. Computation of Publ		rcentage				
	Public support percentage for 2014 (column (f))		14	100.00 %
	Public support percentage from 2013	• • • • • • • • • • • • • • • • • • • •	•		•	15	100.00 %
	33 1/3% support test - 2014. If the		-	n line 13, and line	14 is 33 1/3% or n	nore, check this be	
	stop here. The organization qualifies					•	$\triangleright \mathbf{X}$
ŀ	33 1/3% support test - 2013. If the				l line 15 is 33 1/3%	or more, check t	his box
	and stop here. The organization qua						
17:	10% -facts-and-circumstances tes				e 13, 16a, or 16b.	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					3	ightharpoons
,	10% -facts-and-circumstances tes	-	-			17a, and line 15 is	10% or
•	more, and if the organization meets t						
	organization meets the "facts-and-cir						. •
18	Private foundation. If the organization		_				ns \blacktriangleright
		Die iist onook a					or 990-EZ) 2014

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

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

ection A. Public Support	ion, piodeo com					
lendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and	X-7					
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						
are not an unrelated trade or bus-			ļ			
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
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					ļ	
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)						_
ection B. Total Support				1.		
llendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	(a) 2010	(6) 2011	(6) 2012	(d) 2010	(0) 2011	(1) 1014
Amounts from line 6 Da 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						ļ
acquired after June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is regularly carried on						
2 Other income Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.)						
4 First five years. If the Form 990 is for	the organization	'e firet second the	rd fourth or fifth t	tay year as a section	on 501(c)(3) organi	zation
	the organization	i S III St, Second, trii	ra, roarar, or marr	lax year as a section	on our (c)(o) organiz	Lation,
check this box and stop here ection C. Computation of Publi	c Support Pa	ercentage			*.	
					45	
5 Public support percentage for 2014 (li			column (i))		15	
6 Public support percentage from 2013					16	
ection D. Computation of Inves					1 1	
7 Investment income percentage for 20			ne 13, column (f))		17	
8 Investment income percentage from 2					18	
9a 33 1/3% support tests - 2014. If the	organization did	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box ar						►L
b 33 1/3% support tests - 2013. If the						and
b 33 1/3% support tests - 2013. If the	organization and					
line 18 is not more than 33 1/3%, che						

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. D. and E. If you checked 11d of Part I, complete Sections A and D. and complete Part V.)

Sections A, D, and E. If you checked 11d	of Part I, complete Sections A and D, and complete Part V)
Section A. All Supporting Organizations	

No Yes Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain 1 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes." explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2) 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. За b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the 3h organization made the determination. c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below 4a b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations 4b c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document). 5a b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? <u>5c</u> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990) 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990) 8 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. 9a b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. 9b c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9с 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting 10a organizations)? If "Yes," answer (b) below b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to

10b

determine whether the organization had excess business holdings)

		<u>98634</u>	8 Pa	ge 5
Га	rt IV Supporting Organizations (continued)		I I	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c_		
Sec	tion B. Type I Supporting Organizations		T., 1	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			•
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the	i		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instruction	s):		
a	The organization satisfied the Activities Test Complete line 2 below.	-7-		
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see in	nstructions	:}	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	140
a	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify		İ	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	1		
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a	ļ	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b	 	<u> </u>
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	<u> </u>	L

432025 09-17-14

Schedule A (Form 990 or 990-EZ) 2014 Feeding America's Children, Inc. 86-0986348 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 3 4 Add lines 1 through 3 4 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (B) Current Year (A) Pnor Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) a Average monthly value of securities 1a 1b b Average monthly cash balances c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI) 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 035 6 7 Recovenes of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions)

Schedule A (Form 990 or 990 EZ) 2014 Feeding America's Children, Inc. 86-0986348 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions. Distributable amount for 2014 from Section C, line 6 9 Line 8 amount divided by Line 9 amount (i) (iii) (ii) **Excess Distributions Underdistributions** Distributable Section E - Distribution Allocations (see instructions) Pre-2014 **Amount for 2014** Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014. C d e From 2013 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2014 from Section D. a Applied to underdistributions of prior years b Applied to 2014 distributable amount c Remainder. Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) 6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) Excess distributions carryover to 2015. Add lines 3j 8 Breakdown of line 7: h d Excess from 2013

