



# 2014 Income Tax Returns

FEEDING AMERICA

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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

2014

Department of the Treasury  
Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.  
▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**Open to Public Inspection**

**A** For the **2014** calendar year, or tax year beginning 07/01, 2014, and ending 06/30, 2015

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization FEEDING AMERICA Doing Business As			<b>D</b> Employer identification number 36-3673599
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 35 EAST WACKER, SUITE 2000		<b>E</b> Telephone number (312) 263-2303	
	City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL 60601			<b>G</b> Gross receipts \$ <u>2,245,226,527.</u> <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)  <b>H(c)</b> Group exemption number ▶
	<b>F</b> Name and address of principal officer: DIANA AVIV, CEO 35 E. WACKER DRIVE, SUITE 2000 CHICAGO, IL 60601			
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
<b>J</b> Website: ▶ WWW.FEEDINGAMERICA.ORG				
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ <b>L</b> Year of formation: 1988 <b>M</b> State of legal domicile: AZ				

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: FEEDING AMERICA'S MISSION IS TO FEED AMERICA'S HUNGRY THROUGH A NATIONWIDE NETWORK OF FOOD BANKS AND ENGAGE OUR COUNTRY IN THE FIGHT TO END HUNGER		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	14.	
	<b>4</b>	11.	
	<b>5</b>	272.	
	<b>6</b>	260.	
	<b>7a</b>	0	
<b>7b</b>	0		
<b>Revenue</b>	<b>8</b>	<b>Prior Year</b>	<b>Current Year</b>
	Contributions and grants (Part VIII, line 1h)	2,016,270,036.	2,149,634,703.
	Program service revenue (Part VIII, line 2g)	19,308,483.	21,540,597.
	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,911,248.	1,006,379.
	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	21,872,860.	28,670,486.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,060,362,627.	2,200,852,165.
<b>Expenses</b>	<b>13</b>	<b>Prior Year</b>	<b>Current Year</b>
	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,968,327,829.	2,104,916,913.
	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	24,718,315.	27,443,267.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	3,275,973.	2,773,110.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 24,954,504.		
Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	45,665,272.	49,498,873.	
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,041,987,389.	2,184,632,163.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	18,375,238.	16,220,002.	
<b>Net Assets or Fund Balances</b>	<b>20</b>	<b>Beginning of Current Year</b>	<b>End of Year</b>
	Total assets (Part X, line 16)	86,540,942.	109,025,819.
	Total liabilities (Part X, line 26)	19,684,709.	26,879,369.
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	66,856,233.	82,146,450.	

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer _____ Date _____				
	Type or print name and title _____				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	PHILIP B BARTLETT	<i>PBB</i>	12/7/2015		P01299075
	Firm's name ▶ KPMG LLP	Firm's EIN ▶ 13-5565207		Phone no. 614-249-2300	
Firm's address ▶ 191 WEST NATIONWIDE BLVD., STE. 500 COLUMBUS, OH 43215-2568					

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

**For Paperwork Reduction Act Notice, see the separate instructions.** Form **990** (2014)

# IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2014, or fiscal year beginning 07/01, 2014, and ending 06/30, 2015

▶ Do not send to the IRS. Keep for your records.

▶ Information about Form 8879-EO and its instructions is at [www.irs.gov/form8879eo](http://www.irs.gov/form8879eo).

# 2014

Department of the Treasury  
Internal Revenue Service

Name of exempt organization

FEEDING AMERICA

Employer identification number

36-3673599

Name and title of officer

DIANA AVIV, CEO

## Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here ▶ <input checked="" type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12) . . .	<b>1b</b>	<u>2200852165</u>
2a	Form 990-EZ check here ▶ <input type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990-EZ, line 9) . . . . .	<b>2b</b>	_____
3a	Form 1120-POL check here ▶ <input type="checkbox"/>	<b>b Total tax</b> (Form 1120-POL, line 22) . . . . .	<b>3b</b>	_____
4a	Form 990-PF check here ▶ <input type="checkbox"/>	<b>b Tax based on investment income</b> (Form 990-PF, Part VI, line 5). . . . .	<b>4b</b>	_____
5a	Form 8868 check here ▶ <input type="checkbox"/>	<b>b Balance Due</b> (Form 8868, Part I, line 3c or Part II, line 8c) . . . . .	<b>5b</b>	_____

## Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

### Officer's PIN: check one box only

I authorize KPMG LLP to enter my PIN 62010 as my signature

ERO firm name

Enter five numbers, but do not enter all zeros

on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ 

Date ▶ 11/30/2015

## Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

31017320002

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ 

Date ▶ 12/7/2015

**ERO Must Retain This Form - See Instructions  
Do Not Submit This Form To the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

FEEDING AMERICA'S MISSION IS TO FEED AMERICA'S HUNGRY THROUGH A NATIONWIDE NETWORK OF FOOD BANKS AND ENGAGE OUR COUNTRY IN THE FIGHT TO END HUNGER.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 2,096,220,508. including grants of \$ 2,071,667,739. ) (Revenue \$ 16,008,681. ) FOOD PROCUREMENT - SEE SCHEDULE O

4b (Code: ) (Expenses \$ 44,388,804. including grants of \$ 33,249,174. ) (Revenue \$ 5,531,916. ) MEMBER SERVICES - SEE SCHEDULE O

4c (Code: ) (Expenses \$ 3,441,281. including grants of \$ ) (Revenue \$ ) RESEARCH & ANALYSIS - SEE SCHEDULE O

4d Other program services (Describe in Schedule O.) (Expenses \$ 8,809,499. including grants of \$ ) (Revenue \$ 1,688,344. )

4e Total program service expenses 2,152,860,092.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> . . . . .	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? . . . . .	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i> . . . . .		X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i> . . . . .	X	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i> . . . . .		X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i> . . . . .		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> . . . . .		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> . . . . .		X
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV.</i> . . . . .	X	
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> . . . . .	X	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> . . . . .	X	
<b>b</b> Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> . . . . .		X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII.</i> . . . . .		X
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX.</i> . . . . .		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> . . . . .	X	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X.</i> . . . . .	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i> . . . . .	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i> . . . . .		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i> . . . . .		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i> . . . . .		X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i> . . . . .		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i> . . . . .		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions). . . . .	X	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i> . . . . .		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i> . . . . .		X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i> . . . . .		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .		

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i> . . . . .	X	
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III.</i> . . . . .	X	
<b>23</b> 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? <i>If "Yes," complete Schedule J.</i> . . . . .	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i> . . . . .		X
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		X
<b>25b</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? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i> . . . . .		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i> . . . . .		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>28a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .	X	
<b>28b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
<b>28c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .	X	
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i> . . . . .	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> . . . . .		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> . . . . .		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i> . . . . .		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> . . . . .		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i> . . . . .		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .		X
<b>35b</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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i> . . . . .		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O. . . . .	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 1a through 14b regarding IRS filings, employee reporting, foreign accounts, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (14), 1b (11), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 1
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: PAUL HENRYS, CFO 35 EAST WACKER DRIVE, SUITE 2000 CHICAGO, IL 60601 312-263-2303



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

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAN PRUITT CHAIR	1.00 0	X		X				0	0	0
(2) PAUL ALEXANDER DIRECTOR	1.00 0	X						0	0	0
(3) STEVEN BARR DIRECTOR	1.00 0	X						0	0	0
(4) JOAN CHOW DIRECTOR	1.00 0	X						0	0	0
(5) KATE MAEHR DIRECTOR	1.00 0	X						0	0	0
(6) DEBORAH FLATEMAN DIRECTOR	1.00 0	X						0	0	0
(7) VINCENT M. HOWELL DIRECTOR	1.00 0	X						0	0	0
(8) KATHY JACKSON DIRECTOR	1.00 0	X						0	0	0
(9) ERIN SHARP DIRECTOR	1.00 0	X						0	0	0
(10) BILL MCMAHON DIRECTOR	1.00 0	X						0	0	0
(11) KEITH MONDA DIRECTOR	1.00 0	X						0	0	0
(12) SHAWN O'GRADY DIRECTOR	1.00 0	X						0	0	0
(13) DEDE PRIEST DIRECTOR	1.00 0	X						0	0	0
(14) TERRANCE WILLIAMS DIRECTOR	1.00 0	X						0	0	0

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
15) MATTHEW E. WINTER DIRECTOR	1.00 0	X					0	0	0	
16) GEOFF COVERT DIRECTOR TO SEPTEMBER 2014	1.00 0	X					0	0	0	
17) MICHAEL LEWIS DIRECTOR TO JUNE 2015	1.00 0	X					0	0	0	
18) TERRY SCULLY DIRECTOR TO NOVEMBER 2014	1.00 0	X					0	0	0	
19) ROBERT AIKEN CEO JULY TO MAY 2015	40.00 0			X			606,521.	0	44,562.	
20) PAUL HENRYS CFO/TREASURER	40.00 0			X			285,876.	0	39,317.	
21) ANDREA YAO SECRETARY	40.00 0			X			132,563.	0	36,180.	
22) MAURA DALY CHIEF EXTERNAL AFFAIRS OFFICER	40.00 0				X		277,415.	0	24,418.	
23) LISA DAVIS SVP GOVERNMENT RELATIONS	40.00 0				X		241,449.	0	46,307.	
24) MATTHEW KNOTT PRESIDENT-INTERIM CEO MAY 2015	40.00 0				X		377,619.	0	42,032.	
25) DAPHNE LOGAN SVP OF HUMAN RESOURCES	40.00 0				X		229,127.	0	27,860.	
<b>1b Sub-total</b>							0	0	0	
<b>c Total from continuation sheets to Part VII, Section A</b>							3,849,264.	0	482,255.	
<b>d Total (add lines 1b and 1c)</b>							3,849,264.	0	482,255.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **71**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **40**

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
( 26) LEAH RAY SVP OF DEVELOPMENT	40.00 0				X			196,392.	0	20,469.
( 27) WILLIAM THOMAS CHIEF SUPPLY CHAIN OFFICER	40.00 0				X			296,676.	0	42,088.
( 28) JOHANNA VETTER CHIEF MARKETING OFFICIER	40.00 0				X			273,121.	0	19,611.
( 29) MARISOL BUONOMO VP FINANCE & CONTROLLER	40.00 0					X		171,369.	0	32,808.
( 30) RONALD MARTIN VP OF FIN REPORTING & BUDGETIN	40.00 0					X		187,594.	0	36,919.
( 31) DANIEL KROHM VP-STRATEGIC INITIATIVES & SC	40.00 0					X		171,282.	0	10,923.
( 32) KEVIN LUTZ SVP, INFORMATION TECHNOLOGY	40.00 0					X		216,909.	0	39,536.
( 33) DANIEL NISBET VP OF DEVELOPMENT	40.00 0					X		185,351.	0	19,225.
<b>1b Sub-total</b> . . . . .										
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .										
<b>d Total (add lines 1b and 1c)</b> . . . . .										

