	,			~ / ·		25.0000
· For	" 9 9	30	Return of Organization Exempt From In	come Ta	ax	OMB No 1545-0047
٤.			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (exc	ept private fo	oundations	2018
۰,		5 Ab - T	Do not enter social security numbers on this form as it may be			Open to Public
		f the Treasury nue Service	► Go to www.irs.gov/Form990 for instructions and the latest	information.		Inspection
Α	For the	2018 cale	ndar year, or tax year beginning , 2018, and endi	ng		, 20
В		applicable	C Name of organization World Hunger Ecumenical Arizona Task Force, Inc		D Employe	er identification number
	Address	_	Doing business as WHEAT, World Hunger Education, Advocacy & Training Number and street (or P O box if mail is not delivered to street address) Room/s		F Talanhar	74-2386488
	Name ch Initial ret		,		E Telephor	
H		rn/terminated	City or town, state or province, country, and ZIP or foreign postal code	uite 118		602/955.5076
	Amende		Phoenix, AZ, United States, 85014		G Gross re	ceipts \$ 990,485.00
	Applicati	ion pending	F Name and address of principal officer	H(a) Is this a g	roup return for s	subordinates? Yes No
	_					included? Yes No
<u> </u>		mpt status	✓ 501(c)(3)	\leftarrow		list (see instructions)
<u>7</u>	Website		gerHurts.org		exemption	
	art I	Summ:	✓ Corporation Trust Association Other L Year of forma	ition 1979	M State	of legal domicile AZ
	1		scribe the organization's mission or most significant activities: The m	ission of WH	EAT is to a	educate, advocate
မွ	I .	-	d empower individuals to action in the fight against hunger and poverty.			
Activities & Governance			and to Hand, a fair trade initiative; The Clothes Silo; and Management Train			
Veri			s box $lackbracklacklacklack$ if the organization discontinued its operations or disposed			ts net assets.
පි			of voting members of the governing body (Part VI, line 1a)			11
భ	1		of independent voting members of the governing body (Part VI, line 1b))		11
vitie	1		iber of individuals employed in calendar year 2018 (Part V, line 2a)		5	2
Ç	1		ber of volunteers (estimate if necessary)		6 7a	379
•			ated business taxable income from Form 990-T, line 38		7b	0.00
				Prior Ye		Current Year
٥			ionSand grants (Far VIII, line 1h)	89	7,543.00	642,900.00
nua	9	Program	service revenue (Part VI Gre 2g)		66,515.00	343,675.00
Revenue			nt in Marine 🗗 🔐 🖟 Columpi (A), lines 3, 4, and 7d)		4,140.00	3,910.00
_			enue (Part VIII, column (42) ines 5, 6d, 8c, 9c, 10c, and 11e)		0.00	0.00
	12 13	Cranica	nue—add lines 8 through 1 (must equal Part VIII, column (A), line 12) d similar amounts paid (Part IX, column (A), lines 1-3)	1,10	8,198.00	990,485.00
			paid to or for members (Part IX, column (A), line 4)		0.00	0.00
v)	r	•	ther compensation, employee benefits (Part IX, column (A), lines 5–10)	31	0.00	0.00 292,419.00
nses			nal fundraising fees (Part IX, column (A), line 11e)	J.	0.00	292,419.00
Exper			raising expenses (Part IX, column (D), line 25)		0.00	0.00
ũ	17	Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24e)	78	3,825.00	670,551.00
	l		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1 13	6,608.00	962,970.00
	19	Revenue I	ess expenses. Subtract line 18 from line 12		1,590.00	
ts or				Beginning of Cu	11,590.00 rrent Year	End of Year
Assets or Balances	20	Total asse	ets (Part X, line 16)	Beginning of Cu	11,590.00 rrent Year 14,676.00	End of Year 962,191.00
Net Assets or Fund Balances	20 21	Total asse	ets (Part X, line 16)	Beginning of Cu	1,590.00 rrent Year 4,676.00 0.00	End of Year 962,191.00 0.00
Net Assets or Fund Balances	20 21 22	Total asse Total liabil Net assets	ets (Part X, line 16)	Beginning of Cu	11,590.00 rrent Year 14,676.00	End of Year 962,191.00
Pa Und	20 21 22 rt II	Total asse Total liabil Net assets Signatu ties of penjun	ets (Part X, line 16)	Beginning of Cu 93 93 ments, and to th	1,590.00 rrent Year 14,676.00 0.00 4,676.00	962,191.00 0.00 962,191.00
Pa Und	20 21 22 rt II	Total asse Total liabil Net assets Signatu ties of penjun	ets (Part X, line 16)	Beginning of Cu 93 93 ments, and to th	1,590.00 rrent Year 14,676.00 0.00 4,676.00	End of Year 962,191.00 0.00 962,191.00
Pa Und true	20 21 22 Int II der penalte, correct,	Total asse Total liabil Net assets Signatu ties of penjung, and comple	ets (Part X, line 16)	Beginning of Cu 93 93 ments, and to th	11,590.00 rrent Year 14,676.00 0.00 14,676.00 ne best of my	End of Year 962,191.00 0.00 962,191.00
Pa Und	20 21 22 11 II der penalte, correct,	Total asse Total liabil Net assets Signatu ties of penjung, and comple	ets (Part X, line 16) Intres (Part X, line 26) Is or fund balances. Subtract line 21 from line 20 Inter Block Inter Hat I have examined this return, including accompanying schedules and state the Declaration of preparer (other than officer) is based on all information of which preparer	Beginning of Cu 93 93 ments, and to the r has any knowle	11,590.00 rrent Year 14,676.00 0.00 14,676.00 ne best of my	End of Year 962,191.00 0.00 962,191.00
Und true Sig	20 21 22 11 II der penalte, correct,	Total asset Total liabil Net assets Signation ties of penuin, and complete	ets (Part X, line 16) Intres (Part X, line 26) Is or fund balances. Subtract line 21 from line 20 Inter Block Inter Hat I have examined this return, including accompanying schedules and state the Declaration of preparer (other than officer) is based on all information of which preparer	Beginning of Cu 93 93 ments, and to the r has any knowle	11,590.00 rrent Year 14,676.00 0.00 14,676.00 ne best of my	End of Year 962,191.00 0.00 962,191.00
Und true Sig	20 21 22 Int II der penalt a, correct,	Total asset Total liabil Net assets Signatu ties of perjury, and comple	ets (Part X, line 16) Ities (Part X, line 26) Is or fund balances. Subtract line 21 from line 20 Ire Block If I declare that I have examined this return, including accompanying schedules and state the Declaration of preparer (other than officer) is based on all information of which preparer function of officer I Must Constant Con	Beginning of Cu 93 93 ments, and to the r has any knowle	11,590.00 rrrent Year 14,676.00 0.00 14,676.00 ne best of myedge	End of Year 962,191.00 0.00 962,191.00 y knowledge and belief, it is
Sig Her Pai	20 21 22 Int II der penalt, correct, n	Total asset Total liabil Net assets Signatu ties of perjung, and comple Signat Type of Print/Typi	ets (Part X, line 16) Ities (Part X, line 26) s or fund balances. Subtract line 21 from line 20 Lire Block I, I declare that I have examined this return, including accompanying schedules and state to Declaration of preparer (other than officer) is based on all information of which preparer ture of officer I A Live Subtract line 21 from line 20 Live Block I declare that I have examined this return, including accompanying schedules and state to Declaration of preparer (other than officer) is based on all information of which preparer or print name and title Preparer's signature Da	Beginning of Cu 93 93 ments, and to the reason knowled to the reason knowledge to the reason kn	11,590.00 rrent Year 14,676.00 0.00 14,676.00 the best of my	End of Year 962,191.00 0.00 962,191.00 y knowledge and belief, it is
Sig Her Pai	20 21 22 Int II der penalt, correct,	Total asset Total liabil Net assets Signatu ties of perjung, and comple Signat Type of Print/Typi	ets (Part X, line 16) Ities (Part X, line 26) s or fund balances. Subtract line 21 from line 20 Lire Block 7, I declare that I have examined this return, including accompanying schedules and state to Declaration of preparer (other than officer) is based on all information of which preparer ture of officer And Fee Dollar, Schreday Teasure or print name and title e preparer's name Preparer's signature Da	Beginning of Cu 93 ments, and to the reason has any knowled Date atte	11,590.00 rrrent Year 14,676.00 0.00 14,676.00 ne best of myedge	End of Year 962,191.00 0.00 962,191.00 y knowledge and belief, it is