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

Schedule A	(Form 990 or 990-EZ) 2014 Feeding	<u>America's C</u>	<u>Children,</u>	Inc.	86-0986348 Page 8
Part VI	(Form 990 or 990-EZ) 2014 Feeding Supplemental Information. Provided in the control of the contr	de the explanations req	uired by Part II, line	e 10, Part II, line 17a or	17b; and Part III, line 12
	Also complete this part for any additional	information (See instru	ictions)	, ,	
	Also complete this part for any additional	mornation: (Oco motro	01101107		
					
					
			<u> </u>	·-	
			_,,,,,		
			·		
-					
		<u> </u>		-	
					-

SCHEDULE D

(Form 990)

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.lrs.gov/form990.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Inspection

Name	of the organization Feeding America's	Children, Inc.	Employer identification number 86-0986348
Parl		ed Funds or Other Similar Fund	
	organization answered "Yes" to Form 990, Part IV, lin		·
	organization and to to to the control of the contro	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	used funds
	are the organization's property, subject to the organization's	•	Yes No
	Did the organization s property, subject to the organization of th		
	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?	or dollor advisor, or for any other purpos	Yes No
Par		rganization answered "Yes" to Form 990	
	Purpose(s) of conservation easements held by the organizat		T dit Ty mio T
1	Preservation of land for public use (e.g., recreation or		storically important land area
	Protection of natural habitat	· —	rtified historic structure
		[] Fleseivation of a ce	Timed historic structure
_	Preservation of open space	lifted appearation contribution in the form	n of a consequation easement on the last
	Complete lines 2a through 2d if the organization held a qualities of the Assurance	imed conservation contribution in the for	IT OF A CONSERVATION EASEMENT ON THE IAST
	day of the tax year		Held at the End of the Tax Year
	Tabel at the second assessments		
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements	· · · · · · · · · · · · · · · · · · ·	. 2b
	Number of conservation easements on a certified historic st		2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	i 1
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by t	ne organization during the tax
	year >	accoment to located	
	Number of states where property subject to conservation ea		- £
5	Does the organization have a written policy regarding the per		Yes No
_	violations, and enforcement of the conservation easements	_	•
6	Staff and volunteer hours devoted to monitoring, inspecting		
	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about 1730 V(V(X))	ove satisfy the requirements of section 17	
_	and section 170(h)(4)(B)(ii)?		. —
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describe	is the organization's accounting for
Dor	conservation easements t III Organizations Maintaining Collections of	of Art Historical Treasures or	Other Similar Assets
rai	Complete if the organization answered "Yes" to Form		Other Ominar Associs.
	the state of the s		ament and halance about works of art
1a	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex		rance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that desc		and the state of the state of
b	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of p	oublic service, provide the following amounts
	relating to these items:		
	(i) Revenue 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	reasures, or other similar assets for financ	cial gain, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items	
а	Revenue included in Form 990, Part VIII, line 1		. • \$
b	Assets included in Form 990, Part X		\$