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 71

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**

**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII.  X

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>						
	<b>b</b> Membership dues . . . . .	<b>1b</b>						
	<b>c</b> Fundraising events . . . . .	<b>1c</b>						
	<b>d</b> Related organizations . . . . .	<b>1d</b>						
	<b>e</b> Government grants (contributions) . . . . .	<b>1e</b>						
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1f</b>	2,149,634,703.					
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ . . . . .		2,065,506,235.					
	<b>h Total.</b> Add lines 1a-1f . . . . . ▶			2,149,634,703.				
<b>Program Service Revenue</b>	<b>Business Code</b>							
	<b>2a</b> FOOD PROCUREMENT REVENUE . . . . .		900099	16,008,681.	16,008,681.			
	<b>b</b> MEMBER FEES . . . . .		900099	4,374,317.	4,374,317.			
	<b>c</b> CONFERENCE REVENUE . . . . .		900099	1,153,292.	1,153,292.			
	<b>d</b> INTEREST INCOME . . . . .		900099	4,307.	4,307.			
	<b>e</b> . . . . .							
	<b>f</b> All other program service revenue . . . . .							
	<b>g Total.</b> Add lines 2a-2f . . . . . ▶			21,540,597.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . . ▶			496,098.			496,098.	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . . ▶			0				
	<b>5</b> Royalties . . . . . ▶			27,004,292.			27,004,292.	
	<b>6a</b> Gross rents . . . . .	(i) Real	179,754.					
		(ii) Personal						
	<b>b</b> Less: rental expenses . . . . .		203,108.					
	<b>c</b> Rental income or (loss) . . . . .		-23,354.					
	<b>d</b> Net rental income or (loss) . . . . . ▶			-23,354.			-23,354.	
	<b>7a</b> Gross amount from sales of assets other than inventory . . . . .	(i) Securities	1,288,120.					
		(ii) Other						
	<b>b</b> Less: cost or other basis and sales expenses . . . . .		777,839.					
	<b>c</b> Gain or (loss) . . . . .		510,281.					
	<b>d</b> Net gain or (loss) . . . . . ▶			510,281.			510,281.	
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . . <b>a</b>							
	<b>b</b> Less: direct expenses . . . . . <b>b</b>							
<b>c</b> Net income or (loss) from fundraising events . . . . . ▶			0					
<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . . <b>a</b>								
<b>b</b> Less: direct expenses . . . . . <b>b</b>								
<b>c</b> Net income or (loss) from gaming activities . . . . . ▶			0					
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . . <b>a</b>		43,958,840.						
	<b>b</b> Less: cost of goods sold . . . . . <b>b</b>		43,393,415.					
	<b>c</b> Net income or (loss) from sales of inventory . . . . . ▶			565,425.	565,425.			
<b>Miscellaneous Revenue</b>			<b>Business Code</b>					
<b>11a</b> OTHER FEES . . . . .		900099	715,426.	715,426.				
<b>b</b> PUBLICATIONS AND MATERIALS FEES . . . . .		900099	408,697.	408,697.				
<b>c</b> . . . . .								
<b>d</b> All other revenue . . . . .								
<b>e Total.</b> Add lines 11a-11d . . . . . ▶			1,124,123.					
<b>12 Total revenue.</b> See instructions . . . . . ▶			2,200,852,165.	23,230,145.		27,987,317.		

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	2,104,906,913.	2,104,906,913.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	10,000.	10,000.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .	0			
<b>4</b> Benefits paid to or for members . . . . .	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	3,328,940.	1,211,370.	1,559,864.	557,706.
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
<b>7</b> Other salaries and wages . . . . .	19,495,923.	12,263,365.	2,374,628.	4,857,930.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,012,001.	632,670.	119,164.	260,167.
<b>9</b> Other employee benefits . . . . .	2,046,200.	1,355,629.	191,184.	499,387.
<b>10</b> Payroll taxes . . . . .	1,560,203.	963,147.	224,134.	372,922.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management . . . . .	0			
<b>b</b> Legal . . . . .	20,101.		20,101.	
<b>c</b> Accounting . . . . .	144,894.		144,894.	
<b>d</b> Lobbying . . . . .	189,544.	189,544.		
<b>e</b> Professional fundraising services. See Part IV, line 17.	2,773,110.			2,773,110.
<b>f</b> Investment management fees . . . . .	79,108.		79,108.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .	9,329,567.	5,613,122.	837,890.	2,878,555.
<b>12</b> Advertising and promotion . . . . .	2,589,352.	914,872.	9,847.	1,664,633.
<b>13</b> Office expenses . . . . .	969,471.	684,357.	159,216.	125,898.
<b>14</b> Information technology . . . . .	4,053,607.	2,515,519.	251,653.	1,286,435.
<b>15</b> Royalties . . . . .	0			
<b>16</b> Occupancy . . . . .	1,538,513.	849,347.	299,499.	389,667.
<b>17</b> Travel . . . . .	1,601,202.	1,263,401.	118,696.	219,105.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
<b>19</b> Conferences, conventions, and meetings . . . . .	1,706,074.	1,540,933.	101,389.	63,752.
<b>20</b> Interest . . . . .	2,862.	2,862.		
<b>21</b> Payments to affiliates . . . . .	0			
<b>22</b> Depreciation, depletion, and amortization . . . . .	389,709.	270,855.	48,141.	70,713.
<b>23</b> Insurance . . . . .	94,232.	55,047.	17,224.	21,961.
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> PRODUCE -----	17,196,129.	17,196,129.		
<b>b</b> POSTAGE AND PRINTING -----	8,861,419.			8,861,419.
<b>c</b> DISASTER PURCHASES -----	281,957.	281,957.		
<b>d</b> PROFESSIONAL DEVELOPMENT -----	191,176.	15,090.	142,496.	33,590.
<b>e</b> All other expenses -----	259,956.	123,963.	118,439.	17,554.
<b>25</b> Total functional expenses. Add lines 1 through 24e	2,184,632,163.	2,152,860,092.	6,817,567.	24,954,504.
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .	0			

**Part 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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing	30,540,006.	<b>1</b>	50,397,174.
	<b>2</b> Savings and temporary cash investments	0	<b>2</b>	0
	<b>3</b> Pledges and grants receivable, net	25,380,609.	<b>3</b>	28,034,291.
	<b>4</b> Accounts receivable, net	3,968,048.	<b>4</b>	3,681,950.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use	0	<b>8</b>	24,600.
	<b>9</b> Prepaid expenses and deferred charges	746,505.	<b>9</b>	457,548.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 5,291,593.		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 3,198,702.	1,773,013.	<b>10c</b> 2,092,891.
	<b>11</b> Investments - publicly traded securities	23,653,692.	<b>11</b>	23,656,392.
	<b>12</b> Investments - other securities. See Part IV, line 11	33,047.	<b>12</b>	31,374.
	<b>13</b> Investments - program-related. See Part IV, line 11	422,524.	<b>13</b>	560,289.
	<b>14</b> Intangible assets	0	<b>14</b>	0
	<b>15</b> Other assets. See Part IV, line 11	23,498.	<b>15</b>	89,310.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)	86,540,942.	<b>16</b>	109,025,819.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	12,505,269.	<b>17</b>	9,132,944.
	<b>18</b> Grants payable	3,264,641.	<b>18</b>	13,284,602.
	<b>19</b> Deferred revenue	450,100.	<b>19</b>	1,798,886.
	<b>20</b> Tax-exempt bond liabilities	0	<b>20</b>	0
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D	519,093.	<b>21</b>	519,811.
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	0	<b>23</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties	562,500.	<b>24</b>	0
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,383,106.	<b>25</b>	2,143,126.
	<b>26 Total liabilities.</b> Add lines 17 through 25	19,684,709.	<b>26</b>	26,879,369.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	26,660,358.	<b>27</b>	28,015,697.
	<b>28</b> Temporarily restricted net assets	38,398,624.	<b>28</b>	52,318,603.
	<b>29</b> Permanently restricted net assets	1,797,251.	<b>29</b>	1,812,150.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
	<b>33</b> Total net assets or fund balances	66,856,233.	<b>33</b>	82,146,450.
	<b>34</b> Total liabilities and net assets/fund balances	86,540,942.	<b>34</b>	109,025,819.

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	2,200,852,165.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	2,184,632,163.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	16,220,002.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	66,856,233.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-926,859.
<b>6</b>	Donated services and use of facilities	<b>6</b>	0
<b>7</b>	Investment expenses	<b>7</b>	0
<b>8</b>	Prior period adjustments	<b>8</b>	0
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-2,926.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	82,146,450.

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
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
- b** Were the organization's financial statements audited by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

**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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

**Open to Public Inspection**

Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, 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.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  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.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  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.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  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.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **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.**
  - 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.**
  - 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.**
  - d  **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.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . .
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2014



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.)

Section A. Public Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2014 (46.55%); 15 Public support percentage from 2013 Schedule A, Part II, line 14 (50.83%); 16a 33 1/3% support test - 2014; 16b 33 1/3% support test - 2013; 17a 10%-facts-and-circumstances test - 2014; 17b 10%-facts-and-circumstances test - 2013; 18 Private foundation.

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.  
 If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .						
<b>c</b> Add lines 7a and 7b. . . . .						
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>9</b> Amounts from line 6. . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)). . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2013 Schedule A, Part III, line 15 . . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2014</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2013</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	%

**19a 33 1/3% support tests - 2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

**b 33 1/3% support tests - 2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	<b>11a</b>	
<b>b</b> A family member of a person described in (a) above?	<b>11b</b>	
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	<b>11c</b>	

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	<b>1</b>	
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	<b>2</b>	

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	<b>1</b>	

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	<b>1</b>	
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	<b>2</b>	
<b>3</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	<b>3</b>	

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.		Yes	No
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> 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.	<b>2a</b>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .	<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

**1**  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> 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)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>		

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
<b>a</b> Average monthly value of securities	<b>1a</b>		
<b>b</b> Average monthly cash balances	<b>1b</b>		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>		
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
<b>e Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
<b>2</b> Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>		
<b>3</b> Subtract line 2 from line 1d	<b>3</b>		
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	<b>4</b>		
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>		
<b>6</b> Multiply line 5 by .035	<b>6</b>		
<b>7</b> Recoveries of prior-year distributions	<b>7</b>		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		

<b>Section C - Distributable Amount</b>			Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>		
<b>2</b> Enter 85% of line 1	<b>2</b>		
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>		
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>		
<b>5</b> Income tax imposed in prior year	<b>5</b>		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>		

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

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013 . . . . .			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 <b>Excess distributions carryover to 2015.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013 . . . . .			
e Excess from 2014 . . . . .			