For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

Cat No 11282Y

Form 99	90 (2018) Page 2
Part	
1	Briefly describe the organization's mission: The mission of WHEAT is to educate, advocate, engage and empower individuals to action in the fight against hunger and poverty. engage and empower individuals to action in the fight against hunger and poverty. WHEAT's major empowerment programs include Hand to Hand, a fair trade initiative; The Clothes Silo; and Management Training and Mentoring.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4 a	(Code: 611430) (Expenses \$ 751,116.00 including grants of \$ 0.00) (Revenue \$ 180,389.00) 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 kinds, free of charge, for book discussions, youth motivation, teaching and more. WHEAT's Training and Mentoring program provides management level training including on-the-job training, workshops, personal and professional development seminars for people who are underemployed or unemployed. This job training gives the participants marketable skill to become gainfully employed. Job Training and Mentoring 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 are low income Arizona residents. WHEAT graduated individuals from Management Training, high school youth in the Youth Leadership Program; provided SNAP Outreach at locations, statewide, and presented lectures, workshops and key notes in 2018.
	(Code: 62411) (Expenses \$ 73,556.00 including grants of \$ 0.00) (Revenue \$ 79,465.00) WHEAT's Clothes Silo provides free, professional clothing to people in need who are entering or re-entering the workforce. The program provides clothing, as well as personal shoppers who give the clients special attention to find just the right outfit for the job interview or first day on the job. The programs, started in 1985, also provide special networking opportunities and additional workshops for th clients throughout the year. The clothing is also available for much-reduced, affordable prices to the public to support the expenses associated with the programs s well as to provide a great source of professional wear for those who have little extra to spend on attire. Recipients of free services are low income Arizona residents; customers come from all walks of life, including those who love to support the program and love a great deal on great clothing, too.
	(Code 62411) (Expenses \$ 39,852.00 including grants of \$ 0.00) (Revenue \$ 83,821.00) The Hand to Hand Project, a fair trade initiative, is another of WHEAT's major empowerment programs. It includes the Fair Trade store, making fairly traded gifts and goods available to the public through purchase while helping the artisans and farmers, locally and globally, become self-sustaining, able to feed, clothe, shelter and educate themselves and their families. Fair trade is a very successful and positive way to fight hunger and poverty, worldwide.
	Other program services (Describe in Schedule O.) (Expenses \$ 7,703.00 including grants of \$ 0.00) (Revenue \$ 0.00)
	Total program service expenses 872 227 00

Form 9	90 (2018)	1 4	1	Page
Part	IV Checklist of Required Schedules			
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	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	▼	
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		1
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? <i>If "Yes," complete Schedule C, Part II</i>	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		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		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		✓
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		✓
ď	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		✓
e	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	11f		✓_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		√
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		√
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	170		<u> </u>
	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 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (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	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Part	Checklist of Required Schedules (continued)		, -	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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			1
b	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b		V
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
_	to defease any tax-exempt bonds?	24c		✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .	24d	<u> </u>	1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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 "Yes," 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		✓
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):		商马	*
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	_	✓
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	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	✓	
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			
	Check if Schedule O contains a response of 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			
b c	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	reportable gaming (gambling) winnings to prize winners?	1c	√	
		Forn	1 990	(2018)

