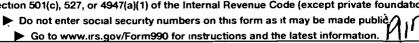


Form **990** (Rev January 2020)

Return of Organization Exempt From Income Tax

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





		ent of the levenue :	Treasury Service	► Go to	www.irs.gov/	Form990 for instru	ctions and	the late:	st information	<u>. Mi 0</u>	Inspection
_				ar year, or tax year be			-	ending		7 1	
В	Chec			forganization				_	D Emplo	yer identific	ation number
		cable		THE HUNGER							
	jch	ddress nange	FKA	FEED THE HUI	NGER FOU	NDATION					
	<u>. </u>	eme nange	Doing bi	usiness as					26-	<u> 297509</u>	93
	re	itial iturn		and street (or P 0 box				Room/suit		one number	
	re	nal turn/		MONTGOMERY :					415	<u>5-793-2</u>	
	at	rmin- ed		own, state or province,			code		G Gross red	eipts \$	1,554,829.
Ļ	re	mended turn		FRANCISCO, (H(a) Is thi	s a group re	
L	tic	pplica- on ending		nd address of principal	officer PAT	RICIA CHAN	G		for su	ibordinates'	= =
_				AS C ABOVE					1	subordinates inc	
<u></u>						(insert no)	4947(a)(1)	5		-	list (see instructions)
_				FEED-HUNGER		sociation Othe		1 1. 1			n number State of legal domicile: CA
_	art		ganization. L	X Corporation	Trust As	sociation Othe		IL YE	ar or tormation.	2000 M	State of regal domicile CA
11.	T			e the organization's m		overefreed activities	ਾਮਦ ਨੇ	ORGAN	TZATION	STRIV	/ES ΤΟ
_ :	3 1	ı Dr⊪ ΣΑΤ	Elly describ	TE HUNGER AL	ND POVET	SIGNINGAN ACTIVITIES	OTING	MICE	OFTNAN	TE AS	A VEHICLE
/				x I if the orga							·
	3			ting members of the go		•	Ř	ECE	VED	3	10
Č	3 2			lependent voting memi		•			 10	ام اد	9
7	5 .			of individuals employed				OCT 0'	7 2020	$\frac{3}{5}$	6
-	1			of volunteers (estimate		•	[진]	0	. 5050	5 6	10
ł	<u> </u>	7 a Tot	tal unrelate	d business revenue fro	m Part VIII, col	lumn (C), line 12	-	***		<u> </u>	0.
_	١	b Ne	t unrelated	business taxable incor	me from Form	990-T, line 39	Q	<u>GDE</u>	N, UT	7ь	0.
									Prior Y		Current Year
	8 ا	3 Co	ntributions	and grants (Part VIII, III	ne 1h)			L		2,166.	1,398,920.
į	9		•	ce revenue (Part VIII, lii				F	92	.,548.	137,271.
į	9 10			come (Part VIII, column	• •					717.	5,921.
	1			(Part VIII, column (A),				-	1 00/	0. 1,431.	1,542,112.
	1:			- add lines 8 through 1			, line 12)			7,000.	2,500.
	1:			milar amounts paid (Pa to or for members (Par				-		0.	2,300.
			•	r compensation, emplo	•		nes 5-10)		187	7,499.	443,890.
	Ď.			undraising fees (Part IX						,233.	0.
				ing expenses (Part IX, o			59,3	76.			
Č	<u>آ</u> ادً			es (Part IX, column (A),	• •	•			587	7,640.	715,791.
			•	s Add lines 13-17 (mu		="	5)		822	2,372.	1,162,181.
	19	9 Re	venue less	expenses Subtract lin	e 18 from line	12			182	2,059.	379,931.
Assets or									Beginning of Co		End of Year
sets	[2	0 Tot	tal assets (F	Part X, line 16)				L		7,396.	3,417,989.
				(Part X, line 26)						308.	2,353,970.
Ret	<u> 7</u> 2	2 Ne	t assets or	fund balances Subtrac	ct line 21 from	line 20			684	1,088.	1,064,019.
			Signature								language and ballet at a
											knowledge and belief, it is
11 11	e, co	rrect, a	na compre	Declaration of preparer (other than onlice	i) is based on all illion	nation of wi	ilicii pi epai	ci ilas aliy kilos		2020
е.	-		Storierde	e of orticer (10 10)	4/					ite /	200
Si	re:		,	ICIA CHANG,	CEO					•	
110				orint name and title	1						
_		Pr	int/Type prei	parer's name	V 	Preparer's signature	1!		Date	Check	PTIN
Pa	d		ACOB Y			ملر ک			9/25/202	O self-employe	P01560332
Pro	pare		rm's name						Fi	rm's EIN 🛌	94-1254756
Us	e Onl	ly Fii	rm's address	≥ 275 BATTE							
_				SAN FRANC	ISCO, C	A 94111			PI	<u>ione no 41.</u>	5.781.0793 `
Ma	ıy th	e IRS	discuss this	s return with the prepai	rer shown abo	ve? (see instructions	s)				X Yes V No
932	001 (01-20-20	LHA F	or Paperwork Reduc	tion Act Notic	e, see the separate	instruction	ons.			Form, 990 (2019)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

904,560.

Form 990 (2019)

Total program service expenses ▶

Form 990 (2019) FKA FEED THE Part IV Checklist of Required Schedules FKA FEED THE HUNGER FOUNDATION 26-2975093 Page 3

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			7.7
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			х
_	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?	9	х	
40	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	_ 		
10		10		х
11	or in quasi endowments? If "Yes," complete Schedule D, Part V 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			I
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	ľ		
<u> </u>	Part VI	11a	х	
ь	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	115		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
þ				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	\dashv	<u> </u>
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			v
4-	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	-+	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	46		Х
4 -	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,	17		х
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''	-	
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	"		
13		19		x
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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 1º [f "Yes." complete Schedule I. Parts I and II	21		_X
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Form 990 (2019) FKA FEED THE HUNGER FOUNDATION 26-2975093 Page 4
Part IV 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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No," go to line 25a	24a		_X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			v
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			X
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		х
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
28				
_	instructions, for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // If			·
а		28a		x
ь	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
•	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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?			٠,-
	If "Yes," complete Schedule R, Part V, line 2	36	-	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197	20	х	
Pai	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ_	
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1.	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 22		162	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ĺ
·	(gambling) winnings to prize winners?	1c	$\overline{\mathbf{x}}$	
02200	(a) 20 20		990	(2019)