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**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2014**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization FEEDING AMERICA	Employer identification number 36-3673599
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures . . . . . ▶ \$ \_\_\_\_\_
- 3 Volunteer hours . . . . . \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  Yes  No
- 4a Was a correction made? . . . . .  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2014



**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

**B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .		201,619.	
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .		558,887.	
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) . . . . .		760,506.	
<b>d</b> Other exempt purpose expenditures . . . . .		2,183,871,657.	
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) . . . . .		2,184,632,163.	
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.	
<b>If the amount on line 1e, column (a) or (b) is:</b>		<b>The lobbying nontaxable amount is:</b>	
Not over \$500,000		20% of the amount on line 1e.	
Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000.	
Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000.	
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000.	
Over \$17,000,000		\$1,000,000.	
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) . . . . .		250,000.	
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .		0	0
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .		0	0
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
<b>c</b> Total lobbying expenditures	829,914.	665,643.	597,333.	760,506.	2,853,396.
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
<b>f</b> Grassroots lobbying expenditures	299,671.	163,874.	135,318.	201,619.	800,482.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

Table with 2 columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); 2a Current year; 2b Carryover from last year; 2c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Blank lines for providing supplemental information as required by Part IV.

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**Part IV** Supplemental Information *(continued)*

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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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

2014

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Open to Public Inspection

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

Name of the organization

Employer identification number

FEEDING AMERICA

36-3673599

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2014

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other \_\_\_\_\_
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance             | <b>1c</b> |
| <b>d</b> Additions during the year     | <b>1d</b> |
| <b>e</b> Distributions during the year | <b>1e</b> |
| <b>f</b> Ending balance                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	19,727,638.	14,121,898.	10,953,250.	11,500,417.	10,830,221.
<b>b</b> Contributions	295,000.	3,577,773.	2,244,600.	30,000.	40,050.
<b>c</b> Net investment earnings, gains, and losses	-13,602.	2,083,225.	973,107.	-333,693.	1,251,997.
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs	196,662.	29,183.	26,422.	25,990.	395,490.
<b>f</b> Administrative expenses	25,521.	26,075.	22,637.	217,485.	226,361.
<b>g</b> End of year balance	19,786,853.	19,727,638.	14,121,898.	10,953,249.	11,500,417.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment  88.1000 %
  - b** Permanent endowment  9.3000 %
  - c** Temporarily restricted endowment  2.6000 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes                      | No                                  |
|--|--------------------------|-------------------------------------|
| <b>(i)</b> unrelated organizations   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>(ii)</b> related organizations  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>b</b> If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements		2,698,169.	1,651,676.	1,046,493.
<b>d</b> Equipment		297,172.	232,842.	64,330.
<b>e</b> Other		2,296,252.	1,314,184.	982,068.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,092,891.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(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) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) . . . . . ▶	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) CUR. PORTION OF LEASES PAYABLE	242,602.	
(3) LT PORTION LEASES PAYABLE	1,858,786.	
(4) LEASE DEPOSIT	41,493.	
(5) OTHER LIABILITIES	245.	
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶		2,143,126.

2. 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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 2200852165.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 2184632163.

Part XIII Supplemental Information.

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

SEE PAGE 5 followed by multiple horizontal dashed lines for supplemental information.

**Part XIII** Supplemental Information (continued)

## PART IV, LINE 2B

GIFT ANNUITIES: FEEDING AMERICA ENTERS INTO AGREEMENTS WITH DONORS IN WHICH THE DONOR CONTRIBUTES ASSETS IN EXCHANGE FOR AN ANNUITY TO BE PAID TO THE DONOR OR THEIR DESIGNEE FOR A SPECIFIED PERIOD OF TIME. ANNUALLY, THE LIABILITY IS RE-ADJUSTED BASED UPON ACTUARIAL PROJECTIONS OF FUTURE PAYMENTS OVER THE REMAINING LIFE EXPECTANCY OF THE DONOR. UPON TERMINATION, ANY RESIDUAL AMOUNT IS RECOGNIZED AS NON-OPERATING REVENUE.

## PART V, LINE 4-ENDOWMENTS

FEEDING AMERICA'S ENDOWMENT CONSISTS OF 13 INDIVIDUAL FUNDS AND TWO BOARD DESIGNATED FUNDS. PERMANENT ENDOWMENTS ARE DONOR-RESTRICTED FUNDS ESTABLISHED TO SUPPORT PROGRAM SERVICES AND MANAGEMENT AND GENERAL EXPENSES. BOARD DESIGNATED FUNDS WERE CREATED TO PROVIDE FINANCIAL STABILITY, RESOURCES FOR GROWTH AND CONTINGENCIES FOR FUTURE DISASTERS.

## FASB ASC 740 FOOTNOTE

## SCHEDULE D, PART X, LINE II

FEEDING AMERICA ACCOUNTS FOR UNCERTAIN TAX POSITIONS IN ACCORDANCE WITH ASC TOPIC 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. ASC TOPIC 740 ADDRESSES THE DETERMINATION OF HOW TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER ASC TOPIC 740, FEEDING AMERICA MUST RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY THE TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF



**Part XIII** Supplemental Information (continued)

BEING REALIZED UPON ULTIMATE SETTLEMENT. ASC TOPIC 740 ALSO PROVIDES GUIDANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES AND ACCOUNTING IN INTERIM PERIODS AND REQUIRES INCREASED DISCLOSURES. AS OF JUNE 30, 2015 AND 2014, FEEDING AMERICA DOES NOT HAVE A LIABILITY FOR UNRECOGNIZED TAX BENEFITS.

## PART XI LINE 2D

THIS LINE INCLUDE THE FOLLOWING NON-OPERATING EXPENSES:

CHANGE IN VALUE OF GIFT ANNUITIES	(\$34,818)
INTEREST EXPENSE RELATED TO LOAN PAYABLE PROGRAM	(\$1,938)
	-----
TOTAL	(\$36,756)
	=====

## PART XI LINE 4B

THIS LINE INCLUDES THE FOLLOWING NON-OPERATING EXPENSE:

GROCERY, TRUCKS, AND FISH PROCUREMENT PROGRAMS AMOUNT	(\$43,401,426)
RENT EXPENSE	(\$203,109)
	-----
TOTAL	(\$43,604,535)
	=====

**Part XIII** Supplemental Information (continued)

## PART XII LINE 2D

THIS LINE INCLUDE THE FOLLOWING NON-OPERATING EXPENSES:

GROCERY, TRUCKS, AND FISH PROCUREMENT PROGRAMS AMOUNT	\$43,402,630
NET PV OF LOSS ON SUBLEASE	(\$34,100)
PROVISION FOR UNCOLLECTIBLE CONTRIBUTIONS RECEIVABLE	\$2,208
RENT EXPENSE	\$203,108
OTHER	(\$1,202)
	-----
TOTAL	\$43,572,644
	=====

## PART XII LINE 4B

THIS LINE INCLUDES THE FOLLOWING NON-OPERATING EXPENSE:

INTEREST EXPENSE RELATED TO LOAN PAYABLE PROGRAM	\$1,938
	-----
TOTAL	\$1,938
	=====

**SCHEDULE G  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

FEEDING AMERICA

**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Employer identification number

36-3673599

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- |   |  |
|---|--|
| <b>a</b> <input checked="" type="checkbox"/> Mail solicitations               | <b>e</b> <input checked="" type="checkbox"/> Solicitation of non-government grants |
| <b>b</b> <input checked="" type="checkbox"/> Internet and email solicitations | <b>f</b> <input checked="" type="checkbox"/> Solicitation of government grants     |
| <b>c</b> <input checked="" type="checkbox"/> Phone solicitations              | <b>g</b> <input type="checkbox"/> Special fundraising events                       |
| <b>d</b> <input checked="" type="checkbox"/> In-person solicitations          |  |

- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>1</b> THOMPSON, HABIB & DENISON, INC.	DIRECT MAIL STRATEGY		X	16,556,689.	975,605.	15,581,084.
<b>2</b> BEACONFIRE CONSULTING	ON-LINE FUNDRAISING		X	7,697,906.	311,764.	7,386,142.
<b>3</b> PARADYSZ MATERA CO	STRATEGY & DONOR ACQ.		X	912,934.	230,264.	682,670.
<b>4</b> STRATEGIC FUNDRAISING, INC.	TELE-MARKETING		X	392,103.	124,513.	267,590.
<b>5</b> CHARITY DYNAMICS, INC.	FUNDRAISING		X	84,937.	15,645.	69,292.
<b>6</b> TELEFUND, INC.	TELE-MARKETING		X	57,529.	34,616.	22,913.
<b>7</b> THE STELTER COMPANY	DONOR ACQ.		X		12,491.	-12,491.
<b>8</b> BLACKBAUD	ANALYTICS		X		29,655.	-29,655.
<b>9</b> MDS COMMUNICATIONS	TELE-MARKETING		X	282,846.	450,115.	-167,269.
<b>10</b> SOCIAL CAPITAL INC.	STRATEGY		X		588,442.	-588,442.
<b>Total</b>				25,984,944.	2,773,110.	23,211,834.

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN,  
IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH,  
OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY,

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	<b>1</b> Gross receipts . . . . .				
	<b>2</b> Less: Contributions . . . . .				
	<b>3</b> Gross income (line 1 minus line 2). . . . .				
Direct Expenses	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Noncash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .				
	<b>7</b> Food and beverages . . . . .				
	<b>8</b> Entertainment . . . . .				
	<b>9</b> Other direct expenses . . . . .				
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				
	<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	<b>1</b> Gross revenue . . . . .				
Direct Expenses	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Noncash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				
	<b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ▶				

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
**a** Is the organization licensed to conduct gaming activities in each of these states? . . . . .  Yes  No  
**b** If "No," explain: \_\_\_\_\_

**10 a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No  
**b** If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	<b>13a</b>	%
b An outside facility	<b>13b</b>	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.
- c If "Yes," enter name and address of the third party:
 

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

Director/officer       Employee       Independent contractor

- 17 Mandatory distributions:
  - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
  - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

FORM SCH G PART I LINE 2B(III)

LINE 3, PARADYSZ MATERA CO.

ADDITIONAL PAYMENTS MADE TO PARADYSZ FOR LIST FEES AND SHIPPING COST RELATED TO OUR FUNDRAISING PROGRAM TOTALED \$466,262. FEEDING AMERICA REQUIRES THAT ALL INVOICES CLEARLY IDENTIFIED THE TYPE OF SERVICE BEING BILLED AND THE TYPE OF EXPENSE BEING REIMBURSED.

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	<b>13a</b>	%
b An outside facility	<b>13b</b>	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

Director/officer       Employee       Independent contractor

- 17 Mandatory distributions:
  - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
  - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

FORM SCH G PART I LINE 2B(III)

LINE 10, SOCIAL CAPITAL PARTNERSHIPS

FEEDING AMERICA ENGAGES SOCIAL CAPITAL PARTNERSHIPS, A CONSULTANT AGENCY THAT BOLSTERS FUNDRAISING AND STRATEGIC PARTNERSHIPS FOR NONPROFITS, TO BUILD SUSTAINABLE FUNDRAISING REVENUE FOR OUR ORGANIZATION. SOCIAL CAPITAL PARTNERSHIPS PROVIDES FUNDRAISING STRATEGY GUIDANCE, EXPERT ADVICE AND TRAINING, AND DONOR COMMUNICATION SUPPORT. ADDITIONALLY,

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	<b>13a</b>	%
b An outside facility	<b>13b</b>	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

Director/officer       Employee       Independent contractor

- 17 Mandatory distributions:
  - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
  - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SOCIAL CAPITAL PARTNERSHIPS SUPPORTS FEEDING AMERICA'S DEVELOPMENT

RELATIONSHIP MANAGERS IN THEIR STEWARDSHIP OF STRATEGIC INDIVIDUAL

CORPORATE AND FOUNDATION PARTNERS.