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
_	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		Yes	No
2a	Statements, filed for the calendar year ending with or within the year covered by this return 2a	أبعيد	٠.,٠	·
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	7	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		271	-:]
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
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		✓
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		V
Ь	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	17 4 7	tr `	. \$ {
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		√
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		√
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		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			,
7	gifts were not tax deductible?	6b	. 10	₹
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1.6	* *	2
а	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			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	- 17	أشند	الشب
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		√
f g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		V
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<u> </u>	خند	لـدـ
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		1 3	لنت
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
. b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1
10 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12		- 4	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	, ,	* *	
11	Section 501(c)(12) organizations. Enter	1.		
а	Gross income from members or shareholders	\		-1
b	Gross income from other sources (Do not net amounts due or paid to other sources	:	٠٠,	4.4
40-	against amounts due or received from them)	12a		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	128	ر ۽ _"	•. 1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			'
. а	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.		-	
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		-	1
С	Enter the amount of reserves on hand	44-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		
b 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1-70	-	
15	excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.		- '	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.	<u> </u>		
		Form	1990	(2018)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Se Check if Schedule O contains a response or note to any line in this Part VI	e ins	tructi	ions.
Secti	on A. Governing Body and Management	•		
Occi.	on A. doverning body and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 11	-+		1
Ia	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	.		
L		l		}
b		ļ]
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct	_		١,
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6		<u> </u>
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		1
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following]
а		8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
Écoti	on B. Policies (This Section B requests information about policies not required by the Internal Revenu	-	nde)	
Secti	on b. Folicies (This Section B requests information about policies not required by the internal revenu		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
_	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	.04		<u> </u>
b	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	✓_	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	Ĺ
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			l
		12c	✓	
13	Did the organization have a written whistleblower policy?	13	✓	
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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision?]	
а		15a	1	
b	• • •	15b	✓	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		1	
		16a		√
ь	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	165		لـــا
0		16b		
	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 (1024 or 1024-A if applicable), 990, and 990-T	(Sect	ion 5	₋ 01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	☐ Own website			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inter	est p	olicy	, and
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and reco	ords l	>	
	The Organization: 4000 N 7th St. Ste 118: Phoenix, A7, 85014: Tel: 602/955 5076			

Form	aĝη	(2018)
-criii	220	(2010)

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 Pai								
 Chack it Schadilla () contains a response or note to any line in this Da-	rt \/\							
check if ochequie o contains a response of note to any line in this rai	1 L V II .							1 1

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 no	r any relate	d org	anız			ompe	nsa	ted any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average	box,	unles	Pos neck ss pe	rson	e than our south	n an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individua or directo		Officer	Key employee	Highest compensated employee	, <u>.</u>	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Elaine Groppenbacher Chairperson/Director	11	1	✓					o	0	0
(2) Colleen Boles	1									-
Immediate Past Chairperson/Director		✓	✓					0	0	0
(3) Heather Brown	11									
Vice Chair/Director		✓	✓					0	0	0
(4) Jennifer Nelson	1									
Secretary/Treasurer		✓	✓					0	0	0
(5) Olivia Gonzalez Director	1	1						0	0	0
(6) Gurukirn Kaur Khalsa	1								1	
Director		✓						0	0	0
(7) Kaitlyn Laney	1									
Director		✓						0	0	0
(8) Carolyn Murray	1 1							1		
Director		✓						0	0	0
(9) Roberta Lasın	1									
Director		✓						0	0	0
(10) Marjan Noble	1								ı	
Director		✓						0	0	0
(11) Karen Willard	1									
Director		\	L.					o	0	0
(12)									0	0
(13)										<u>~</u>
(14)									-	

Fart	Section A. Officers, Directors, Trust	iees, Key E	mpio	yees		na r C)	iigne	St C	ompensated E	mpioyees (c	ontir	nuea)	-
	(A) Name and title	(B) Average	box,	unles	Pos neck ss pe	more more	than o	n an	(D) Reportable	(E)		(F) Estimated	
		hours per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	a Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation related organization (W-2/1099-MI	ıs	amount of other compensation from the organization and related organizations	
	amera Zivic,	40+	1		√	1	\		82.750.00				_
(46)	tive Director/CEO		•		•	•			83,750.00		0		0
/17\	<u> </u>											-	_
(18)												•	-
(19)					_		-						-
(20)													_
(21)													
(22)													
(23)													
(24)													
(25)													_
1b c	Sub-total	VII, Sectio		•	•			A	83,750.00 0		0		0
d_ 2	Total (add lines 1b and 1c) Total number of individuals (including but reportable compensation from the organi	not limited			lıst	ed a	above	e) w	ho received me		0 0,00		0
3	Did the organization list any former of employee on line 1a? If "Yes," complete s	ficer, direc	tor, c	r tri	uste <i>ındı</i>	ee,	key e	mp	loyee, or high	est compen	sate	Yes No	Ĭ
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep greater that	oortal an \$1	ole o 50,0	com 000	nper 12 //	satio "Ye:	n ai s,"	nd other comp complete Sch	ensation from	m th suc	h 4	
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or indiv	/idua	5 √	Ī
	on B. Independent Contractors											-	_
1	Complete this table for your five highest compensation from the organization. Repyear.	-											_
	(A) Name and business add	ress							(B) Description of se	ervices		(C) Compensation	_
													_
													_
													_
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who			