26-2975093 FKA FEED THE HUNGER FOUNDATION Page 5 Form 990 (2019) Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 6 filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 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 on 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 X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** 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) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X 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 gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). X a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a 7b b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? q If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 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 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 13b organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16

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Form 990 (2019)

If "Yes," complete Form 4720, Schedule O

FKA FEED THE HUNGER FOUNDATION

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Form 990 (2019) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O See instructions

	Check if Schedule O contains a response or note to any line in this Part VI					<u> </u>
Sec	tion A. Governing Body and Management					
		1	ا م		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10			1
	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 on Schedule O					
þ	Enter the number of voting members included on line 1a, above, who are independent	1b	9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	iny other			لسييدا
	officer, director, trustee, or key employee?			2	_	X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3_		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 9		s filed?	4	_X	77
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or	_		v
	more members of the governing body?			7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	ders, or			v
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ir by the	following:	_		
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the			v
<u></u>	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code)			
			,	40.	Yes	No X
	Did the organization have local chapters, branches, or affiliates?		-6614	10a		
ь	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, aπiliates,	404		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	. hafa-	a filma tha farm?	10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y belor	e ming the form?	11a		<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			12a	<u>x</u>	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	to conf	lucto?	12b	X	
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			120	Α.	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es, a	escribe	12c	x	
12	In Schedule O how this was done			13	X	
13	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?			14	X	
14	Did the process for determining compensation of the following persons include a review and approva	l by inc	tenendent	1-4		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	. Dy iik	rependent			
_	The organization's CEO, Executive Director, or top management official			15a	<u>x</u>	
	Other officers or key employees of the organization			15b	X	
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	th a			
100	taxable entity during the year?			16a		X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its p	articipation			
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶CA, HI		·			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	nd 990	T (Section 501(c)(3)s	only)	avaıla	ble
	for public inspection. Indicate how you made these available. Check all that apply		, , , ,			
	Own website Another's website X Upon request Other (explain	on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		•	financ	cial	
-	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 boo	ks and	records			
	PATRICIA CHANG - 415-793-2429					
	100 MONTGOMERY STREET, THE PRESIDIO, SAN FRANCISCO,	, CA	94129			
932006	6 01-20-20			Form	990	(2019)

Form 990 (2019) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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 See instructions for the order in which to list the persons above

Check this box if neither the organization n	or any related of	orga	nıza	tion	con	pen	sate	ed any current officer, di	rector, or trustee	
(A)	(B)			_ ((C)			(D)	(E)	(F)
Name and title	Average	(do	not cl	Pos heck	itior more	than c	กอ	Reportable	Reportable	Estimated
	hours per					s both r/trust		compensation	compensation	amount of
	week				T	17.003		from	from related	other
	(list any	iect						the	organizations	compensation from the
	hours for related	p or	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations	ruste	d trus		98	шъеш		(***271033******30)		and related
	below	dualt	ltona	_	힅	st co	5			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former			J
(1) PATRICIA CHANG	40.00									
CEO		Х		Х				144,992.	0.	35,013.
(2) MARK MURAKAMI	3.00									•
CHAIRPERSON		Х		Х				0.	0.	0.
(3) MARIA SOLEDAD TEH	2.00	1								
VICE CHAIR		Х		Х				0.	0.	0.
(4) BREANNA ZWART	2.00							_		_
SECRETARY		Х		X				0.	0.	0.
(5) VIVIAN PHAM	2.00			l						
TREASURER	2 00	X		Х	_			0.	0.	0.
(6) CRISTINA M. REGALADO	2.00									
DIRECTOR	2 00	X	_	<u> </u>	-			0.	0.	0.
(7) BRETT MELONE DIRECTOR	2.00	X						0.	0.	0.
(8) EUNIZE AZZANI	2.00	^							0.	
DIRECTOR	2.00	X						0.	0.	0.
(9) PUANANI BURGESS	2.00	1							•	
DIRECTOR		x						0.	0.	0.
(10) KEHAULANI PADILLA	2.00									
DIRECTOR		x						0.	0.	0.
		1								
		_								
		1			l		ŀ			
		<u> </u>	L_	<u> </u>	<u> </u>	_				
		-			İ					
		\vdash	\vdash	-			 -	·		
	<u> </u>									
		\vdash	\vdash							
		1							-	