**SCHEDULE I  
(Form 990)**

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

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

OMB No. 1545-0047

**2014**

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Inspection**

Department of the Treasury  
Internal Revenue Service

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> FOOD BANK OF ALASKA, INC. 2121 SPAR AVENUE ANCHORAGE, AK 99501-1886	92-0073175	501 (C) (3)	225,814.	2,468,349.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> BAY AREA FOOD BANK 5248 MOBILE SOUTH STREET THEODORE, AL 36582	63-08221997	501 (C) (3)	451,240.	21,013,954.	APR	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(3)</b> COMMUNITY FOOD BANK OF CENTRAL ALABAMA 107 WALTER DAVIS DRIVE BIRMINGHAM, AL 35209	63-0837956	501 (C) (3)	139,995.	8,210,638.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> FOOD BANK OF NORTH ALABAMA 2000 B. VERNON AVE. HUNTSVILLE, AL 35805	63-0884372	501 (C) (3)	89,136.	6,014,556.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> MONTGOMERY AREA FOOD BANK, INC. 521 TRADE CENTER ST MONTGOMERY AL 36108	68-0981846	501 (C) (3)	54,798.	17,971,786.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> WEST ALABAMA FOOD BANK 3160 MCFARLAND BLVD NORTHPORT AL 35476	63-0947676	501 (C) (3)	20,149.		CASH	N/A	FIGHT HUNGER
<b>(7)</b> ARKANSAS FOODBANK 4301 W 65TH ST LITTLE ROCK, AR 72209	71-0596734	501 (C) (3)	221,586.	20,948,349.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> FOOD BANK OF NORTHEAST ARKANSAS 3414 ONE PLACE JONESBORO, AR 72402	71-0810999	501 (C) (3)	253,609.	5,251,888.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> HARVEST TEXARKANA REGIONAL FOOD BANK, INC. 3120 EAST 19TH STREET TEXARKANA, AR 71854	75-2671647	501 (C) (3)	231,247.	1,707,334.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> NORTHWEST ARKANSAS FOOD BANK 1378 JUNE SELF DR BETHEL HEIGHTS AR 72764	71-0680830	501 (C) (3)	204,758.	6,694,660.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> RIVER VALLEY REGIONAL FOOD BANK 1420 N. 32ND STREET FT. SMITH, AR 72914	71-0388927	501 (C) (3)	158,454.	6,199,467.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> COMMUNITY FOOD BANK OF SOUTHERN ARIZONA 3003 S COUNTRY CLUB RD TUCSON AZ 85726	51-0192519	501 (C) (3)	143,038.	14,645,498.	APR	FOOD	FIGHT HUNGER
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	▲						
<b>3</b> Enter total number of other organizations listed in the line 1 table	▲						

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Schedule I (Form 990) (2014)



**SCHEDULE I  
(Form 990)**

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

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

OMB No. 1545-0047

**2014**

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Department of the Treasury  
Internal Revenue Service

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> ST. MARY'S FOOD BANK ALLIANCE 2831 N. 31ST AVENUE PHOENIX, AZ 85009	23-7353532	501 (C) (3)	533,227.	17,825,303.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> UNITED FOOD BANK 245 SOUTH NINA DRIVE MESA, AZ 85210	86-0505273	501 (C) (3)	64,288.	9,266,730.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> YUMA COMMUNITY FOOD BANK 2404 E 24TH ST. STE. A YUMA, AZ 85365	86-0457836	501 (C) (3)	14,640.	1,356,718.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> ALAMEDA COUNTY COMMUNITY FOOD BANK 7900 EDGEWATER DRIVE OAKLAND, CA 94621	94-2960297	501 (C) (3)	518,788.	1,441,204.	APR-FMV	FOOD-TECH	FIGHT HUNGER
<b>(5)</b> CALIFORNIA ASSOCIATION OF FOOD BANKS 1624 FRANKLIN ST STE 722 OAKLAND CA 94612	68-0392816	501 (C) (3)	205,301.	10,605,833.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> COMMUNITY FOOD BANK 3403 E. CENTRAL AVE FRESNO, CA 93725	77-0320851	501 (C) (3)	197,677.	17,999,651.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> FEEDING AMERICA RIVERSIDE SAN BERNARDINO CO 2950B JEFFERSON ST RIVERSIDE CA 92504	33-0072922	501 (C) (3)	215,762.	9,070,464.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> FEEDING AMERICA SAN DIEGO 9455 WAPLES ST STE 135 SAN DIEGO CA 92121	26-0457477	501 (C) (3)	423,524.	5,138,635.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> FIND FOOD BANK 83-775 CITRUS AVE INDIO, CA 92202	33-0006007	501 (C) (3)	41,000.		CASH	N/A	FIGHT HUNGER
<b>(10)</b> FOOD BANK COALITION OF SAN LUIS OBISPO COUN P.O. BOX 2070 PASO ROBLES, CA 93447	77-0210727	501 (C) (3)	45,950.	505,370.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> FOOD BANK FOR MONTEREY COUNTY 815 W. MARKET ST STE 5 SALINAS CA 93901	77-0270228	501 (C) (3)	213,187.	10,720,304.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> FOOD BANK OF CONTRA COSTA AND SOLANO 4010 NELSON AVE CONCORD, CA 94520	94-2418054	501 (C) (3)					

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶**

**3** Enter total number of other organizations listed in the line 1 table **▶**

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Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

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

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Name of the organization

Employer identification number

FEEDING AMERICA

36-3673599

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> FOOD SHARE, INC. 4156 SOUTHBANK ROAD OXNARD, CA 93036	77-0018162	501 (C) (3)	103,385.	1,507,048.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> FOODEBANK OF SANTA BARBARA COUNTY 4554 HOLLISTER AVE SANTA BARBARA CA 93110	95-2596191	501 (C) (3)	210,699.	932,107.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> LOS ANGELES REGIONAL FOOD BANK 1734 E 41ST ST LOS ANGELES CA 90058	95-3135649	501 (C) (3)	334,961.	12,997,819.	APR-FMV	FOOD-TECH	FIGHT HUNGER
<b>(4)</b> PLACER FOOD BANK 8284 INDUSTRIAL AVE ROSEVILLE, CA 95678	94-1740316	501 (C) (3)	113,467.	2,902,152.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> REDWOOD EMPIRE FOOD BANK 3990 BRICKWAY BLVD SANTA ROSA, CA 95403	68-0121855	501 (C) (3)	115,582.	527,395.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> SECOND HARVEST FOOD BANK OF ORANGE COUNTY 8014 MARINE WAY IRVINE, CA 92618	95-3033494	501 (C) (3)	270,727.	6,288,821.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> SECOND HARVEST FOOD BANK OF SAN JOAQUIN AND 704 E INDUSTRIAL PARK DR MANTECA CA 95337	68-0376587	501 (C) (3)	48,953.	3,024,691.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> SECOND HARVEST FOOD BANK OF SANTA CLARA & S 750 CURTNER AVENUE SAN JOSE, CA 95125	94-2612101	501 (C) (3)	338,918.	4,566,544.	APR-FMV	FOOD-TECH	FIGHT HUNGER
<b>(9)</b> SECOND HARVEST FOOD BANK SANTA CRUZ COUNTY 800 OHLONE PKWY WATSONVILLE CA 95076	77-0326685	501 (C) (3)	53,314.	1,278.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> SF-MARIN FOOD BANKS 900 PENNSYLVANIA AVE SAN FRANCISCO CA 94107	94-3041517	501 (C) (3)	105,306.	4,994,559.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> CARE AND SHARE FOOD BANK 2605 PREAMBLE PT COLORADO SPRINGS CO 80915	84-0731930	501 (C) (3)	157,256.	14,602,390.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> COMMUNITY FOOD SHARE 650 S. TAYLOR AVE. LOUISVILLE, CO 80027	74-2227731	501 (C) (3)	30,530.	2,455,513.	APR	FOOD	FIGHT HUNGER

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶**
- 3** Enter total number of other organizations listed in the line 1 table **▶**

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Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

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

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

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- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> FOOD BANK FOR LARIMER COUNTY 1301 BLUE SPRUCE FT., COLLINS, CO 80524	74-2336171	501 (C) (3)	116,312.	3,850,667.	APR.	FOOD	FIGHT HUNGER
<b>(2)</b> FOOD BANK OF THE ROCKIES 10700 E. 45TH AVE DENVER, CO 80239	84-0772672	501 (C) (3)	395,954.	33,312,044.	APR.	FOOD	FIGHT HUNGER
<b>(3)</b> WELD FOOD BANK 1108 H STREET GREELEY, CO 80631	74-2244826	501 (C) (3)	81,057.	1,510,377.	APR.	FOOD	FIGHT HUNGER
<b>(4)</b> CONNECTICUT FOOD BANK 150 BRADLEY ST EAST HAVEN, CT 06512	06-1063025	501 (C) (3)	292,081.	5,856,520.	APR.	FOOD	FIGHT HUNGER
<b>(5)</b> FOODSHARE 450 WOODLAND AVE BLOOMFIELD CT 06002	22-2474771	501 (C) (3)	268,360.	4,320,103.	APR.	FOOD	FIGHT HUNGER
<b>(6)</b> CAPITAL AREA FOOD BANK 4900 PUERTO RICO AVE NE WASHINGTON DE 20017	52-1167581	501 (C) (3)	291,910.	14,895,519.	APR-FMV	FOOD-TECH	FIGHT HUNGER
<b>(7)</b> FOOD BANK OF DELAWARE 14 GARFIELD WAY NEWARK, DE 19713	51-0258984	501 (C) (3)	312,964.	2,538,646.	APR.	FOOD	FIGHT HUNGER
<b>(8)</b> ALL FAITHS FOOD BANK 8171 BLAIKIE CT. SARASOTA, FL 34240	65-0115814	501 (C) (3)	78,560.	7,112,066.	APR.	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(9)</b> AMERICA'S SECOND HARVEST OF THE BIG BEND, I 4446 ENTREPOT BLVD TALLAHASSEE, FL 32310	59-2610345	501 (C) (3)	62,474.	4,428,957.	APR.	FOOD	FIGHT HUNGER
<b>(10)</b> BREAD OF THE MIGHTY FOOD BANK PO BOX 5086 GAINESVILLE, FL 32627	59-2805577	501 (C) (3)	31,000.		CASH	N/A	FIGHT HUNGER
<b>(11)</b> FEEDING AMERICA TAMPA BAY 4702 TRANSPORT DR BLDG 6 TAMPA FL 33605	36-3673599	501 (C) (3)	333,154.	44,921,851.	APR.	FOOD	FIGHT HUNGER
<b>(12)</b> FEEDING NORTHEAST FLORIDA 1116 EDGEWOOD AVE N JACKSONVILLE FL 32254	46-5014769	501 (C) (3)	576,374.	410.	APR.	FOOD	FIGHT HUNGER