Far	t VIII	Check if Schedule O contains		nanca ar nata t	a any lina in thia	Doet VIII		
	****	Check if Schedule O Contains	a ies	porise of flote to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ats ots	1a	Federated campaigns .	1a				1	
ar ar	b	Membership dues	1b					
s, C Am	С	Fundraising events	1c	·				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations	1d					
s, (imi	е	Government grants (contributions)	1e	194,000.00				
rtior er S	f	All other contributions, gifts, grants,						
έξ		and similar amounts not included above	1f	375,355.00				
ig or	g	Noncash contributions included in lines 1a	–1f \$	73,545.00				
	h	Total. Add lines 1a-1f	<u>.</u>	<u> ▶</u>	642,900.00		<u> </u>	
Program Service Revenue				Business Code				
eve	2a	Education		611430	180,389.00	180,389.00	0	
e. Ec	b	Workwear		62411	79,465.00	79,465.00		
Ž.	C	Fair Trade Initiative		62411	83,821.00	83, 821.00		
S	d							
ran	e	All about the second to the sec						
jo B	1	All other program service revening Total. Add lines 2a-2f.	he	•	242.075.00			
—	3	Investment income (including	divid		343,675.00			
	"	and other similar amounts) .		•	3,910.00	3,910.00		
	4	Income from investment of tax-exe	-		3,910.00	3,910.00	0	
	5	Royalties	mpt b	>nd proceeds ►	0		0	
		(i) Rea	.	(II) Personal		<u> </u>		`
	6a	Gross rents .	0	0				
	b	Less rental expenses	0	0				
	С	Rental income or (loss)	0	0				
	d	Net rental income or (loss)		▶	0	0	0	(
	7a	Gross amount from sales of (i) Securit	ies	(ii) Other				
		assets other than inventory	0	0				
	b	Less: cost or other basis						
		and sales expenses	0	O				
	С	Gain or (loss) .	0	0				
	d	Net gain or (loss)		▶	0	0	0	
enne/	8a	Gross income from fundraising events (not including \$	0					
Other Rev		of contributions reported on line 1 See Part IV, line 18	c) . a	o				
뚔	b	Less. direct expenses	. b	0				
		Net income or (loss) from fundra		events . 🕨	0		0	C
	9a	Gross income from gaming activ						
		See Part IV, line 19		0				
		Less: direct expenses		0				
		Net income or (loss) from gamin		vities . ►	0	0	0	
	10a	Gross sales of inventory,			1			
		returns and allowances		0				
		Less: cost of goods sold	. b					
	С	Net income or (loss) from sales	of inve		0	0	0	0
		Miscellaneous Revenue		Business Code				
	11a	none						
	b							
	C	All other revenue						! -
	d	All other revenue	•		0)	0	0	C
	e 12	Total. Add lines 11a–11d . Total revenue. See instructions			0	000 605 60		
	'-	. Juli revenue. Jee manuchons	•		990,485.00	990,485.00	0	O

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(1) organizations must con			s must complete col	umn (A).
	Check if Schedule O contains a respon	se or note to any lin		<u> </u>	<u></u> <u></u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0	0		. !
4	Benefits paid to or for members .	0	0		
5	Compensation of current officers, directors, trustees, and key employees	22.750.00	05 744 00	47 504 00	502.00
•		83,750.00	65,744.00	17,504.00	502.00
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		0	0	r
7	Other salaries and wages	208,669.00	180,707.00	27,127.00	835.00
8	Pension plan accruals and contributions (include	200,000:00	100//07/00		
	section 401(k) and 403(b) employer contributions)	o	0	o	C
9	Other employee benefits	5,500.00	5,500.00	0	C
10	Payroll taxes	15,650.00	14,867.00	783.00	O
11	Fees for services (non-employees)				
а	Management	0	0	0	. 0
b	Legal	0	. 0	0	C
С	Accounting	500.00	452.00	48.00	
d	Lobbying	0	0	0	<u></u>
e	Professional fundraising services See Part IV, line 17	0			<u></u>
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column	0	0	0	0
g	(A) amount, list line 11g expenses on Schedule O)		o	0	•
12	Advertising and promotion	27,500.00	27,500.00	0	
13	Office expenses	9,040.00	9,000.00	40.00	
14	Information technology	27,512.00	11,390.00	8,759.00	7,363.00
15	Royalties	0	0	0	0
16	Occupancy	85,325.00	60,785.00	24,540.00	
17	Travel	29,992.00	27,350.00	2,642.00	0
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	1,200.00	1,200.00	0	
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22 23	Depreciation, depletion, and amortization . Insurance	6,000.00	5,400.00	600.00	0
24	Other expenses. Itemize expenses not covered	8,000.00	3,400.00	000.00	
24	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	Volunteer Support	7,703.00	7,703.00	0	0
b	Specific assistance to Individuals	289,450.00	289,450.00	0	0
C	Education tools and equipment	92,891.00	92,891.00	0	0
d	Education supplies	72,288.00	72,288.00	0	
е	All other expenses	<u> </u>		0	0
25	Total functional expenses. Add lines 1 through 24e	962,970.00	872,227.00	82,043.00	8,700.00
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 following SOP 98-2 (ASC 958-720)				
	· · · · · · · · · · · · · · · · · · ·	<u></u>			

Part X Balance Sheet

	0
2 Savings and temporary cash investments	772.00
3 Pledges and grants receivable, net	
4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0
Complete Part II of Schedule L	0
6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	0
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	
7 Notes and loans receivable, net	
	0
8 Inventories for sale or use	19.00
9 Prepaid expenses and deferred charges	
10a Land, buildings, and equipment. cost or	
other basis. Complete Part VI of Schedule D 10a 0	
b Less: accumulated depreciation 10b 0 10c	0
11 Investments—publicly traded securities	0
12 Investments—other securities See Part IV, line 11	0
13 Investments—program-related. See Part IV, line 11	0
14 Intangible assets	0
15 Other assets See Part IV, line 11	0
	91.00
17 Accounts payable and accrued expenses	0
18 Grants payable	0
19 Deferred revenue	0
20 Tax-exempt bond liabilities	0
21 Escrow or custodial account liability Complete Part IV of Schedule D . 0 21	0
22 Loans and other payables to current and former officers, directors,	ĺ
trustees, key employees, highest compensated employees, and	
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	0
20 Secured mortgages and notes payable to difference third parties	0
24 Unsecured notes and loans payable to unrelated third parties	0
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 Schedule D	
1 0 25	<u> </u>
26 Total liabilities. Add lines 17 through 25	0
complete lines 27 through 29, and lines 33 and 34.	
<u>5</u> 27 Unrestricted net assets	31.00
28 Temporarily restricted net assets	0
29 Permanently restricted net assets	0
Complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	
2 30 Capital stock or trust principal, or current funds	
31 Paid-in or capital surplus, or land, building, or equipment fund	
32 Retained earnings, endowment, accumulated income, or other funds . 32	
	1.00
34 Total liabilities and net assets/fund balances	