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Part VII Section A. Officers, Directors, Trus	tees, Key Emp	ploye	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
(A)	(B)				2)			(D)	(E)			(F)	
Name and title	Average	(do		Pos		l than c	one	Reportable	Reportable			tımate	
	hours per week	box,	, unles	ss per	rson ı	s both	an	compensation	compensation			ount	of
	(list any	├		<u> </u>	T		<u> </u>	from the	from related			other	tion
	hours for	individual trustee or director				_		organization	organizations (W-2/1099-MIS	- 1		pensa om the	
	related	3e or (stee			nsate		(W-2/1099-MISC)	(** 2) 1000 11110	,		anızatı	
	organizations	truste	Institutional trustee		yee	E E		(** = ** * * * * * * * * * * * * * * * *			_	relate	
	below	ndual	teta	 	Kay employee	est co	je j				orga	ınızatı	ons
	line)	fig	ISE.	Officer	Key	Highest compensated employee	Former						
						<u> </u>							
						_		<u></u>					
		L			L	<u> </u>	L						
		1											
						<u> </u>							
		1											
	1		<u> </u>			<u> </u>							
		1											
		oxdot											
		1							:				
			Ш	<u> </u>	_	<u> </u>	<u> </u>						
					•		1						
			_		<u></u>			111 000					1 0
1b Subtotal								144,992.		0.	3.	5,0	13.
c Total from continuation sheets to Part VI	II, Section A							0.		0.	_		0.
d Total (add lines 1b and 1c)							>	144,992.	L	0.	3.	5,0	<u> 13.</u>
2 Total number of individuals (including but r	ot limited to th	ose	liste	d at	oove	e) wh	o re	eceived more than \$100,	000 of reportable				1
compensation from the organization												Yes	1
										1		res	No
3 Did the organization list any former officer		ee, k	cey e	emp	loye	e, or	hig	hest compensated emp	loyee on				-
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the si	-		•					•	ne organization			~	 -
and related organizations greater than \$15											4	X	
5 Did any person listed on line 1a receive or a	•				_		elate	ed organization or individ	dual for services				-
rendered to the organization? f "Yes." con	nplete Scheduli	e J f	or si	uch ,	oers	on					5		X
Section B. Independent Contractors		10		- t -		004-	·		100 000 ======		hon 4-		
Complete this table for your five highest co the organization. Report compensation for										ensal	HOH TY	ווזע	
	trie Caleridar y	ear e	enqu	ig w	nuri c	JI WI	1	(B)	eai		(0		
(A) Name and business	address	N	INC	F.			l	Description of s	services	С	ompe		n
			<u> </u>				\dashv	•					
							\dashv	-					
-	· 							_					
												_	
							-						
							\neg	• • • •					
2 Total number of independent contractors (includina but n	ot lır	nite	d to	thos	se lis	sted	above) who received me	ore than				
\$100,000 of compensation from the organi	-					0		·, - ····					_
											Form	990 ((2019)

FKA FEED THE HUNGER FOUNDATION

Га		7 11 1	-					o in this Dort VIII			
			Check if Schedule O	conu	ains a respon	ise (or note to any iin	(A)	(B)	(C)	(D)
								Total revenue	Related or exempt	Unrelated	Revenue excluded
									function revenue	business revenue	from tax under sections 512 - 514
· · · ·	1	_	Federated campaigns		1a						
in the			Membership dues		1b						
ឲ្យ			Fundraising events		1c						
E A			Related organizations		1d						
Contributions, Gifts, Grants and Other Similar Amounts			Government grants (contr	ibuti			687,855.				1
Ę.			All other contributions, gifts,					1			
E E			similar amounts not included				711,065.				
Ēά		g	Noncash contributions included in	lines '	1a-1f 1g \$		12,717.]			
<u>S</u> a		h	Total. Add lines 1a-1f				>	1,398,920.			
							Business Code			·	
ا بو	2	а	MICROLOAN INT	ER	EST	_	522291	102,557.	102,557. 34,714.		
Program Service Revenue		b	LOAN FEES			_	522291	34,714.	34,714.		
Sag		С				_					
e Xe		d				_					
59		е				_					
۴		f	All other program service	reve	nue						
\blacksquare		g	Total. Add lines 2a-2f				<u></u>	137,271.			
	3		Investment income (include	ding	dividends, in	tere	st, and	5 555		ĺ	
			other similar amounts)				•	5,797.			5,797.
	4		Income from investment of	of tax	exempt bon	d p	roceeds				
	5		Royalties	_			() D				
			_		(i) Real		(ii) Personal	-			
	6	а	Gross rents	<u>6a</u>				-			
			Less rental expenses	6b				-			
			Rental income or (loss)	<u> 6c</u>	L						1
	_		Net rental income or (loss	`—	(i) Securition		(ii) Other				1
	′	а	Gross amount from sales of		100		(ii) Other				
		_	assets other than inventory Less cost or other basis	7 <u>a</u>	12,04	Ι.					
ا رہ		D	and sales expenses	7b	12,71	7.					
Ē		_	Gain or (loss)	7c	12,71	4.		1			
Other Revenue			Net gain or (loss)	10			•	124.			124.
<u>.</u>	ρ		Gross income from fundraisi	no ev	ents (not						
툂	Ŭ	_	including \$								
			contributions reported on								
			Part IV, line 18		,	8a					
		b	Less direct expenses			8b		1			;
			Net income or (loss) from	fund	raising event	s					
	9		Gross income from gamin		_					ľ	
			Part IV, line 19	_		9a					
		b	Less direct expenses			9b					
		С	Net income or (loss) from	gam	ing activities						
	10	а	Gross sales of inventory, I	ess	returns						1
			and allowances			10a					
		b	Less cost of goods sold			10b					
		С	Net income or (loss) from	sale	s of inventory		<u> </u>				
ر _د							Business Code		<u> </u>	L	<u> </u>
ğ a	11	а				_					ļ. <u></u>
ane		b				_					ļ. <u></u>
e e		С	_			_					
Miscellaneous Revenue			All other revenue								
			Total. Add lines 11a-11d					1 540 110	127 271		E 001
	12		Total revenue See instruction	ons	-			1,542,112.	137,271.	0.	5,921. Form 990 (2019)
93200	y 01	-20-	20								rum 330 (2019)

	Check if Schedule O contains a respons	e or note to any line in t	his Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	0.500	0.500		
	and domestic governments. See Part IV, line 21	2,500.	2,500.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			'	
	individuals See Part IV, lines 15 and 16			+	
4	Benefits paid to or for members			•	
5	Compensation of current officers, directors,	144,992.	72,496.	28,998.	43,498
_	trustees, and key employees Compensation not included above to disqualified	144,002.	/2/470.	20,550.	43,430
6	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(8)				
7	Other salaries and wages	231,654.	206,212.	23,297.	2,145
8	Pension plan accruals and contributions (include		200,2120		
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	36,041.	26,669.	5,004.	4.368
10	Payroll taxes	31,203.	23,090.	4,332.	4,368 3,781
11	Fees for services (nonemployees)				
	Management				
	Legal	7,249.	7,249.		-
	Accounting	128,238.		128,238.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	_			
9	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0)	228,967.	228,967.		
2	Advertising and promotion				
3	Office expenses	19,164.	15,428.	2,242.	1,494
14	Information technology				
15	Royalties				
16	Occupancy	16,813.	13,536.	1,966.	1,311
17	Travel	22,260.	16,695.	3,339.	2,226
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		-10.000		
19	Conferences, conventions, and meetings	12,292.	12,292.		
20	Interest	36,122.	36,122.		
21	Payments to affiliates			444	
2	Depreciation, depletion, and amortization	762.	572.	114.	
3	Insurance	4,767.	3,575.	715.	4//
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses on line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0)				
а	BAD DEBT RESERVE	239,157.	239,157.		
b	Sta Sust Russantia			-	
c					
d					
	All other expenses				
25	Total functional expenses Add lines 1 through 24e	1,162,181.	904,560.	198,245.	59,376
6	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 ff following SOP 98-2 (ASC 958-720)				