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶**

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

**Part I General Information on Grants and Assistance**

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1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> FEEDING SOUTH FLORIDA							
2501 SW 32 TERRACE PEMROKE PARK, FL 33023	59-2097350	501 (C) (3)	469,762.	20,285,387.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> HARRY CHAPIN FOOD BANK OF SOUTHWEST FLORIDA							
3760 FOWLER ST. FT. MYERS, FL 33901	59-2332120	501 (C) (3)	189,150.	11,776,907.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> SECOND HARVEST FOOD BANK OF CENTRAL FLORIDA							
411 MERCY DRIVE ORLANDO, FL 32805	59-2142315	501 (C) (3)	318,328.	60,924,553.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> TREASURE COAST FOOD BANK							
401 ANGLE RD. FT. PIERCE, FL 34947	65-0123281	501 (C) (3)	145,740.	7,706,653.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> AMERICA'S SECOND HARVEST OF COASTAL GEORGIA							
2501 E PRESIDENT ST SAVANNAH GA 31404	58-1442013	501 (C) (3)	88,537.	5,535,804.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> ATLANTA COMMUNITY FOOD BANK							
732 JOSEPH E LOWERY BLVD NW ATL GA 30318	58-1376648	501 (C) (3)	381,886.	44,603,304.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> FEEDING THE VALLEY FOOD BANK							
5928 COCA COLA BLVD COLUMBUS, GA 31908-8904	58-1498131	501 (C) (3)	46,846.	4,379,150.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> FOOD BANK OF NORTHEAST GEORGIA							
861 NEWTON BRIDGE ROAD ATHENS, GA 30604	58-1938066	501 (C) (3)	55,297.	10,784,820.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> GEORGIA FOOD BANK ASSOCIATION							
732 JOSEPH LOWERY BLVD NW ATLANTA, GA 30318	58-2374577	501 (C) (3)	125,000.		CASH	N/A	FIGHT HUNGER
<b>(10)</b> GOLDEN HARVEST FOOD BANK							
3310 COMMERCE DRIVE AUGUSTA, GA 30909-4417	58-1466516	501 (C) (3)	109,904.	11,270,001.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> MIDDLE GEORGIA COMMUNITY FOOD BANK							
4490 OCMULGEE E BLVD MACON GA 31217	58-2484086	501 (C) (3)	19,847.	3,597,668.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> SECOND HARVEST OF SOUTH GEORGIA, INC							
1411 HARBIN CIRCLE VALDOSTA, GA 31601	58-2208545	501 (C) (3)	113,507.	10,849,084.	APR	FOOD	FIGHT HUNGER

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▲**
- 3** Enter total number of other organizations listed in the line 1 table **▲**

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Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> HAWAII FOODBANK, INC. 2611 KILHAU ST HONOLULU, HI 96819	99-0220699	501 (C) (3)	26,212.	3,330,018.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> FOOD BANK OF IOWA 2220 E. 17TH STREET DES MOINES, IA 50316	42-1177880	501 (C) (3)	107,547.	6,500,504.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> HACAP FOOD RESERVOIR 1515 HAMKEYE DRIVE HIWATHA, IA 52233	42-0898405	501 (C) (3)	36,346.	1,326,832.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> ILLIOWA 4010 KIMMEL DRIVE MOLINE, IA 52802	36-2147342	501 (C) (3)		1,633,821.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> IOWA FOOD BANK ASSOCIATION C/O FOOD BANK OF IOWA DES MOINES, IA 50316	27-1554605	501 (C) (3)	150,000.		CASH	N/A	FIGHT HUNGER
<b>(6)</b> NORTHEAST IOWA FOOD BANK 1605 LAFAYETTE STREET WATERLOO, IA 50703	42-1169648	501 (C) (3)	81,348.	1,832,343.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> RIVER BEND FOOD BANK 4010 KIMMEL DRIVE DAVENPORT, IA 52802	36-3147342	501 (C) (3)	103,242.	6,584,502.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> THE IDAHO FOODBANK 3562 TK AVENUE BOISE, ID 83705	82-0425400	501 (C) (3)	133,545.	5,616,888.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> CENTRAL ILLINOIS FOODBANK 1937 E. COOK SPRINGFIELD, IL 62703	37-1106465	501 (C) (3)	130,985.	5,063,448.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> EASTERN ILLINOIS FOODBANK 2405 NORTH SHORE DRIVE URBANA, IL 61802	37-1130252	501 (C) (3)	77,103.	3,220,794.	APR	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(11)</b> GREATER CHICAGO FOOD DEPOSITORY 4100 WEST ANN LURIE PLACE CHICAGO, IL 60632	36-2971864	501 (C) (3)	394,358.	11,710,705.	APR	FOOD-TECH	FIGHT HUNGER
<b>(12)</b> GREATER CHICAGO/N.W. INDIANA 4100 WEST ANN LURIE PLACE CHICAGO, IL 60632	36-2971864	501 (C) (3)		5,254,661.	APR	FOOD	FIGHT HUNGER
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	.....▲						
<b>3</b> Enter total number of other organizations listed in the line 1 table	.....▲						

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Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

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

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OMB No. 1545-0047

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

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- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> NORTHERN ILLINOIS FOOD BANK 273 DEARBORN CT. GENEVA, IL 60134	36-3203648	501 (C) (3)	412,127.	26,041,213.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> PEORIA AREA FOOD BANK 721 W. MCBEAN PEORIA, IL 61605	37-6058636	501 (C) (3)	29,205.	2,135,749.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> COMMUNITY HARVEST FOOD BANK OF NORTHEAST IN 999 EAST TILLMAN ROAD FORT WAYNE, IN 46855	31-1100607	501 (C) (3)	105,638.	9,118,148.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> FOOD BANK OF NORTHERN INDIANA 702 S CHAPIN ST SOUTH BEND IN 46601	35-1898055	501 (C) (3)	30,613.	3,878,818.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> FOOD BANK OF NORTHWEST INDIANA, INC. 2248-50 W. 35TH AVENUE GARY, IN 46408-1849	35-1528285	501 (C) (3)	90,920.	914,243.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> FOOD FINDERS FOOD BANK INC. 50 OLYMPIA CT. LAFAYETTE, IN 47909	31-1020198	501 (C) (3)	108,097.	4,328,425.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> GLEANERS FOOD BANK OF INDIANA, INC. 3737 WALDEMER AVE. INDIANAPOLIS, IN 46241	35-1483868	501 (C) (3)	480,488.	16,179,991.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> HOOSIER HILLS FOOD BANK 2333 W INDUSTRIAL PARK DR BLM IN 47404	31-1051402	501 (C) (3)	75,733.	2,772,811.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> SECOND HARVEST FOOD BANK OF EAST CENTRAL IN 6621 N. OLD SR 3 MUNCIE, IN 47303	31-1111795	501 (C) (3)	36,466.	7,059,425.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> TERRE HAUTE CATHOLIC CHARITIES FOODBANK 1356 LOCUST STREET TERRE HAUTE, IN 47807	35-1577679	501 (C) (3)	13,424.	1,661,853.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> TRI-STATE FOOD BANK, INC. 801 E MICHIGAN ST EVANSVILLE IN 47711	35-1539870	501 (C) (3)	49,996.	6,999,546.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> KANSAS FOOD BANK 1919 E. DOUGLAS WICHITA, KS 67211	48-0959213	501 (C) (3)	302,013.	11,101,526.	APR	FOOD	FIGHT HUNGER
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	▶						
<b>3</b> Enter total number of other organizations listed in the line 1 table	▶						

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Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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OMB No. 1545-0047

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

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- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> DARE TO CARE FOOD BANK 5803 FERN VALLEY RD LOUISVILLE KY 40232	23-7345952	501 (C) (3)	228,759.	15,458,477.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> FEEDING AMERICA, KENTUCKY'S HEARTLAND 313 PETERSON DR., ELIZABETHTOWN, KY 42701	61-1043635	501 (C) (3)	83,392.	9,816,147.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> GOD'S PANTRY FOOD BANK, INC. 1685 JAGGIE FOX WAY LEXINGTON, KY 40511	31-0979404	501 (C) (3)	232,743.	14,859,465.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> WOKIT 1685 JAGGIE FOX WAY LEXINGTON, KY 40511	13-9150000	501 (C) (3)		4,929,998.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> FOOD BANK OF CENTRAL LOUISIANA 3223 BALDWIN AVENUE ALEXANDRIA, LA 71301	72-1154072	501 (C) (3)	29,138.	3,662,894.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> FOOD BANK OF NORTHEAST LOUISIANA 4600 CENTRAL AVE MONROE, LA 71211	72-1333809	501 (C) (3)	12,717.	3,179,592.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> FOOD BANK OF NORTHWEST LOUISIANA 2307 TEXAS AVENUE SHREVEPORT, LA 71103	72-1328890	501 (C) (3)	17,706.	5,807,098.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> GREATER BATON ROUGE FOOD BANK 10600 S CHOCTAW DR BATON ROUGE LA 70815	72-1065318	501 (C) (3)	23,655.	6,376,472.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> LOUISIANA FOOD BANK ASSOCIATION 1555 KNOLLWOOD DRIVE BATON ROUGE, LA 70808	27-0667900	501 (C) (3)	292,500.		CASH	N/A	FIGHT HUNGER
<b>(10)</b> SECOND HARVEST FOOD BANK OF GREATER NEW ORL 700 EDWARDS AVENUE NEW ORLEANS, LA 70123	72-0956468	501 (C) (3)	180,950.	19,611,721.	APR	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(11)</b> THE FOOD BANK OF WESTERN MASSACHUSETTS 97 NORTH HATFIELD ROAD HATFIELD, MA 01038	04-2751023	501 (C) (3)	220,389.	1,684,352.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> THE GREATER BOSTON FOOD BANK 70 SOUTH BAY AVE BOSTON, MA 02118-2700	04-2717782	501 (C) (3)	233,952.	16,503,939.	APR	FOOD	FIGHT HUNGER

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶**
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Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