Par	t XI Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1	990,485.00
2	Total expenses (must equal Part IX, column (A), line 25)	2	962,970.00
3	Revenue less expenses Subtract line 2 from line 1	3	27,515.00
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	934,676.00
5	Net unrealized gains (losses) on investments	5	0
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		
	33, column (B))	10	962,191.00
Part	XII Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII	· · ·	
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," ex	olain in	Yes No
_	Schedule O.	•	311
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a 🗸
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	olled or	[5] AT [1]
	reviewed on a separate basis, consolidated basis, or both:		
L	Separate basis Consolidated basis Both consolidated and separate basis		2b /
ь	Were the organization's financial statements audited by an independent accountant?		2D V
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both	on a	
	Separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis		
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	.oro.obt	
С	of the audit, review, or compilation of its financial statements and selection of an independent account		2c ✓
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plaın ın	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth in	3a ✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	ıdıts.	3b ✓
			Form 990 (2018)

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.

Attach to Form 990 or Form 990-EZ.

nexempt charitable trust. 2018

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Tanie	of the organization					Employer identificatio	ii fiumber
Norle	l Hunger Ecumenical Arizona Task F	orce Inc				74-23	86488
Pai	t I Reason for Public Cha	rity Status (All	organizations mus	t comple	ete this p	art.) See instruction	ons.
The o	organization is not a private founda	ation because it i	is: (For lines 1 through	12, che	ck only o	ne box.)	\sim
1	A church, convention of church						/\`/
2	A school described in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990	or 990-E	Z).)	() /
3	A hospital or a cooperative ho						\cup \cap
4	A medical research organization	on operated in c	onjunction with a hos	pıtal desc	cribed in s	section 170(b)(1)(A)	(iii). Enter the
	hospital's name, city, and stat	e:					
5	An organization operated for	the benefit of a	college or university	owned c	or operate	ed by a government	tal unit described in
	section 170(b)(1)(A)(iv). (Com	plete Part II)					
6	☐ A federal, state, or local gover	nment or aovern	mental unit described	d in secti e	on 170(b))(1)(A)(v).	
7	An organization that normally						n the general public
	described in section 170(b)(1)			•	Ū		,
8	☐ A community trust described i	n section 170(b)(1)(A)(vi). (Complete	Part II)			•
	☐ An agricultural research organ				erated in	conjunction with a	land-grant college
_	or university or a non-land-gra						
	university:			,		,	J
10	An organization that normally	receives: (1) mor	e than 331/3% of its s	upport fro	om contri	butions, membershi	p fees, and gross
	receipts from activities related	to its exempt fu	inctions—subject to c	ertain exc	ceptions.	and (2) no more tha	in 331/3% of its
	support from gross investmen acquired by the organization a	t income and un	related business taxa	DIE INCOM	1e (less si molete Di	ection 511 tax) from	businesses
11	An organization organized and		-		-		
	☐ An organization organized and	•		•			rn, out the purposes
12	of one or more publicly support						
	Check the box in lines 12a thro	•		•			
_	☐ Type I. A supporting organ	•	• • • • • • • • • • • • • • • • • • • •		-	· ·	=
а	the supported organization	•		•			
	supporting organization. Y					inc directors or trust	eccs of the
_	☐ Type II. A supporting orga	-				supported organizati	ion(s) by boying
b	control or management of						
	organization(s). You must				, persons	that control of man	age the supported
_	☐ Type III functionally integ	=			onnectio	n with and functions	ally integrated with
С	its supported organization(any integrated with,
							orted ergenization(s)
d	Type III non-functionally integrated that is not functionally integrated the functional integrated that it is not functionally integrated	•					-
	requirement (see instruction	•	-	-		· ·	iu an attentiveness
_	<u> </u>	•	•				- 0 T 00
e	Check this box if the organ functionally integrated, or						е II, Туре III
£	• •	• •			organizat	iori.	
t -	Enter the number of supported or Provide the following information						
9			(iii) Type of organization	1	organization	(v) Amount of monetary	(vi) Amount of
	(i) Name of supported organization	(II) EIN	(described on lines 1–10		ur governing	support (see	other support (see
			above (see instructions))	docu	ment?	instructions)	instructions)
		ļ		Yes	No		
			<u> </u>		110		_
A)							
				 			
B)				ŀ			
				_			
C)							
D)				1			
 E)							
-, 							

Schedule A (Form 990 or 990-EZ) 2018 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.) Part II Section A. Public Support