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Schedule D (Form 990) 2014

	dule D (Form 990) 2014 Feeding	America's	Chi]	<u>ldren,</u>	Inc.				<u>86348</u>	
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tr	easures, or	<u>Othe</u>	er Simil	ar Asse	ts(continu	ed)
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the	following that a	re a s	gnificant	use of its	collection i	tems
	(check all that apply)									
а	Public exhibition	d	⊢ 🔲 ւ	oan or exc	hange program	s				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	n how th	ey further t	he organization	's exe	mpt purp	ose in Parl	t XIII.	
5	During the year, did the organization solicit or	r receive donations (of art, his	stoncal trea	sures, or other	sımilaı	r assets		_	
	to be sold to raise funds rather than to be ma	aintained as part of t	he orgar	nzation's co	ollection?	<u></u>		<u>. </u>	Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	n answered "Ye	es" to	Form 990), Part IV, I	ine 9, or	
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermed	tiary for o	contribution	ns or other asse	ts not	ıncluded		_	
	on Form 990, Part X?							L	Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f	L		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for e	scrow or c	ustodial accour	nt liabi	irty?	L	」Yes	L No
<u> </u>	If "Yes," explain the arrangement in Part XIII									<u> </u>
Par	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" to Fo	rm 990, Part IV	, line 1	10.		1	
		(a) Current year	(b) P	rior year	(c) Two years t	back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions .									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities								ļ	
	and programs						-			
f	Administrative expenses									
g	End of year balance		<u> </u>						<u> </u>	
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, 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 should	uld equal 100%.								
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administere	d for t	he organ	ization	_	
	by:									Yes No
	(i) unrelated organizations .								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Sched	dule R?					. 3b	
4	Describe in Part XIII the intended uses of the		owment_	funds	_					
Pai	t VI Land, Buildings, and Equipn									
	Complete if the organization answere	d "Yes" to Form 990	D, Part IV	, line 11a. S	See Form 990, F	Part X,	line 10			
	Description of property	(a) Cost or o			t or other		ccumulat	I	(d) Book	value
		basis (invest	ment)	basis	(other)	de	preciation	1		
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment									
	Other									
Tota	Add lines 1a through 1e (Column (d) must e	equal Form 990. Par	t X. colur	nn (B). line	10c.)			>		0.

432052 10-01-14

Schedule D (Form 990) 2014

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	O (Form 990) 2014	Feeding Ame						986348	Page 4
Part XI	Reconciliation of	Revenue per Auc	lited Financial	Statemen	ts Wit	h Revenue per F	Return	•	
	Complete if the organi	zation answered "Yes"	to Form 990, Part	IV, line 12a					
1 Total	I revenue, gains, and oth	er support per audited f	inancial statement	ts			1	1,757,	271.
2 Amo	unts included on line 1 b	ut not on Form 990, Pa	rt VIII, line 12						-
	unrealized gains (losses)				2a				
	ated services and use of	-		ļ	2b		1		
c Reco	ovenes of prior year gran	ts .			2c	·	1 !		
	er (Describe in Part XIII.)				2d		1		
	lines 2a through 2d						2e		0 .
	tract line 2e from line 1			• •			3	1,757,	
	unts included on Form 9	90 Part VIII line 12 hui	t not on line 1.			•			
	stment expenses not inc			1	4a				
	er (Describe in Part XIII.)	loded off form 556, r ar	. • • • • • • • • • • • • • • • • • • •	• 1	4b	15,244.	1		
	lines 4a and 4b	• • • •	• •		_ 4D	13,244	4c	15	244
	l revenue. Add lines 3 an	d An (This must squal F	Sorm 000 Port Llin	. 121			5	1,772	
5 Total Part XII	Reconciliation of	f Expenses per Au	dited Financia	al Stateme	nts Wi	ith Expenses nei	•		, , , , ,
ui (XII	_	zation answered "Yes"			1113 111	itii Expenses pei	Hetai	•••	
				iv, iiile iza				1 761	215
	l expenses and losses pe						1	1,764,	413
	ounts included on line 1 b	•	rt IX, IINė 25:	1	ا ۾ ا				
	ated services and use of	facilities			2a		-		
	r year adjustments				2b		-		
-	er losses .		•		2c		4 1		
	er (Describe in Part XIII.)				2d		- 1		_
e Add	lines 2a through 2d .						2e		0
	tract line 2e from line 1						3	1,764	215
4 Amo	ounts included on Form 9	90, Part IX, line 25, but	not on line 1.		t 1				
a Inve	stment expenses not inc	luded on Form 990, Par	t VIII, line 7b		4a		. I		
b Othe	er (Describe in Part XIII)				4b		. I		
c Add	lines 4a and 4b		•				4c		0
	l expenses Add lines 3 a		Form 990, Part I,	line 18.)			5	1,764	215
Part XII	II Supplemental in	formation.							
	nd 4b, and Part XII, lines								
	XI, Line 4b ance for unce								, 244
				 					