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

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> WORCESTER COUNTY FOOD BANK, INC. 474 BOSTON TURNPIKE SHREWSBURY, MA 01545	04-3071457	501 (C) (3)	65,317.	1,902,631.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> MARYLAND FOOD BANK 2200 HALETHORPE FARMS RD BALTIMORE MD 21227	52-1135690	501 (C) (3)	346,703.	9,576,834.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> GOOD SHEPHERD FOOD BANK 3121 HOTEL ROAD AUBURN, ME 04211-1807	22-2986809	501 (C) (3)	437,839.	24,988,130.	APR	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(4)</b> FEEDING AMERICA WEST MICHIGAN FOOD BANK 864 W RIVER CTR DR COMSTOCK PARK MI 49321	38-2439659	501 (C) (3)	248,766.	10,752,741.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> FOOD BANK OF EASTERN MICHIGAN 2312 LAPPEER ROAD FLINT, MI 48503	38-2379678	501 (C) (3)	66,887.	7,491,408.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> FOOD BANK OF SOUTH CENTRAL MICHIGAN 5451 WAYNE ROAD BATTLE CREEK, MI 49016-7327	38-2445948	501 (C) (3)	31,686.	4,033,201.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> FOOD GATHERERS 1 CARROT WAY ANN ARBOR, MI 48105	38-2853858	501 (C) (3)	155,164.	1,952,974.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> FORGOTTEN HARVEST 21800 GREENFIELD ROAD OAK PARK, MI 48237	38-2926476	501 (C) (3)	426,877.	17,220,237.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> GLEANERS COMMUNITY FOOD BANK OF SOUTHEASTER 2131 BEAUFAIT STREET DETROIT, MI 48207	38-2156255	501 (C) (3)	379,326.	4,286,213.	APR-FMV	FOOD-TECH	FIGHT HUNGER
<b>(10)</b> GREATER LANSING FOOD BANK 919 FILLLEY ST. LANSING, MI 48906	53-0196605	501 (C) (3)	44,332.	2,331,281.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> CHANNEL ONE FOOD BANK 131 35TH STREET, SE ROCHESTER, MN 55904	41-1379713	501 (C) (3)	44,176.	3,304,787.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> NORTH COUNTRY FOOD BANK, INC. 424 NORTH BROADWAY CROOKSTON, MN 56716	41-1459758	501 (C) (3)	20,873.	1,869,100.	APR	FOOD	FIGHT HUNGER

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶**
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Schedule I (Form 990) (2014)



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

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Name of the organization

Employer identification number

FEEDING AMERICA

36-3673599

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**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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<b>(1)</b> SECOND HARVEST HEARTLAND 1140 GERVAIS AVENUE ST. PAUL, MN 55109-2042	23-7417654	501 (C) (3)	468,734.	55,443,409.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> SECOND HARVEST NORTH CENTRAL FOOD BANK 2222 CROMELL DRIVE GRAND RAPIDS, MN 55744	41-1782776	501 (C) (3)	14,709.	1,163,114.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> SECOND HARVEST NORTHERN LAKES FOOD BANK 4503 AIRPARK BOULEVARD DULUTH, MN 55811	36-3479964	501 (C) (3)	14,354.	2,084,398.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> HARVESTERS - THE COMMUNITY FOOD NETWORK 3801 TOPPING AVENUE KANSAS CITY, MO 64129	43-1208663	501 (C) (3)	111,246.	26,395,541.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> OZARKS FOOD HARVEST 2810 N. CEDARBROOK SPRINGFIELD, MO 65803	43-1426384	501 (C) (3)	118,899.	12,990,061.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> SECOND HARVEST COMMUNITY FOOD BANK 915 DOUGLAS ST. JOSEPH, MO 64505	43-1268319	501 (C) (3)	40,973.	3,131,866.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> SOUTHEAST MISSOURI FOOD BANK 600 STATE HIGHWAY H SIKESTON, MO 63801	43-1395863	501 (C) (3)	87,537.	4,934,327.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> ST. LOUIS AREA FOODBANK 70 CORPORATE WOODS DR BRIDGETON MO 63044	43-1253102	501 (C) (3)	254,689.	26,891,549.	APR	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(9)</b> THE FOOD BANK FOR CENTRAL & NORTHEAST MISSO 2101 VANDIVER DR STE B COLUMBIA MO 65202	43-1238934	501 (C) (3)	258,855.	28,050,913.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> MISSISSIPPI FOOD NETWORK 440 W. BEATTY STREET JACKSON, MS 39205	64-0676325	501 (C) (3)	54,629.	8,394,407.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> MONTANA FOOD BANK NETWORK 5625 EXPRESSWAY MISSOULA, MT 59808	81-0421243	501 (C) (3)	74,088.	4,878,940.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> FOOD BANK OF CENTRAL & EASTERN NORTH CAROLI 3808 TARHEEL DRIVE RALEIGH, NC 27609	56-1283426	501 (C) (3)	485,610.	47,476,716.	APR	FOOD	FIGHT HUNGER
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	▶						
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<b>(1)</b> FOOD BANK OF THE ALBEMARLE 109 TIDEWATER WY ELIZABETH CITY NC 27906	56-1341658	501 (C) (3)	137,972.	4,469,107.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> INTER-FAITH FOOD SHUTTLE 1001 BLAIR DRIVE RALEIGH, NC 27603	56-1753180	501 (C) (3)	141,551.	3,649,231.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> MANNA FOODBANK 627 SWANNANOVA RIVER RD ASHEVILLE, NC 28805	58-1514800	501 (C) (3)	197,556.	6,540,079.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> NORTH CAROLINA ASSN OF FA FOOD BANKS PO BOX 18288 RALEIGH, NC 27619-8288	27-3181226	501 (C) (3)	250,000.		CASH	N/A	FIGHT HUNGER
<b>(5)</b> SECOND HARVEST FOOD BANK OF METROLINA 500 B SPRATT ST. CHARLOTTE, NC 28206	56-1647395	501 (C) (3)	312,359.	44,890,611.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> SECOND HARVEST FOOD BANK OF NW NORTH CAR 3655 REED STREET WINSTON-SALEM, NC 27107	58-1457912	501 (C) (3)	434,386.	21,098,227.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> SECOND HARVEST FOOD BANK OF SE NORTH CAR 406 DEEP CREEK RD FAYETTEVILLE NC 28302	56-0845795	501 (C) (3)	98,289.	10,274,444.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> GREAT PLAINS FOOD BANK 1720 3RD AVENUE NORTH FARGO, ND 58102	54-0226421	501 (C) (3)	57,412.	6,046,972.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> FOOD BANK FOR THE HEARTLAND 10525 J STREET OMAHA, NE 68127-1016	47-0637701	501 (C) (3)	408,148.	10,439,017.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> FOOD BANK OF LINCOLN, INC. 4840 DORIS BAIR CIR, STE A LINCOLN NE 68529	47-0640293	501 (C) (3)	129,593.	4,940,320.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> NEW HAMPSHIRE FOOD BANK 700 E INDUSTRIAL PARK DR MHT NH 03109	02-0222163	501 (C) (3)	109,441.	9,292,122.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> COMMUNITY FOODBANK OF NEW JERSEY 31 EVANS TERMINAL HILLSIDE, NJ 07205-2400	22-2423882	501 (C) (3)	788,910.	8,853,958.	APR	FOOD	FIGHT HUNGER
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	▲						
<b>3</b> Enter total number of other organizations listed in the line 1 table	▲						

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Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

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

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

OMB No. 1545-0047

**2014**

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Department of the Treasury  
Internal Revenue Service

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> FOOD BANK OF SOUTH JERSEY 1501 JOHN TIPTON BLVD PENNSAUKEN NJ 08110	22-26223089	501 (C) (3)	117,763.	1,704,375.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> MERCER STREET FRIENDS FOOD BANK 824 SILVIA ST. EWING, NJ 08628	21-0733990	501 (C) (3)	25,000.		CASH	N/A	FIGHT HUNGER
<b>(3)</b> NORWESCAP FOOD BANK 201 N. BROAD STREET PHILLIPSBURG, NJ 08865	22-1777156	501 (C) (3)	15,000.		CASH	N/A	FIGHT HUNGER
<b>(4)</b> THE FOODBANK OF MONMOUTH AND OCEAN COUNTIES 3300 ROUTE 66 NEPTUNE, NJ 07753	22-26222522	501 (C) (3)	171,866.	4,583,164.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> ROADRUNNER FOOD BANK 5840 OFFICE BLVD NE ALBUQUERQUE, NM 87109	85-0278525	501 (C) (3)	361,201.	30,797,611.	APR	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(6)</b> FOOD BANK OF NORTHERN NEVADA 550 ITALY DR MCCARRAN, NV 89434	94-2924979	501 (C) (3)	418,437.	9,750,511.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> THREE SQUARE FOOD BANK 4190 N. PECOS RD. LAS VEGAS, NV 89115	30-0396918	501 (C) (3)	367,099.	17,386,466.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> CITY HARVEST 6 E 32ND ST 5 FL NEW YORK NY 10016	13-3170676	501 (C) (3)	131,915.	13,319,584.	APR-FMV	FOOD-TECH	FIGHT HUNGER
<b>(9)</b> FOOD BANK FOR NEW YORK CITY 355 FOOD CENTER DR. NEW YORK, NY 10474	13-3179546	501 (C) (3)	235,374.	25,970,186.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> FOOD BANK FOR WESTCHESTER 200 CLEARBROOK ROAD ELMFORD, NY 10523	13-3507988	501 (C) (3)	50,934.	1,579,063.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> FOOD BANK OF CENTRAL NEW YORK 7066 INTERSTATE ISLAND RD SYRACUSE NY 13209	22-2816988	501 (C) (3)	258,665.	4,628,234.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> FOOD BANK OF THE SOUTHERN TIER 388 UPPER OAKWOOD AVENUE ELMIRA, NY 14903	20-8808059	501 (C) (3)	188,322.	4,387,109.	APR	FOOD	FIGHT HUNGER

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶**

**3** Enter total number of other organizations listed in the line 1 table **▶**

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Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

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

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

FEEDING AMERICA

Employer identification number

36-3673599

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- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
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**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> FOOD BANK OF WESTERN NEW YORK 91 HOLT STREET BUFFALO, NY 14206	22-2470820	501 (C) (3)	81,384.	4,026,334.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> FOODLINK, INC. 1999 MT READ BLVD ROCHESTER NY 14615	23-2428804	501 (C) (3)	344,683.	5,903,636.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> ISLAND HARVEST 199 SECOND STREET MINEOLA, NY 11501	11-3136350	501 (C) (3)	107,633.	3,079,719.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> LONG ISLAND CARES, INC. 10 DAVIDS DRIVE HAUPPAUGE, NY 11788	11-2524512	501 (C) (3)	50,024.	885,218.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> REGIONAL FOOD BANK OF NORTHEASTERN NEW YORK 965 ALBANY SHAKER RD. LATHAM, NY 12110	22-2470885	501 (C) (3)	259,978.	17,249,313.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> AKRON-CANTON REGIONAL FOODBANK 350 OPPORTUNITY PARKWAY AKRON, OH 44307	34-1369388	501 (C) (3)	201,278.	13,681,492.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> FREESTORE FOODBANK 1141 CENTRAL PARKWAY CINCINNATI, OH 45202	23-7122205	501 (C) (3)	459,987.	9,805,866.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> GREATER CLEVELAND FOOD BANK, INC. 15500 S WATERLOO RD CLEVELAND OH 44110	34-1292848	501 (C) (3)	412,574.	12,980,832.	APR	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(9)</b> MID-OHIO FOODBANK 3960 BROOKHAM DR. GROVE CITY, OH 43123	31-0865343	501 (C) (3)	711,084.	29,424,602.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> SE OHIO FOODBANK 1005 CIC DRIVE LOGAN, OH 43138	31-0718322	501 (C) (3)	55,807.	955,876.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> SECOND HARVEST FOOD BANK OF NORTH CENTRAL O 7445 DEER TRAIL LANE LORAIN, OH 44053	34-1446685	501 (C) (3)	55,946.	2,858,783.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> SECOND HARVEST FOOD BANK OF THE MAHONING VA 2805 SALT SPRINGS ROAD YOUNGSTOWN, OH 44509	34-1380074	501 (C) (3)	81,923.	2,706,625.	APR	FOOD	FIGHT HUNGER
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	.....▲						
<b>3</b> Enter total number of other organizations listed in the line 1 table	.....▲						