	capport						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not			,		j .	
	include any "unusual grants.")	650,194.00	483,367 00	544,615.00	897,543.00	642,900.00	3,218,619.00
2	Tax revenues levied for the			<i>'</i> .	,		
	organization's benefit and either paid	,		' '	'		
	to or expended on its behalf) <u> </u>	00	0	o	0
3	The value of services or facilities	,]]] .	
	furnished by a governmental unit to the					· `	
	organization without charge		0	0	0	0	0
4_	Total. Add lines 1.through 3	650,194.00	483,367.00	544,615.00	~897,543.00	642,900.00	3,218,619.00
5	The portion of total contributions by	医石头	Mary Property	即於明宗文	邓开州和最	SACRET FILE	
	each person (other than a	ALC: NAME	eg co resunci	THE PARTY OF	and Alteriation	FULL	
	governmental unit or publicly	Sur	高速速度	in the same		123/1976	
	supported organization) included on	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CANOTICE	LINE THE	S. Warren	4	•
•	line 1 that exceeds 2% of the amount	500 17 17 17	BULL TOUR ST		5 4 4 4 4 4 4		
	shown on line 11, column (f)	连进。中华	437.000	是江河岭河	的形式的	THE PROPERTY.	0
_6		THE WAY	THE REAL PROPERTY.	图 2000年	TWANT TAN	定在在於四點	3,218,619.00
	on B. Total Support	·				,	
Caler	dar year (or fiscal year beginning in)	' (a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4 ·	650,194.00	483,367.00	544,615.00	897,543.00	642,900.00	3,218,619.00
8	Gross income from interest, dividends,		ļ	1.	•		
	payments received on securities loans,			[]			,
	rents, royalties, and income from					, ,	
	sımılar sources	1,234.00	1,315.00	3,616.00	4,140.00	3,910.00	14,215.00
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on	0	0	0	0	0	0
10	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)	232,990.00					1,875,946.00
11				SAPERATOR OF	E o contract	स्यक्रम्भ	5,108,780.00
12	Gross receipts from related activities, etc	•				12	0
13	First five years. If the Form 990 is for the	_			-		
	organization, check this box and stop he			<u> </u>	<u> </u>		· · ► []
	on C. Computation of Public Suppor						
14	Public support percentage for 2018 (line 6					14	63 %_
15	Public support percentage from 2017 Sch					15	64 %
16a	331/3% support test—2018. If the organi				id line 14 is 33	31/3% or more,	
	box and stop here. The organization qua	-		-			, 🕨 🛭
b	331/3% support test—2017. If the organi						ore, check
	this box and stop here. The organization	•	• • • •	•			. ▶ 📙
17a	10%-facts-and-circumstances test—20						
	10% or more, and if the organization me						
	Part VI how the organization meets the "	tacts-and-circ	umstances" te	st The organiz	tation qualifies	as a publicly	supported
	organization						. ▶ ⊔
b	10%-facts-and-circumstances test – 20	•			•		•
	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization in	neets the "tact	is-and-circums	stances" test.	i ne organizatio	on qualifies as	a publicly
40	supported organization						🏲 📋
18	Private foundation. If the organization di					ctnis box and s	see
	instructions						. 📂 🗆

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

(Complete only if you checked the box on line 10 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.)

Cast	ion A. Public Support	under the te	esis listed bei	ow, piease co	ompiete Part	11.)	
		(a) 2014	(b) 2015	(a) 2016	(d) 2017	, 	(f) Total
Caler 1	ndar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
'	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			1	/		
3	organization's tax-exempt purpose . Gross receipts from activities that are not an				· · · · · · · · · · · · · · · · · · ·		
3	unrelated trade or business under section 513				/		
4		-			/		
4	Tax revenues levied for the organization's benefit and either paid to						
	or expended on its behalf			ļ	/		
_	•				 ,′ - · · · · · · · · · · · · · · · · · · 		
5	The value of services or facilities				//		
	furnished by a governmental unit to the organization without charge			,	ľ		
_	_			/			
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3		+	 	 		
10	received from disqualified persons .			/			
t.			1	/			
D	Amounts included on lines 2 and 3 received from other than disqualified		1	/			
	persons that exceed the greater of \$5,000			/			
	or 1% of the amount on line 13 for the year			/			
С	Add lines 7a and 7b		·	 /	-		
8	Public support. (Subtract line 7c from		1	/			
Ŭ	line 6.)		}	ľ			
Secti	on B. Total Support		·	L			
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015/	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6		/		(-7,	(0, 0010	(4) 1010
10a	Gross income from interest, dividends,	<u> </u>	/				
	payments received on securities loans, rents,		/		,		
	royalties, and income from similar sources .		/				
b	Unrelated business taxable income (less		/				
	section 511 taxes) from businesses		/ :		i		
	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 carried on		<i>l</i>				
12	Other income Do not include gain or						
	loss from the sale of capital assets	/					
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,	1					
	and 12)						
14	First five years. If the Form 990 is for the						
	organization, check this box and stop her				· · · · ·		🟲 📋
	on C. Computation of Public Suppor			10		145	
15 16	Public support percentage for 2018 (line 8					15	<u>%</u>
16 Section	Public support percentage from 2017 Schon D. Computation of Investment Inc				<u> </u>	16	<u>%</u>
17	Investment income percentage for 2018 (I			v line 13 colin	mn (fl)	17	
17 18	Investment income percentage for 2018 (investment income percentage from 2017				mn (T))	18	<u> </u>
	33 ¹ / ₃ % support tests—2018. If the organi						
19a	17 is not more than 33½%, check this box						
b	33 ¹ / ₃ % support tests—2017. If the organiz		-			•	_
U	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization did		_		•		_
	ato roundadonn in the organization die	io. cricch a			HOUR HIS DUX (ふいい うじじ いろいひし	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete F	art V	/ .)	
Sect	ion A. All Supporting Organizations			
			Yes	No
1	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		ļ	
_	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).	2		ļ <u>.</u>
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
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 organization made the determination.	3b		
С	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.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b 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	ļ	
С	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		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	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 or 990-EZ).	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 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) 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 section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a	, 1	·T.
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	12	4 .	

determine whether the organization had excess business holdings.)

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	[ĺ	
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		<u> </u>
	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	<u> </u>	<u> </u>
Secti	on B. Type I Supporting Organizations			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		ļ	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			l
	controlled the organization's activities of the organization had more than one supported organization,			ĺ '
	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			ļ
_		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 carried out the purposes of the supported organization(s) that operated,		!	
	supervised, or controlled the supporting organization.	2		ļi
Sacti	on C. Type II Supporting Organizations			
Secu	on o. Type it 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		162	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		į	į i
	or management of the supporting organization was vested in the same persons that controlled or managed			:
	the supported organization(s).	1		
Secti	on D. All 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			1
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1		1 }
	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		
Section	on 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 in	nstruc	tions	s)
а	The organization satisfied the Activities Test. Complete line 2 below.			
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 (s			<u> </u>
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			,
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		- 1	
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			ł
	that these activities constituted substantially all of its activities			
	·	2a		,
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 organization's available in (a) the organization's supported organization (s) would have been 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		ļ	ł
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
		2b	\dashv	
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>	, 1		i
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	<u> </u>		
	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		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A-Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
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		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year).		0	
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
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		
3 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		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7	<u> </u>	
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount		-	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	4=	
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	-	
4 Enter greater of line 2 or line 3	4	1	
5 Income tax imposed in prior year	5	 	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		-	
emergency temporary reduction (see instructions).	6	•	
7 Check here if the current year is the organization's first as a non-functionall	y int	egrated Type III supporting	organization (see
instructions)	-		• • •