									
				-					

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990. ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Employer identification number Name of the organization 86-0986348 Feeding America's Children, Inc. General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the **United States** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (e) If activity listed in (d) (f) Total (b) Number of (d) Activities conducted in region (a) Region employees, agents, and offices (by type) (e.g., fundraising, program is a program service, expenditures for and services, investments, grants to describe specific type in the region ındependent investments contractors of service(s) in region recipients located in the region) in region in region Central America and 250,000. the Caribbean Program services Humanitarian aid 3 a Sub-total 250,000. 0 b Total from continuation sheets to Part I c Totals (add lines 3a

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

Schedule F (Form 990) 2014

250,000.

and 3b)

Page 2

86-0986348

Feeding America's Children, Inc.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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. Schedule F (Form 990) 2014

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	Humanitarian aid	o		250,000.	Medical equipment 250,000,& supplies	Pair market Value
2 Enter total number of the IRS, or for which	f recipient organization the grantee or couns	ons listed above that are sel has provided a section	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	foreign country,	recognized as tax-e.	xempt by ▶		

30

Schedule F (Form 990) 2014

3 Enter total number of other organizations or entities

Page 3

86-0986348

Feeding America's Children, Inc.

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16
Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2014

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2014
(g) Description of non-cash assistance					Schedu
(f) Amount of non-cash assistance					:
(e) Manner of cash disbursement					
(d) Amount of cash grant					
c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

432073 09-24-14

Sched	ule F (Form 990) 2014 Feeding America's Children, Inc.	86-0986348	Page 4
Part			
1	Was the organization a U.S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	. Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Yes	X No

432074 09-24-14

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Feeding America's Children, Inc.	86-0986348 Page 5
Part V Supplemental Information	
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (acc	counting method; amounts of
investments vs. expenditures per region), Part II, line 1 (accounting method), Part III (accounting n	nethod); and Part III, column (c)
(estimated number of recipients), as applicable. Also complete this part to provide any additional	information
Part I, Line 2:	
The Organization has reviewed and approved all foreign	projects as being
in furtherance of its own exempt purpose and it retains	control and
discretion as to the use of the contributions.	
Part I, line 3:	
Expenditures are valued at Fair market value.	
Gifts-in-Kind are valued and recorded at their estimate	d fair value based
upon the Organization's estimate of the wholesale value	
received for selling the goods in its principal exit ma	rket considering
the goods condition and utility for use at the time the	y are contributed
by the donor using Level 3 inputs. The Organization doe	s not sell donated
Gifts-in-Kind and only distributes the goods for progra	m use.

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.

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

Employer identification number

Schedule I (Form 990) (2014) ဦ 86-0986348 (h) Purpose of grant or assistance X Yes rogram support rogram support rogram support Grants and Other Assistance to Domestic Organizations and Domestic Governments. 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 (f) Method of valuation (book, FMV, appraisal, other) o Ö (e) Amount of non-cash assistance 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. (d) Amount of cash grant 17.620, 8,000, 10,000 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Inc (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Feeding America's Children, 501(c)(3) 501(c)(3) 501(c)(3) Enter total number of other organizations listed in the line 1 table 27-3295358 27-2652141 45-3327957 Part I General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization 1741 W Rose Garden Lane Ste 9 1741 W Rose Garden Lane Ste 9 Kingdom Now International or government Name of the organization Glendale, AZ 85308 Phoenix, AZ 85027 Phoenix, AZ 85027 21208 N 52nd Ave Save the Animals The 3000 club Part II

432101 10-15-14

(f) Description of non-cash assistance 871,620 lbs of fresh produce (e) Method of valuation (book, FMV, appraisal, other) 1,446,888, Fair market value Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. non-perishable food from food banks. The number of recipients assisted is an estimated number based on each recipient taking approximately 12 Direct Clients/Agents are individuals who are given perishable and (d) Amount of non-cash assistance 0. (c) Amount of cash grant (b) Number of recipients 72635 Monitoring 990 and monthly reporting Feeding programs - Direct Clients/Agents (a) Type of grant or assistance Part III, col (B) Part I, Line 2: lbs of food. Schedule I (Form 990) (2014)

35

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Page 2

86-0986348

Feeding America's Children, Inc.