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Form 990 (2019)

FKA FEED THE HUNGER FOUNDATION

Pai	rt X	Balance Sheet				
		Check if Schedule O contains a response or note	to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		406,040.	1	448,190.
	2	Savings and temporary cash investments		387,254.	2_	1,026,822.
	3	Pledges and grants receivable, net		468,081.	3	171,831.
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or for	ormer officer, director,			
		trustee, key employee, creator or founder, substa	ntial contributor, or 35%			,
		controlled entity or family member of any of these	persons		5	· · · · · · · · · · · · · · · · · · ·
	6	Loans and other receivables from other disqualifie	d persons (as defined			
		under section 4958(f)(1)), and persons described in	n section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		902,941.	7	1,744;363.
Assets	8	Inventories for sale or use			8	
Ÿ	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a 7,866.			
	ь	Less accumulated depreciation	10b 7,597.	1,031.	10c	269.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11	1	15,768.	13	13,074.
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		18,281.	15	13,440.
	16	Total assets. Add lines 1 through 15 (must equal	line 33)	2,199,396.	16	3,417,989.
	17	Accounts payable and accrued expenses		137,475.	17	180,163.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		1 010	20	2 260
	21	Escrow or custodial account liability Complete Pa	art IV of Schedule D	1,218.	21	3,369.
es	22	Loans and other payables to any current or forme				
Liabilities		trustee, key employee, creator or founder, substa				.
jab.		controlled entity or family member of any of these			22	
_	23	Secured mortgages and notes payable to unrelate		1 276 615	23	2 170 420
	24	Unsecured notes and loans payable to unrelated	· ·	1,376,615.	24	2,170,438.
	25	Other liabilities (including federal income tax, paya				
		parties, and other liabilities not included on lines	7-24) Complete Part X			
		of Schedule D		1,515,308.	25	2,353,970.
	26	Total liabilities. Add lines 17 through 25	. 	1,313,300.	26	2,333,970.
Ŋ		Organizations that follow FASB ASC 958, chec	k here 🕨 🔼			
JC e	07	and complete lines 27, 28, 32, and 33.		357,673.	27	709,159.
ala	27	Net assets without donor restrictions		326,415.	28	354,860.
g P	28	Net assets with donor restrictions	B shock hass	320,413.	28	334,000.
Ë		Organizations that do not follow FASB ASC 95	s, check here			
P		and complete lines 29 through 33.				. <u></u>
sts	29	Capital stock or trust principal, or current funds	noment fried		29 30	
SSE	30	Paid-in or capital surplus, or land, building, or equ	•			
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inco	ome, or other junds	684,088.	31 32	1,064,019.
ž	32	Total net assets or fund balances		2,199,396.	_	3,417,989.
	33	Total liabilities and net assets/fund balances		<u> </u>	33	3,41/,309.

Form	990 (2019) FKA FEED THE HUNGER FOUNDATION	26-2	975093	Pag	_{ge} 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,54		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,16		
3	Revenue less expenses Subtract line 2 from line 1	3			<u>31.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	68	4,0	<u>88.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,06	4,0	<u> 19.</u>
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_ •		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule C)		<u></u>	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis		<u></u>		
ь	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both				1
	X Separate basis Consolidated basis Both consolidated and separate basis				·
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing				
	Act and OMB Circular A-133?	-	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audıt			
-	as audite avalue why as Schedule O and describe any stops taken to undergo push audite		36	Y	

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

2019

Open to Public Inspection

Name of the organization FEED THE HUNGER FUND Employer identification number FKA FEED THE HUNGER FOUNDATION 26-2975093 Reason for Public Charity Status (All organizations must complete this part) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 ____ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Typ functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (i) Name of supported (III) Type of organization (v) Amount of monetary (vi) Amount of other (ii) EIN n vour governing documen (described on lines 1 10 support (see instructions) support (see instructions) organization No above (see instructions)) Total

26-2975093 Page 2

Schedule A (Form 990 or 990-EZ) 2019 FKA FEED THE HUNGER FOUNDATION 26-2975 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	737,820.	838,059.	872,355.	912,166.	1398920.	4759320.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to				1		
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	737,820.	838,059.	872,355.	912,166.	1398920.	4759320.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						563,385.
	Public support. Subtract line 5 from line 4				<u> </u>		4195935.
Se	ction B. Total Support					r	
Cale	indar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	737,820.	838,059.	872,355.	912,166.	1398920.	4759320.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						_
	and income from similar sources	86.	88.	253.	594.	5,797.	6,818.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)					<u> </u>	
11	Total support. Add lines 7 through 10						4766138.
12	Gross receipts from related activities,	etc (see instruction	ons)			12	504,952.
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	ıx year as a sectior	n 501(c)(3)	
Se	organization, check this box and storection C. Computation of Public	o here ic Support Per	centage	_			
14	Public support percentage for 2019 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	88.04 %
	Public support percentage from 2018			·		15	89.99 %
	a 33 1/3% support test - 2019. If the			n line 13, and line	14 is 33 1/3% or m	· •	•
	stop here. The organization qualifies	_					$\triangleright X$
t	33 1/3% support test - 2018. If the		-		line 15 is 33 1/3%	or more, check the	
	and stop here. The organization qual						▶□
17a	10% -facts-and-circumstances test	· · · · · · · · · · · · · · · · · · ·			e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					J	▶□
ŧ	o 10% -facts-and-circumstances test	-		· ·		7a, and line 15 is	10% or
	more, and if the organization meets the	_					
	organization meets the "facts-and-circ						▶□
_18	Private foundation. If the organization						▶ □
						edule A (Form 990	