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Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

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

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

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- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> SECOND HARVEST FOODBANK OF CLARK, CHAMPAIGN 701 E COLUMBIA ST SPRINGFIELD OH 45503	31-0536968	501 (C) (3)	12,140.	1,300,174.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> SHARED HARVEST FOODBANK 5901 DIXIE HIGHWAY FAIRFIELD, OH 45014-4207	31-1096571	501 (C) (3)	136,953.	3,811,627.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> THE FOODBANK, INC. 56 ARMOR PLACE DAYTON, OH 45417	86-1082880	501 (C) (3)	26,447.	3,612,872.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> TOLEDO NORTHWESTERN OHIO FOOD BANK 24 EAST WOODRUFF AVENUE TOLEDO, OH 43604	34-1441016	501 (C) (3)	42,697.	5,337,332.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> WEST OHIO FOOD BANK 1380 EAST KIBBY STREET LIMA, OH 45804	34-1587528	501 (C) (3)	23,137.	2,961,010.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> COMMUNITY FOOD BANK OF EASTERN OKLAHOMA 1304 N. KENOSHA AVE. TULSA, OK 74106	73-0776404	501 (C) (3)	268,302.	16,985,000.	APR	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(7)</b> REGIONAL FOOD BANK OF OKLAHOMA 3355 SOUTH PURDUE OKLAHOMA CITY, OK 73179	73-1100380	501 (C) (3)	357,835.	22,721,556.	APR	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(8)</b> FOOD FOR LANE COUNTY 770 BAILEY HILL ROAD EUGENE, OR 97402	93-0888347	501 (C) (3)	26,000.		CASH	N/A	FIGHT HUNGER
<b>(9)</b> MARION POLK FOOD SHARE 1660 SALEM INDUSTRIAL DR NE SALEM, OR 97238	94-3034161	501 (C) (3)	55,000.		CASH	N/A	FIGHT HUNGER
<b>(10)</b> OREGON FOOD BANK 7900 NE 33RD DRIVE PORTLAND, OR 97238-5370	93-0785786	501 (C) (3)	487,675.	17,185,189.	APR	FOOD-TRANSPORTATION	FIGHT HUNGER
<b>(11)</b> ST. VINCENT DEPAUL FOOD RECOVERY NETWORK 5120 SE MILWAUKIE AVE PORTLAND OR 97242	93-0456525	501 (C) (3)		151,686.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> CENTRAL PENNSYLVANIA FOOD BANK 3908 COREY ROAD HARRISBURG, PA 17109-5929	23-2202250	501 (C) (3)	223,811.	17,122,131.	APR	FOOD	FIGHT HUNGER
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	▶						
<b>3</b> Enter total number of other organizations listed in the line 1 table	▶						

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Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

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

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Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> COMMUNITY FOOD WAREHOUSE OF MERCER COUNTY 109 S SHARPSVILLE AVENUE SHARON, PA 16146	25-1446242	501 (C) (3)	74,498.	394,316.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> GREATER BERKS FOOD BANK 117 MORGAN DRIVE READING, PA 19608	22-2456238	501 (C) (3)	132,956.	1,787,984.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> GREATER PITTSBURGH COMMUNITY FOOD BANK 1 NORTH LINDEN DUQUESNE, PA 15110	25-1420599	501 (C) (3)	423,644.	8,005,471.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> H & J WEINBERG NE PA REGIONAL FOOD BANK 185 RESEARCH DRIVE PITTSBURGH, PA 15222	23-1653093	501 (C) (3)	99,028.	1,432,053.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> PHILABUNDANCE 3616 S GALLOWAY ST PHILADELPHIA PA 19148	23-2290505	501 (C) (3)	201,630.	4,762,113.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> SECOND HARVEST FOOD BANK OF LEHIGH VALLEY A 2045 HARVEST WAY ALLENTOWN, PA 18104-6793	22-1669589	501 (C) (3)	54,209.	2,224,564.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> SECOND HARVEST FOOD BANK OF NORTHWEST PENNS 1507 GRIMM DRIVE ERIE, PA 16501	25-1405798	501 (C) (3)	28,196.	6,812,359.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> WESTMORELAND COUNTY FOOD BANK 100 DEVONSHIRE DRIVE DELMONT, PA 15626	25-1422682	501 (C) (3)	65,596.	3,022,689.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> BANCO DE ALIMENTOS DE PUERTO RICO CALLE MARGINAL #9 CORUJO INDUSTRIAL PARK	66-0444882	501 (C) (3)	125,265.	4,305,155.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> RHODE ISLAND COMMUNITY FOOD BANK 200 NIANTIC AVE. PROVIDENCE, RI 02907	05-0395601	501 (C) (3)	172,975.	1,581,447.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> HARVEST HOPE FOOD BANK 2220 SHOP ROAD COLUMBIA, SC 29201	57-0725560	501 (C) (3)	235,584.	18,277,165.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> LOWCOUNTRY FOOD BANK 2864 AZALEA DRIVE CHARLESTON, SC 29405	57-0751835	501 (C) (3)	387,545.	18,494,388.	APR	FOOD	FIGHT HUNGER

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶**
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**SCHEDULE I  
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FEEDING AMERICA

36-3673599

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<b>(1)</b> FEEDING SOUTH DAKOTA							
3511 N. 1ST AVENUE SIOUX FALLS, SD 57104	36-3293534	501 (C) (3)	181,999.	6,784,309.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> CHATTANOOGA AREA FOOD BANK							
2009 CURTAIN POLE RD CHATTANOOGA TN 37406	62-0867645	501 (C) (3)	551,885.	13,246,140.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> MID-SOUTH FOOD BANK							
239 S. DUDLEY STREET MEMPHIS, TN 38104-3203	62-1340755	501 (C) (3)	282,268.	10,307,452.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> SECOND HARVEST FOOD BANK OF EAST TENNESSEE							
136 HARVEST LANE MARVILLE, TN 37801	58-1450139	501 (C) (3)	160,831.	12,051,926.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> SECOND HARVEST FOOD BANK OF MIDDLE TENNESSEE							
331 GREAT CIRCLE ROAD NASHVILLE, TN 37228	62-1049447	501 (C) (3)	356,050.	23,351,635.	APR	FOOD	FIGHT HUNGER
<b>(6)</b> SECOND HARVEST FOOD BANK OF NORTHEAST TENNE							
1020 JERICHO DRIVE KINGSFORD, TN 37663	62-1303822	501 (C) (3)	285,807.	6,115,986.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> BEAUMONTZD							
3845 MLK PKWY BEAUMONT TX 77720	76-0338721	501 (C) (3)		204,000.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> CAPITAL AREA FOOD BANK OF TEXAS, INC.							
8201 S. CONGRESS AVENUE AUSTIN, TX 78745	74-2217350	501 (C) (3)	229,496.	24,153,276.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> EAST TEXAS FOOD BANK							
3201 ROBERTSON ROAD TYLER, TX 75701	75-2222630	501 (C) (3)	218,999.	9,283,966.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> FEEDING TEXAS							
2001 BEACH ST #630 FORT WORTH, TX 76103	74-2762542	501 (C) (3)	350,000.		CASH	N/A	FIGHT HUNGER
<b>(11)</b> FOOD BANK OF CORPUS CHRISTI							
826 KRILL ST. CORPUS CHRISTI, TX 78408	74-2234089	501 (C) (3)	55,723.	4,785,924.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> FOOD BANK OF THE GOLDEN CRESCENT							
3809 E. RIO GRANDE VICTORIA, TX 77901	74-2534561	501 (C) (3)	13,575.	1,318,507.	APR	FOOD	FIGHT HUNGER

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶**
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- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> FOOD BANK OF THE RIO GRANDE VALLEY, INC. 724 N. CAGE BLVD. PHARR, TX 78577	74-24221560	501 (C) (3)	51,030.	3,470,420.	APR	FOOD	FIGHT HUNGER
<b>(2)</b> FOOD BANK OF WEST CENTRAL TEXAS 5505 N. FIRST ABILENE, TX 79603	75-1888192	501 (C) (3)	62,472.	2,081,816.	APR	FOOD	FIGHT HUNGER
<b>(3)</b> HIGH PLAINS FOOD BANK 815 S. ROSS AMARILLO, TX 79120	75-1838348	501 (C) (3)	31,816.	2,471,851.	APR	FOOD	FIGHT HUNGER
<b>(4)</b> HOUSTON FOOD BANK 535 FORTWALL STREET HOUSTON, TX 77029	74-2181456	501 (C) (3)	497,812.	33,684,301.	APR	FOOD	FIGHT HUNGER
<b>(5)</b> NORTH TEXAS FOOD BANK 4500 S COCKRELL HILL RD DALLAS TX 75236	75-1785357	501 (C) (3)	456,645.	32,561,300.	APR-FMV	FOOD-TECH	FIGHT HUNGER
<b>(6)</b> SAN ANTONIO FOOD BANK 5200 OLD US HWY 90 W SAN ANTONIO TX 78227	74-2122979	501 (C) (3)	188,511.	22,678,095.	APR	FOOD	FIGHT HUNGER
<b>(7)</b> SOUTH PLAINS FOOD BANK 4612 LOCUST AVENUE LUBBOCK, TX 79404	75-1904829	501 (C) (3)	51,995.	1,450,110.	APR	FOOD	FIGHT HUNGER
<b>(8)</b> SOUTH TEXAS FOOD BANK 1907 FREIGHT LAREDO, TX 78041	74-2574983	501 (C) (3)	11,809.	1,754,239.	APR	FOOD	FIGHT HUNGER
<b>(9)</b> SOUTHEAST TEXAS FOOD BANK 3845 MLK PKWY BEAUMONT TX 77705	76-0338721	501 (C) (3)	34,271.	1,568,753.	APR	FOOD	FIGHT HUNGER
<b>(10)</b> TARRANT AREA FOOD BANK 2600 CULLEN FT. WORTH, TX 76107	75-1822473	501 (C) (3)	126,738.	19,073,349.	APR	FOOD	FIGHT HUNGER
<b>(11)</b> WEST TEXAS FOOD BANK 1008 EAST 2ND STREET ODessa, TX 79760	75-2057692	501 (C) (3)	16,877.	7,310,462.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> WICHITA FALLS AREA FOOD BANK 1230 MIDWESTERN PKWY WICHITA FALLS TX 76307	75-1812865	501 (C) (3)	73,246.	2,372,022.	APR	FOOD	FIGHT HUNGER
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	▶						
<b>3</b> Enter total number of other organizations listed in the line 1 table	▶						