Schedule I (Form 990) (2014)

Part III

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.lrs.gov/form990.

Name of the organization Beedday Smerical a Obildren **Employer identification number**

n	Feeding Amer	ica's	Children,	Inc.		86-0	<u>986</u>	<u>348</u>	
Par	t I Types of Property	(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts report Form 990, Part VII	ed on	(d) Method of de noncash contribu		_	s
1	Art - Works of art		items contributed	romi 990, Part VII	i, lille ig	·			
2	Art - Historical treasures								
3	Art. Frantischel internate								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded				·				
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
• •	trust interests								
12	Securities · Miscellaneous								
13	Qualified conservation contribution								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles		-						
19	Food inventory	X	871,620	1 446 8	888. Fa	air market	va	1116	
20	Drugs and medical supplies	X	1		1000 1000 11000	air market	va	1116	
21	Taxidermy			2307		LLL INGLIEGO			
 22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts				· · · · · · · · · · · · · · · · · · ·				
25	Other ()					•			
26	Other ()								
20 27	Other (
28	Other ()								
<u>20</u> 29	Number of Forms 8283 received by the organi	zation durin	a the tax year for a	contributions					
23	for which the organization completed Form 82		-		29				
	To which the organization completed form oz	.00, i ait iv,	Donee Acknowled	gement [23			Yes	No
30-2	During the year, did the organization receive b	v contributi	on any property re	norted in Part I line	e 1 through	28 that it	ſ	163	110
ooa	must hold for at least three years from the date	-			_				
	exempt purposes for the entire holding period		ai Contribution, and	willon is not requi	ied to be da	50 101	30a		х
h	If "Yes," describe the arrangement in Part II.	• •			•		Sua		
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standar	d contributiv	ns?	31		х
	Does the organization have a gift acceptance	-		-			31		-41
JZd	contributions?	or related 0	iganizations to SU	on, process, or sen	noncasn		32a		х
L	• • • • • • • • • • • • • • • • • • • •		• • •	•		•	SZA		
	If "Yes," describe in Part II	ookuma (s)	for a tupe of arc==	rtu for which coli	n (n) in aba-	kod			
33	If the organization did not report an amount in describe in Part II.	column (c)	ioi a type oi prope	ity for writeri colum	iii (a) is criec	neu,	-		
LHA	For Paperwork Reduction Act Notice, see	the leaters	tions for Form Of	·····		Schedule M	/Form	.000\	(2014)
1/	i or raperwork neuronom Act Notice, See	. เกาะ แบรม นั้ง	,	♥.		Scriedule IVI	VI OF 111	0001	LU 14

432141 08-12-14

11201209 733951 41136

36

2014.04020 Feeding America's Children, 41136__1

Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information
<u>Schedu</u>	le M, Part I, Column (b):
<u>Estima</u>	tes were not used in determining the number of contributions; the
<u>actual</u>	number of contributions is reflected for medical supplies while
the nu	mber of pounds received is reflected for food inventory.
·	
	·
432142 08-12-	-14 Schedule M (Form 990) (20

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Feeding America's Children, Inc.

Employer identification number 86-0986348

Form 990, Part I, Line 1, Description of Organization Mission:
lifesaving emergency food to hungry families throughout the United
States of America and medical supplies to children in need
internationally.
Flower 000 Point VII. Gooding P. 11. 11
Form 990, Part VI, Section B, line 11:
The 990 is reviewed and approved at the next upcoming board meeting.
Form 990, Part VI, Section B, Line 12c:
Compliance is checked annually.
Form 990, Part VI, Section B, Line 15:
The officers' salaries are determined through a compensation study of
similar organizations. Because of the size of the charity, most officers
are volunteers; the President receives a token salary.
Form 990, Part VI, Section C, Line 18:
The Organization makes its Forms 1023 and 990 available for public
inspection 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.