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(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)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513			+	 	 	-
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
b	3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year		ļ <u> </u>		-		
C	Add lines 7a and 7b				ļ		
8	Public support. (Subtract line 7c from line 6)			└ /──		<u> </u>	
	ction B. Total Support		т		 	1	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
-	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
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, and 12)						
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiza	ation,
	check this box and stop here						▶
Sec	ction C. Computation/of Publi	c Support Per	centage			,	
15	Public support percentage for 2019 (li	ine 8, column (f), d	ivided by line 13,	column (f))		15	%
	Public support percentage from 2018					16	%
Sec	ction D. Computation of Inves	tment Income	Percentage			, ,	
17	Investment income percentage for 20)19 (line 10c, colum	nn (f), divided by I	ne 13, column (f))		17	%
18	Investment income percentage from	2018 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2019. If the more than 33 1/3%, check this box ar	=					7 is not
b	33 1/3% support tests - 2018. If the	organization did n	ot check a box or	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	nd
	line 1/8 is not more than 33 1/3%, che	ck this box and st	op here . The orga	ınızatıon qualıfıes	as a publicly suppo	orted organization	▶□
20	Private foundation. If the organization	in did not check a l	box on line 14, 19	a, or 19b, check ti	his box and see ins	structions	▶ □
93202	23,09-25-19				Sch	edule A (Form 990	or 990-EZ) 2019

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)

Section A.	All Suppo	orting Org	anizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)2. If "Yea." available is a received to a received that the supported organization.
- under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **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
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 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
- 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
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 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)
- 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?
- c 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.
- 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)
- 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)
- 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.
- **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**.
- c 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.
- 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
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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	3a		
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	3c		<u> </u>
	4a		<u> </u>
	l		
	4b		<u> </u>
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n Q	90 or 99	K)_Fプ)	2019

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		1/509	J Pa	ige 5
Pa	rt IV Supporting Organizations (continued)		V	Nie
11	'Has the organization accepted a gift or contribution from any of the following persons?		Yes	<u>No</u>
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
a	below, the governing body of a supported organization?	11a		
b	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		_
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	-		1
	controlled the organization's activities. If the organization had more than one supported organization,	1		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			<u> </u>
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		,	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			1
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1	ļ	·
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		<u> </u>	
	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		<u> </u>	
	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			
Soc	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3	L	
				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	ij.		
a	The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations Complete line 3 below			
b				
с 2	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instactivities Test Answer (a) and (b) below.	tructions,	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	140
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			·
	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 that these activities constituted substantially all of its activities	2a		
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
Ū	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		1	
		2b		
3	activities but for the organization's involvement Parent of Supported Organizations Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
5	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	or to supported organizations in Test. Describe in Fact vi the fole played by the organization in this regard.	000 0	·	0040

	dule A (Form 990 or 990 EZ) 2019 FKA FEED THE HUNGER FOU			26-2975093 Page 6
Pa	Type in tent and and and are the control of the con			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	_	• •	Part VI) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete Sec	tions A th <u>rough</u> E	
Sect	ion 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		
Sect	on B - Mınimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
ь	Average monthly cash balances	1b		·
	Fair market value of other non-exempt-use assets	1c		, and the second
	Total (add lines 1a, 1b, and 1c)	1d		
	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		1
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		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
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		
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-functional	ly integrated	d Type III supporting orga	anization (see
	instructions)	. •		-

Schedule A (Form 990 or 990-EZ) 2019

Sche Par	dule A (Form 990 or 990-EZ) 2019 FKA FEED THE I			6-2975093 Page 7
Secti	on D - Distributions	<u>,, , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,</u>	(OOTHITIOCOT	Current Year
1	Amounts paid to supported organizations to accomplish exer	npt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity	, , , , , , , , , , , , , , , , , , , ,		
	Administrative expenses paid to accomplish exempt purpose	s of supported organizations		-
4	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		<u>. </u>	
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which th	e organization is responsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
c	From 2016			[
d	From 2017			
е	From 2018			[
f	Total of lines 3a through e			<u> </u>
9_	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
ı	Carryover from 2014 not applied (see instructions)	**		[
i_	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2019 from Section D,			
	line 7 \$			
а	Applied to underdistributions of prior years			
<u> </u>	Applied to 2019 distributable amount			
_с	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2019, 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 2019 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c			
8	Breakdown of line 7			
	Excess from 2015			<u> </u>
	Excess from 2016			<u> </u>
С	Excess from 2017			!
d	Excess from 2018			<u> </u>
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

Name of the organization

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FKA FEED THE HUNGER FOUNDATION

Employer identification number 26-2975093

Par	t I Organizations Maintaining Donor Advised		Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6	
		(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 advisors in w	vriting that the assets held in donor advised fu	unds
•	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor ac	•	
•	for charitable purposes and not for the benefit of the donor or		=
	impermissible private benefit?	. 30.10. 44.1001, 0.110. 41.7	Yes No
Pai		panization answered "Yes" on Form 990, Part	
1	Purpose(s) of conservation easements held by the organization		·
·	Preservation of land for public use (for example, recreat		storically important land area
	Protection of natural habitat	· —	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form of a	conservation easement on the last
-	day of the tax year	ica conscivation contribution in the form of a	Held at the End of the Tax Year
_	Total number of conservation easements		2a
- a	Total acreage restricted by conservation easements		2b
-	Number of conservation easements on a certified historic stru	icture included in (a)	2c
د د	Number of conservation easements included in (c) acquired a	• •	20
u		rice 7725700, and not on a mistoric structure	2d
2	listed in the National Register Number of conservation easements modified, transferred, rele	paged extragreshed or terminated by the ora-	·
3	_	eased, extinguished, or terminated by the orga	anization during the tax
_	Number of states where preparts subject to concentration and	coment is located	
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		Yes No
_	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, I	manding of violations, and emorcing conserva	tion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	essements during the year
′	S	and emorning conservation	easements during the year
	Does each conservation easement reported on line 2(d) above	o eatisfy the requirements of section 170(h)(A)	(B)(i)
8	and section 170(h)(4)(B)(ii)?	e satisfy the requirements of section 77 of 1)(4)	Yes No
9	In Part XIII, describe how the organization reports conservation	on openments in its revenue and expense state	
3	balance sheet, and include, if applicable, the text of the footn		
		ote to the organization's illiancial statements	that describes the
Pai	organization's accounting for conservation easements † III Organizations Maintaining Collections of	Art. Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under FASB ASC 958		palance sheet works
ıa			
	of art, historical treasures, or other similar assets held for pub		rance of public
	service, provide in Part XIII the text of the footnote to its finan		age about works of
b	If the organization elected, as permitted under FASB ASC 956		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtherar	ice of public service,
	provide the following amounts relating to these items		• •
	(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, historical trea		n, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		\$
	Assets included in Form 990, Part X		\$
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2019