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continued)			
Sect	ion D—Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish	exempt purposes				
2	((empt purposes of suppo	orted			
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purp	ooses of supported orga	inizations	_		
	Amounts paid to acquire exempt-use assets					
5	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 whic (provide details in Part VI) See instructions.	th the organization is res	sponsive			
9	Distributable amount for 2018 from Section C, line 6					
10	Line 8 amount divided by line 9 amount					
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018		
1	Distributable amount for 2018 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2018					
а	From 2013					
b	······································					
С	c From 2015					
d	From 2016					
е	From 2017			<u>.</u>		
f	Total of lines 3a through e					
g	Applied to underdistributions of prior years					
<u>h</u>	Applied to 2018 distributable amount					
i_	Carryover from 2013 not applied (see instructions)					
j_	Remainder Subtract lines 3g, 3h, and 3i from 3f.]		
4	Distributions for 2018 from					
	Section D, line 7:					
<u>a</u>	Applied to underdistributions of prior years]		
b	Applied to 2018 distributable amount					
С	Remainder. Subtract lines 4a and 4b from 4.					
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions					
6	Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI. See instructions.					
7	Excess distributions carryover to 2019. Add lines 3j and 4c					
8	Breakdown of line 7:					
а	Excess from 2014					
b	Excess from 2015					
	Excess from 2016 .					
	Excess from 2017					
e	Excess from 2018					

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information (See instructions.)
	,
	•
	,
	······································
	······································

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

World	Hunger Ecumenical Arizona Task Force Inc		74-2386488
Pai			ds or Accounts.
	Complete if the organization answered	,	T
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor funds are the organization's property, subject to the	<u>-</u>	
•		-	
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		· · · · · · · Yes · No
Par			i les 🗀 165
1 (31	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the		
•	Preservation of land for public use (e.g., recrea		f a historically important land area
	Protection of natural habitat		a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation easement	s	2b
С	Number of conservation easements on a certified h		
d	Number of conservation easements included in		1 1
_	· ·		
3	Number of conservation easements modified, trans	sterred, released, extinguished, or tern	ninated by the organization during the
	tax year ►	nuction appearant to located .	
4 5	Number of states where property subject to conser Does the organization have a written policy reg		nootion handling of
5	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspec		
U	Start and volunteer hours devoted to monitoring, inspec	sting, nariding of violations, and emoreing	g conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	a handling of violations, and enforcing a	conservation easements during the year
•	▶ \$	g,gg .	
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · □ Yes □ No
9	In Part XIII, describe how the organization reports of	conservation easements in its revenue	and expense statement, and
	balance sheet, and include, if applicable, the text of	f the footnote to the organization's fin	ancial statements that describes the
	organization's accounting for conservation easeme		
Part			Other Similar Assets.
	Complete if the organization answered '		
1a	If the organization elected, as permitted under SFA		
	works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the fo		
Б	If the organization elected, as permitted under Si works of art, historical treasures, or other similar		
	public service, provide the following amounts relati		deation, or research in furtherance of
	(i) Revenue included on Form 990, Part VIII, line 1		▶ €
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art,		
_	following amounts required to be reported under Si		- · · · · · · · · · · · · · · · · · · ·
а	Revenue included on Form 990, Part VIII, line 1 .	· · · · · · · · · · · · · · · · · · ·	
	Assets included in Form 990, Part X		

Par	Organizations Maintaining							
3	Using the organization's acquisition, collection items (check all that apply)		ther reco	rds, chec	k any of the	following	g that are a sig	gnificant use of it
а	☐ Public exhibition		d	☐ Loan	or exchange	e progran	าร	
b	☐ Scholarly research		е	Other	r			•••••
С	☐ Preservation for future generation							
4	Provide a description of the organiza	tion's collections	and expla	ain how t	hey further t	he organ	izatıon's exem	pt purpose in Pai
	XIII.							
5	During the year, did the organization	solicit or receive	donation	s of art,	historical tre	easures, d	or other similai	r
	assets to be sold to raise funds rathe	r than to be mainta	ained as i	part of the	e organizatio	n's collec	ction?	☐ Yes ☐ No
Par	IV Escrow and Custodial Arr							
	Complete if the organization 990, Part X, line 21.	n answered "Yes	" on For	m 990, I	Part IV, line	9, or rep	oorted an am	ount on Form
1a	Is the organization an agent, trustee	, custodian or oth	ner intern	nediary fo	or contributi	ons or ot	her assets not	t
	included on Form 990, Part X?							☐ Yes ☐ No
b	If "Yes," explain the arrangement in F	art XIII and comple	ete the fo	llowing to	able:			
							Am	nount
С	Beginning balance					1c		
d	Additions during the year .					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amou	nt on Form 990, P	art X, line	21, for e	scrow or cu	stodial ac	count liability?	Yes No
_ b	If "Yes," explain the arrangement in F	art XIII. Check her	e if the e	kplanatio	n has been p	provided o	on Part XIII .	
Par	t V Endowment Funds.				-		•	-
	Complete if the organization	n answered "Yes	" on For	m <u>9</u> 90, F	Part IV, line			
		(a) Current year	(b) Pri	or year	(c) Two years	back (d)	Three years back	(e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
e	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of	the current year en	nd balanc	e (line 1a	. column (a)	held as		<u> </u>
a	Board designated or quasi-endowme			- ((=,,			
b	Permanent endowment ▶	%						
c	Temporarily restricted endowment ▶							
•	The percentages on lines 2a, 2b, and	2c should equal 1	00%					
За	Are there endowment funds not in th	•		zation tha	at are held a	nd admir	stered for the	
	organization by							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	if "Yes" on line 3a(ii), are the related of	roanizations listed	as requi	red on Sc	hedule R?			3b
4	Describe in Part XIII the intended uses							
Part								
eir	Complete if the organization		" on For	m 990 F	Part IV line	11a Sec	Form 990 F	Part X line 10
	Description of property	(a) Cost or ot			r other basis		mulated	(d) Book value
	Description of property	(investme			ther)	depre		(d) Book value
	Land			<u></u>		· · · · · · · ·		
1a	Land				+			 -
b	· ·							
ر C	Leasehold improvements .							
d	Equipment	.		···				 -
Takal	Other	nuet equal Farm Of	00 00-4	1 001:	(P) line 10-	. 1		
rotal.	Add lines ta infoudit le (Column (a) n	nust equal Form 95	ou. rail?	. colullin	וווווווווווווווווווווווווווווווווווווו		▶	