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_	dule D (Form 990) 2019 FKA FEE TIII Organizations Maintaining C	D THE HUNGE				Other S				Page 2
3	Using the organization's acquisition, accessi								(continu	<u>iea) </u>
3	collection items (check all that apply)	on, and other records	s, Crieck ai	ny or the it	Jilowing that i	nake sign	ilicani (ise of its		
а	Public exhibition	d		an or exch	nange progran	n				
b	Scholarly research	e			ange program					
c	Preservation for future generations	Ü			-					
4	Provide a description of the organization's co	illections and explain	how they	further the	e organization	's exemp	t nurno:	se in Part	XIII	
5	During the year, did the organization solicit o								•	
	to be sold to raise funds rather than to be ma					J			Yes	☐ No
Pai	t IV Escrow and Custodial Arran					es" on Fo	rm 990	. Part IV. I		
	reported an amount on Form 990, Par			· 9				,		
1a	Is the organization an agent, trustee, custodi	an or other intermedia	arv for cor	ntributions	or other asse	ts not inc	luded			
	on Form 990, Part X?		,					Г	Yes	X No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll-	owing tab	le						
_			3						Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on Fe	orm 990. Part X. line 2	21. for esc	crow or cu	stodial accour	nt liability		X	Yes	□ No
	If "Yes," explain the arrangement in Part XIII									$\overline{\mathbf{x}}$
******	t V Endowment Funds. Complete									
		(a) Current year	(b) Pric		(c) Two years	T	Three \	ears back	(e) Four	years back
1a	Beginning of year balance	, a,		:]					1-1	
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities									
·	and programs									
	Administrative expenses					<u> </u>				
1 -	End of year balance									
g	Provide the estimated percentage of the curr	ent year and balance	/line 1a a	column (a)	hold as					
2	Board designated or quasi-endowment	ent year end balance	oz	Joiumm (a)	Tielu as					
d h	Permanent endowment	%								
		⁷⁰								
С	The percentages on lines 2a, 2b, and 2c short	, -								
2-	Are there endowment funds not in the posse		tion that a	ro hold an	d administara	d for the	.raaniz	ation		
3a	· ·	ssion of the organizat	uon mat a	re neid an	a administere	a for the t	organiza	ation	Γ,	Yes No
	by									Yes No
	(i) Unrelated organizations								3a(ı)	+
	(ii) Related organizations			1 - 00					3a(II)	
	If "Yes" on line 3a(ii), are the related organiza	•							3b	
Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		vment tun	as						
			Dort IV I	no 11a S	00 Form 990	Dart Y Ivo	0.10			
	Complete if the organization answered				T			<u></u>	(d) Pools	
	Description of property	(a) Cost or ot basis (investm		(b) Cost basis ((c) Accidence	umulate eciation	,u	(d) Book	value
10	Land	2230 (11703011		240.0 (,- 3.0.7	Jopie	3.4.1011			
										
	Buildings		- +							
	Leasehold improvements				7,866.		7,5	97		269.
	Equipment				,,000.		,,,,	· · ·		205.
	Other	/5	<u> </u>	/D) (11	<u> </u>			$\overline{}$		269.
iotal	l. Add lines 1a through 1e (Column (d) must e	<u>quai Form 990. Part)</u>	k. COIUMN	(¤). iine 10	JC.)			Cab adula	D /F	900) 2019

FEED THE HU			
	E HUNGER FOUNI	DATION	26-2975093 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost	or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total (Col. (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation Cost	or end-of-year market value
(2)			
(3)			
(4)			***************************************
(5)			
(6)			
(8)			
(9)			
Total (Col (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets.			
<u></u>	F 000 D-+IV/	444 O F 000 D-+V I 45	·
Complete if the organization answered "Yes"		11d See Form 990, Part X, line 15	(b) Book value
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f See Form 990, Part X, III	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(C)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2019

(7) (8)