, Part VII	Investments—Other Securities		une OOO David IV I Iva	- 11b Caa Faun	000 Ded V less 10
	Complete if the organization ar				
	(a) Description of security or categ (including name of security)	ory	(b) Book value		thod of valuation I-of-year market value
(1) Financia	derivatives		-		
(2) Closely-I	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					·-
(E)					_
(F)					
(G)				-	
(H)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	-			
Part VIII	Investments - Program Relat		rm 000 Part IV June	110 Soo Form	2000 Bart V June 12
	Complete if the organization ar (a) Description of investment	iswered tes on For	(b) Book value		thod of valuation
				Cost or end	-of-year market value
(1)					
(2)					
_(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 13) ▶	<u> </u>			***
Part IX	Other Assets.				
	Complete if the organization an		rm 990, Part IV, line	11d. See Form	
		(a) Description			(b) Book value
(1)					
(2)					
(3)					
_(4)				-	
(5)					
_(6)					
_(7)					
(8)					
(9)	(h)	and (D) line 15)			
	mn (b) must equal Form 990, Part X,	coi (B) line 15)	· · · · · · ·	<u> ▶</u>	
Part X	Other Liabilities.		000 David IV Iv-	44 445 0-	. F 000 D+V
	Complete if the organization an	swered "Yes" on For	m 990, Part IV, line	e i i e or i i i . See	e Form 990, Part X,
	line 25.				
1.	(a) Description of liability	(b) Book value			
(1) Federal in	come taxes				
(2)					
(3)					
(4)		-			
(5)					
(6)					
(7)		1			
(8)					
(9)					
	n) must equal Form 990, Part X, col. (B) line 25) 🕨				
	uncertain tax positions In Part XIII, pro				
organization's	s liability for uncertain tax positions unde	er FIN 48 (ASC 740). Che	ck here if the text of th	e tootnote has bee	n provided in Part XIII 🔝

Part		Return.
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements	1 990 485 00
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 990,485.00
a	Net unrealized gains (losses) on investments 2a 0	
b	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIII.)	•
e	Add lines 2a through 2d	2e 0
3	Subtract line 2e from line 1	3 990,485.00
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0	
b	Other (Describe in Part XIII)	
С	Add lines 4a and 4b	4c 0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5 990,485.00
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements	1 962,970.00
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	
С	Other losses	
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e 0
3	Subtract line 2e from line 1	3 962,970.00
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	
С	Add lines 4a and 4b	4c 0
5 Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 962,970.00
?; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional info	ormation.
		·

Schedule D (Fo	m 990) 2018	Page 5
Part XIII	Supplemental Information (continued)	
• • • • • • • • • • • • • • • • • • • •		······································
		•••••
•••••		
		••••
•••••		•••••
·		
		•••••••••••••••

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/rorms50 for instructions and the latest information

World Hunger Ecumenical Arizona Task Force Inc 74-2386488 Part I Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art - Works of art . . 2 Art - Historical treasures . . Art - Fractional interests . 3 4 Books and publications . . 5 Clothing and household goods 73,545.00 50% of retail price we sell for 6 Cars and other vehicles . . 7 Boats and planes . 8 Intellectual property 9 Securities-Publicly traded 10 Securities—Closely held stock Securities-Partnership, LLC, 11 or trust interests 12 Securities - Miscellaneous Qualified conservation contribution-Historic structures Qualified conservation 14 contribution—Other . . 15 Real estate - Residential . . 16 Real estate - Commercial 17 Real estate-Other . . . Collectibles . . . 18 19 Food inventory 20 Drugs and medical supplies . . 21 Taxidermy 22 Historical artifacts . . . 23 Scientific specimens . . 24 Archeological artifacts 25 Other ► (_ 26 27 Other ► (_____) 28 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required

	to be used for exempt purposes for the entire holding period?	30a		✓
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard	[
	contributions?	31	✓	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		1
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked	ļ ļ		

describe in Part II.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2018

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer identification number

74 0000400

World Hunger Ecumenical Arizona Task Force Inc	/4-2386488
Form 990 Part III Program Service Accomplishments, Other program services: Expenses related to Vo	olunteer Support Services
Part VI. Governance, Management, and Disclosure: Section B. Policies	••
Line 11b The Organization's accountant and treasurer review the completed Form 990 with the full be	oard at a regularly scheduled
board meeting. The board then votes to accept or reject the completed Form 990; the Form 990 is NO	T signed and sent int 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 a conflict of	interest statement, annually, through
the Organization's written Conflict of Interest policy	
Line 15a/b: The Organization's board determines the compensation of its executive director and oth	er staff based on research and
profiles done of other similar organizations and trends by the Human Resource Committee.	
Line 19: The Organization's governing documents, conflict of interest policy and financial statement	ts are available to the public through
written and verbal requests; by email and on website Guidestar.org.	
	······
<u></u>	
	······································

Schedule O (Form 990 or 990-EZ) (2018)				
Name of the organization	Employer identification number			
World Hunger Ecumenical Arizona Task Force Inc	74-2386488			
3				
	-			
	·			
	••••••			
	······································			
	•			