	<u>HUNGER FOUNDA</u> d Financial Stateme			75093 Page 4
Complete if the organization answered "Yes" on F				
Total revenue, gains, and other support per audited finan	cial statements		1	1,542,112.
Amounts included on line 1 but not on Form 990, Part VI	II, line 12			
a Net unrealized gains (losses) on investments		2a		
b Donated services and use of facilities		2b		
c Recoveries of prior year grants		2c		
d Other (Describe in Part XIII)		2d		
e Add lines 2a through 2d			2e	0.
Subtract line 2e from line 1			3	1,542,112.
Amounts included on Form 990, Part VIII, line 12, but not	on line 1	1 1		
a Investment expenses not included on Form 990, Part VIII	, line 7b	4a		
b Other (Describe in Part XIII)		4b		0
c Add lines 4a and 4b			4c	1 542 112
i Total revenue Add lines 3 and 4c. (This must equal Form Part XII Reconciliation of Expenses per Audite	<u> 1990. Part I. line 12.)</u> ed Financial Statem	ents With Expens	ses per Return.	1,542,112.
Complete if the organization answered "Yes" on F	orm 990, Part IV, line 12a	1		
Total expenses and losses per audited financial statemer	nts		1	1,162,181.
Amounts included on line 1 but not on Form 990, Part IX	, line 25	1 1		
a Donated services and use of facilities		2a		
b Prior year adjustments		2b		
c Other losses		2c		
d Other (Describe in Part XIII)		2d		0
e Add lines 2a through 2d			2e	0.
Subtract line 2e from line 1			3	1,162,181.
Amounts included on Form 990, Part IX, line 25, but not		1 1		
a Investment expenses not included on Form 990, Part VIII	, line 7b	4a		
b Other (Describe in Part XIII)		4b	 -	0
c Add lines 4a and 4b			4c	1,162,181.
Intal evaponese Add lines 2 and 46 /This /T	000 D-+!! 10\			
art XIII Supplemental Information. ovide the descriptions required for Part II, lines 3, 5, and 9, P	art III, lines 1a and 4, Par			
point XIII Supplemental Information. Dovide the descriptions required for Part II, lines 3, 5, and 9, Part 2d and 4b, and Part XII, lines 2d and 4b. Also complete the ART IV, LINE 2B:	art III, lines 1a and 4, Par	ditional information	art V, line 4, Part X, li	ne 2, Part XI,
Part XIII Supplemental Information. Devide the descriptions required for Part II, lines 3, 5, and 9, Part 2d and 4b, and Part XII, lines 2d and 4b. Also complete the ART IV, LINE 2B: HE FUND IS A FISCAL SPONSOR FOR	art III, lines 1a and 4, Par iis part to provide any add	FOOD HUB AN	art V, line 4, Part X, li	ne 2, Part XI,
Part XIII Supplemental Information. Devide the descriptions required for Part II, lines 3, 5, and 9, Part 2d and 4b, and Part XII, lines 2d and 4b. Also complete the ART IV, LINE 2B: HE FUND IS A FISCAL SPONSOR FOR JUND COLLECTS GRANT REVENUES AND ART X, LINE 2:	art III, lines 1a and 4, Par ils part to provide any add R GREENWHEEL O REVIEWS DIS	FOOD HUB ANI	art V, line 4, Part X, li	ne 2, Part XI, TUND. THE
Total expenses Add lines 3 and 4c. (This must equal Formatt XIII Supplemental Information. Devide the descriptions required for Part II, lines 3, 5, and 9, Ples 2d and 4b, and Part XII, lines 2d and 4b Also complete the ART IV, LINE 2B: HE FUND IS A FISCAL SPONSOR FOR THE FUND COLLECTS GRANT REVENUES AND ART X, LINE 2: HE FUND IS A TAX-EXEMPT ORGANIZATION OF THE FUND IS A TAX-EXEMPT ORGANIZATION OF THE FUND IS A TAX-EXEMPT ORGANIZATION OF TAX-E	art III, lines 1a and 4, Par ils part to provide any add R GREENWHEEL O REVIEWS DIS	FOOD HUB ANI	art V, line 4, Part X, li	ne 2, Part XI, TUND. THE
art XIII Supplemental Information. Divide the descriptions required for Part II, lines 3, 5, and 9, Pas 2d and 4b, and Part XII, lines 2d and 4b. Also complete the ART IV, LINE 2B: HE FUND IS A FISCAL SPONSOR FOR TIND COLLECTS GRANT REVENUES AND ART X, LINE 2: HE FUND IS A TAX-EXEMPT ORGANIZATION OF THE PUND IS A TAX-EXEMPT ORGANIZATION OF THE PUND IS A TAX-EXEMPT ORGANIZATION OF TAX-EXEMPT OR	art III, lines 1a and 4, Par ils part to provide any add R GREENWHEEL D REVIEWS DIS	FOOD HUB AND BURSEMENTS	art V, line 4, Part X, li O NUESTRA F FOR REASONA VENUE CODE	ne 2, Part XI, TUND. THE
Part XIII Supplemental Information. Devide the descriptions required for Part II, lines 3, 5, and 9, Part 2d and 4b, and Part XII, lines 2d and 4b. Also complete the ART IV, LINE 2B: HE FUND IS A FISCAL SPONSOR FOR INDICATE THE FUND IS A FISCAL SPONSOR FOR INDICATE THE FUND IS A TAX-EXEMPT ORGANIZATION OF ORGANIZATION (3) AND SECTION 23701D OF	art III, lines 1a and 4, Par ils part to provide any add R GREENWHEEL D REVIEWS DIS ZATION UNDER THE CALIFORN	FOOD HUB AND BURSEMENTS INTERNAL REV	art V, line 4, Part X, li	ne 2, Part XI, UND. THE BLENESS.
ART IV, LINE 2B: HE FUND IS A FISCAL SPONSOR FOR JUND COLLECTS GRANT REVENUES AND ART X, LINE 2: HE FUND IS A TAX-EXEMPT ORGANIZATION (3) AND SECTION 23701D OF ANAGEMENT EVALUATED THE FUND'S AD MAINTAINED ITS TAX-EXEMPT STAX-EXEMPT	art III, lines 1a and 4, Par ils part to provide any add R GREENWHEEL D REVIEWS DIS ZATION UNDER THE CALIFORN TAX POSITION TATUS AND HAD	FOOD HUB AND BURSEMENTS INTERNAL REV IA TAX CODE S AND CONCLU	art V, line 4, Part X, line 4, Part X, line 5 D NUESTRA F FOR REASONA VENUE CODE UDED THAT T	TUND. THE BLENESS. SECTION THE FUND
Part XIII Supplemental Information. Devide the descriptions required for Part II, lines 3, 5, and 9, Part 2d and 4b, and Part XII, lines 2d and 4b. Also complete the ART IV, LINE 2B: HE FUND IS A FISCAL SPONSOR FOR THE TUND COLLECTS GRANT REVENUES AND ART X, LINE 2:	art III, lines 1a and 4, Par ils part to provide any add R GREENWHEEL D REVIEWS DIS ZATION UNDER THE CALIFORN TAX POSITION TATUS AND HAD	FOOD HUB AND BURSEMENTS INTERNAL REV IA TAX CODE S AND CONCLU	art V, line 4, Part X, line 4, Part X, line 5 D NUESTRA F FOR REASONA VENUE CODE UDED THAT T	TUND. THE BLENESS. SECTION THE FUND
art XIII Supplemental Information. Devide the descriptions required for Part II, lines 3, 5, and 9, Pas 2d and 4b, and Part XII, lines 2d and 4b. Also complete the ART IV, LINE 2B: HE FUND IS A FISCAL SPONSOR FOR JUND COLLECTS GRANT REVENUES AND ART X, LINE 2: HE FUND IS A TAX-EXEMPT ORGANIZATION (3) AND SECTION 23701D OF ANAGEMENT EVALUATED THE FUND'S AD MAINTAINED ITS TAX-EXEMPT STAND MAINTAINED ITS TAX-EXEMPT STAND ANAGEMENT EVALUATED THE FUND'S ANAGEMENT EVALUATED THE FUND'S	art III, lines 1a and 4, Par is part to provide any add R GREENWHEEL D REVIEWS DIS ZATION UNDER THE CALIFORN TAX POSITION TATUS AND HAD ENT TO THE FI	FOOD HUB AND BURSEMENTS INTERNAL REV IA TAX CODE S AND CONCLUTAKEN NO UNI NANCIAL STA	O NUESTRA FOR REASONA VENUE CODE UDED THAT TO NCERTAIN TA TEMENTS. THE	PUND. THE BLENESS. SECTION THE FUND THE FUND THE FUND

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FEED THE HUNGER FUND Schedule D (Form 990) 2019 FKA FEED THE HUNGER FOUNDATION 26-2975093 Page 5 Part XIII Supplemental Information (continued) FINANCIAL STATEMENTS.

SCHEDULE J (Form 990)

Part I

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

Open to Public Inspection

Employer identification number

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

FEED THE HUNGER FUND

Questions Regarding Compensation

FKA FEED THE HUNGER FOUNDATION

26-2975093

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,]
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			Ì
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
þ	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
Ū	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			1
	•			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			لبيب
	The organization?	6a		X
b	Any related organization?	6b		X
_	If "Yes" on line 6a or 6b, describe in Part III			1
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		_X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			_
_	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2019

FKA FEED THE HUNGER FOUNDATION

Schedule J (Form 990) 2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii)

Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i) (iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(R) Breakdown of	W-2 and/or 1099-MISC compensation	C. compensation	(C) Bettrement and	(D) Nontaxable	(F) Total of columns	(F) Companyation
			,		other deferred		(B)(A)(D)	in column (B)
(A) Name and Title		(ı) Base compensation	(II) Bonus & Incentive	(iii) Other reportable	compensation		(2) (3/2)	reported as deferred
			compensation	compensation				
(1) PATRICIA CHANG	Ξ	144,992.	0	0.	0	35,013.	180,005.	0
CEO	Ξ	0.	0	0.	0.	0.	0.	0
	Θ							
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Schedule J (Form 990) 2019

SCHEDULE O

. (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

FEED THE HUNGER FUND

OMB No 1545-0047 Open to Public

Inspection Employer identification number

FKA FEED THE HUNGER FOUNDATION	26-29/5093
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSI	ION:
FOR PERSONAL AND INSTITUTIONAL TRANSFORMATION.	
FORM 990, PART VI, SECTION A, LINE 4:	
THE ORGANIZATION CHANGED ITS NAME FROM FEED THE HUNGER FOUN	NDATION TO FEED
THE HUNGER FUND.	
FORM 990, PART VI, SECTION B, LINE 11B:	
FORM 990 IS REVIEWED BY THE CEO AND APPROVED BY THE FINANCE	E COMMITTEE.
PRIOR TO FILING, A COMPLETE COPY OF FORM 990 IS PROVIDED TO	THE BOARD.
FORM 990, PART VI, SECTION B, LINE 12C:	
THE CONFLICT OF INTEREST IS BROUGHT UP WITH THE BOARD MEMBE	ERS AT THE ANNUAL
BOARD MEETING. IF THERE IS A CONFLICT OF INTEREST, THE MEMI	BER WOULD NEED TO
STATE THE CONFLICT, WOULD NOT BE ALLOWED TO VOTE IN THE ARE	EA REGARDING THE
CONFLICT, AND COULD NOT BE INVOLVED IN THE TRANSACTION.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE FUND UTILIZES A KEY BOARD MEMBER'S EXPERTISE IN RECRUIT	
CORPORATE AND SOCIAL SECTORS, AND KNOWLEDGE OF COMPARABLE OF	COMPENSATION
DATA. THE BOARD ALSO REVIEWS AND APPROVES OF THE ANNUAL SAI	ARY CHANGES OF
THE EXECUTIVE.	
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINAN	NCIAL STATEMENTS
ARE AVAILABLE AT THE ORGANIZATION'S OFFICE UPON REQUEST FOR LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedi	

932211 09-06-19

Schedule O (Form 990 or 990-EZ) (2019) Name of the organization FEED THE HUNGER FUND FUND FIED THE HUNGER FUND	Employer identification number
FKA FEED THE HUNGER FOUNDATION	26-2975093
OF TIME SET FORTH IN SEC. 6104(D).	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
PROGRAM FEES:	
PROGRAM SERVICE EXPENSES	143,945.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES (0.
TOTAL EXPENSES	143,945.
OTHER PROGRAM EXPENSES:	
PROGRAM SERVICE EXPENSES	85,022.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	85,022.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	228,967.
	. .

XTO

CERTIFICATE OF AMENDMENT
OF
ARTICLES OF INCORPORATION

FILED Secretary of State
State of California
MAD 1.1 2020

The undersigned certify that:

- 1. They are the President and the Secretary, respectively, of Feed the Hunger Foundation, a California nonprofit public benefit corporation.
- 2. Article I of the Articles of Incorporation of this corporation is amended to read in its entirety as follows:

The name of this corporation shall be FEED THE HUNGER FUND.

- 3. The foregoing amendment of the Articles of Incorporation has been duly approved by this corporation's Board of Directors.
 - 4. This corporation has no members.

We further declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true of our own knowledge.

DATED: $\frac{3/16/2020}{}$, 2020

DATED: 5/9 . 2020

Patricia Chang, President

Breanna Zwart, Secretary