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

Schedule I (Form 990) (2014)



**SCHEDULE I  
(Form 990)**

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

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

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> UTAH FOOD BANK 3150 S 900 W SALT LAKE CITY UT 84119	87-0212453	501 (C) (3)	241,467.	22,859,919.	APR.	FOOD	FIGHT HUNGER
<b>(2)</b> BLUE RIDGE AREA FOOD BANK, INC. 96 LAUREL HILL ROAD VERONA, VA 24482	52-1202644	501 (C) (3)	297,626.	15,004,867.	APR.	FOOD	FIGHT HUNGER
<b>(3)</b> FEEDING AMERICA SOUTHWEST VIRGINIA 1025 ELECTRIC ROAD SALEM, VA 24153	54-1939556	501 (C) (3)	146,552.	18,351,994.	APR.	FOOD	FIGHT HUNGER
<b>(4)</b> FEEDMORE 1415 RHODMILLER STREET RICHMOND, VA 23220	54-1150923	501 (C) (3)	274,675.	20,765,656.	APR.	FOOD	FIGHT HUNGER
<b>(5)</b> FOODBANK OF SOUTHEASTERN VIRGINIA 800 TIDEWATER DRIVE NORFOLK, VA 23504	52-1219783	501 (C) (3)	254,207.	20,631,057.	APR.	FOOD	FIGHT HUNGER
<b>(6)</b> FREDERICKSBURG REGIONAL FOODBANK 3631 LEE HILL DR FREDERICKSBURG VA 22408	54-1255013	501 (C) (3)	135,743.	2,756,724.	APR.	FOOD	FIGHT HUNGER
<b>(7)</b> VIRGINIA PENINSULA FOODBANK 2401 ALUMINUM AVENUE HAMPTON, VA 23661	54-1422298	501 (C) (3)	151,314.	8,345,133.	APR.	FOOD	FIGHT HUNGER
<b>(8)</b> VERMONT FOODBANK 33 PARKER ROAD BARRE, VT 05641	22-3021942	501 (C) (3)	371,069.	3,559,549.	APR.	FOOD	FIGHT HUNGER
<b>(9)</b> CLARK COUNTY FOOD BANK 6502 NE 47TH AVENUE VANCOUVER, WA 98661	91-1307564	501 (C) (3)	51,000.		CASH	N/A	FIGHT HUNGER
<b>(10)</b> FOOD LIFELINE 1702 NE 150TH ST. SHORELINE, WA 98155-7226	91-1090540	501 (C) (3)	192,686.	18,644,681.	APR-FMV	FOOD-TECH	FIGHT HUNGER
<b>(11)</b> SECOND HARVEST INLAND NORTHWEST 1234 E. FRONT AVENUE SPOKANE, WA 99202	23-7173826	501 (C) (3)	68,655.	11,598,703.	APR	FOOD	FIGHT HUNGER
<b>(12)</b> FEED MY PEOPLE FOOD BANK 2610 ALPINE ROAD EAU CLAIRE, WI 54703	36-1488941	501 (C) (3)	17,609.		CASH	N/A	FIGHT HUNGER

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶**
- 3** Enter total number of other organizations listed in the line 1 table **▶**

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

Schedule I (Form 990) (2014)

**SCHEDULE I  
(Form 990)**

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

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

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

FEEDING AMERICA

Employer identification number

36-3673599

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) FEEDING AMERICA EASTERN WISCONSIN 1700 W FOND DU LAC AVE MILWAUKEE WI 53205	39-1384593	501 (C) (3)	277,123.	22,243,721.	APR	FOOD	FIGHT HUNGER	
(2) FEEDING WISCONSIN 2802 DAIRY DRIVE MADISON, WI 53718	39-1490691	501 (C) (3)	200,000.		CASH	N/A	FIGHT HUNGER	
(3) SECOND HARVEST FOODBANK OF SOUTHERN WISCONSIN 2802 DAIRY DRIVE MADISON, WI 53718	39-1490691	501 (C) (3)	154,922.	7,380,645.	APR	FOOD	FIGHT HUNGER	
(4) FACING HUNGER FOODBANK 1327 SEVENTH AVENUE HUNTINGTON, WV 25701	55-0625915	501 (C) (3)	16,058.	3,352,221.	APR	FOOD	FIGHT HUNGER	
(5) MOUNTAINEER FOOD BANK 484 ENTERPRISE DRIVE GASSAWAY, WV 26624	55-0611100	501 (C) (3)	48,539.	8,924,313.	APR	FOOD	FIGHT HUNGER	
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table								221.
3 Enter total number of other organizations listed in the line 1 table								221.

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

Schedule I (Form 990) (2014)

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1	NETWORK LEADER OF THE YEAR AWARD	1.	5,000.	N/A	N/A	
2	INDIVIDUAL OF THE YEAR SERVICE AWARD	1.	5,000.	N/A	N/A	
3						
4						
5						
6						
7						

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS -PART I-#2

MEMBERS MUST SUBMIT PERIODIC REPORTS AS A REQUIREMENT FOR ACCEPTING A GRANT FROM FEEDING AMERICA. THESE REPORTS ARE A VITAL PART OF STEWARDING DONOR RELATIONSHIPS THAT RESULT IN CONTINUED GRANT FUNDS AVAILABLE TO OUR MEMBERS. THE STRATEGIC PARTNERSHIPS INVESTMENTS TEAM (SPI) CREATES REPORT FORMS IN CONJUNCTION WITH THE FEEDING AMERICA ACCOUNT MANAGER WHO IS THE MAIN CONTACT WITH THE DONOR. THIS ENSURES THAT THE DONOR'S INTENT FOR THE GIFT IS INCLUDED IN THE REPORT REQUIREMENTS. THE FREQUENCY OF REPORTING IS ALSO IN ACCORDANCE WITH DONOR INTENT. THE SPI TEAM REVIEWS COMPLETED REPORTS WHEN THE REPORTS COME TO FEEDING AMERICA. THE TEAM

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
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**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

FOLLOWS UP WITH FOOD BANKS THAT DO NOT FULLY COMPLETE THE REPORTS.

INFORMATION FROM THE REPORTS IS SHARED WITH THE ACCOUNT MANAGER WHO IS

THE MAIN CONTACT WITH THE DONOR, AND THE PROGRAM'S TEAM, WHICH CAN ASSIST MEMEBERS WITH PROGRAM IMPLEMENTATION CHALLENGES.

DURING THE GRANT PERIOD, AWARDEE MEMBERS MUST SUBMIT A WRITTEN REALLOCATION REQUEST FORM IF THEY ARE ASKING TO USE GRANT FUNDS

DIFFERENTLY THAN DESCRIBED IN THEIR ORIGINAL PROPOSAL. THE SPI TEAM

ALONG WITH THE APPROPRIATE ACCOUNT MANAGER AND PROGRAM STAFF MEMBER MAKES

A DECISION WHETHER THE REALLOCATION REQUEST IS ALIGNED WITH THE DONOR'S

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
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**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

INTENT FOR THE GIFT. IF SO, THE REALLOCATION IS APPROVED. IF NOT, THE REALLOCATION WILL BE DENIED.

APPROPRIATE STAFF AS RELATED TO THE GRANT OPPORTUNITY FOLLOWS UP WHEN THERE ARE ISSUES/CHALLENGES WITH A MEMBER'S COMPLETION OF THE GRANT, OR THEIR GRANT TERMS. WHEN NECESSARY, STAFF PROVIDES RECOMMENDATIONS FOR CHANGES TO THE PROPOSAL. WHEN THERE IS A SERIOUS ISSUE WITH A MEMBER AND THEIR GRANT IMPLEMENTATION, ALL APPROPRIATE STAFF WILL WORK TOGETHER WITH THE MEMBER TO ADDRESS THE SITUATION. FINAL DECISION TO REQUEST THE RETURN OF GRANT FUNDS IS MADE BY CONSENSUS OF THE COMPLIANCE DEPARTMENT,

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

AND OTHER APPROPRIATE STAFF RELATED TO THE GRANT OPPORTUNITY PROGRAM.

EXAMPLES OF SERIOUS ISSUES THAT MAY REQUIRE FURTHER CONSIDERATION AND

ACTION INCLUDE: INSUFFICIENT PROGRESS; MEMBER UNLIKELY TO USE FUNDS;

NON-COMPLIANCE DURING AN AUDIT VISIT; AND LATE SUBMISSION OF, OR FAILURE

TO SUBMIT, GRANT REPORTS.

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
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**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

NUMBER OF RECIPIENTS - PART III - COLUMN (B)

NETWORK LEADER OF THE YEAR

THIS GRANT IS SENT OUT AS AN OPEN INVITATION TO CEOS AND EXECUTIVE

DIRECTORS TO SELF-APPLY OR HAVE SOMEONE NOMINATE THEM. IT IS OPEN TO THE

ENTIRE 200 FOOD BANKS IN OUR NETWORK BUT YOU NEED TO BE DEEMED FULLY

COMPLIANT BY FEEDING AMERICA'S COMPLIANCE AND CAPABILITY DEPARTMENT.

THERE ARE TWO ROUNDS OF JUDGING. ALL OF THE NOMINATIONS GO THROUGH THE

1ST LEVEL WHICH IS A COMMITTEE OF FEEDING AMERICA MANAGEMENT. THEN THEY

TRIM THE GROUP DOWN TO 3 OR 4 AND ROUND 2 IS WHERE THE NATIONAL COUNCIL

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
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**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

CHAIRPERSON AND OUR PRESIDENT MATT KNOTT MAKE THE FINAL SELECTION.

MEMBER OF THE YEAR

THIS IS BY INVITATION ONLY AND TAKES THE TOP 50 FOOD BANKS BY REVIEWING THE PERFORMANCE OF EACH MEMBER ON EACH OF TWENTY DIFFERENT METRICS, AND RANKING EACH MEMBER BY PERCENTILE WITHIN EACH METRIC. FEEDING AMERICA DECIDES WHO MAKES IT INTO THE TOP 50 AND THERE ARE NO SELF NOMINATIONS.

THERE ARE AGAIN TWO ROUNDS OF JUDGING. ALL OF THE NOMINATIONS GO THROUGH THE 1ST LEVEL WHICH IS A COMMITTEE OF FEEDING AMERICA MANAGEMENT.



**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
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**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

THEN THEY TRIM THE GROUP DOWN TO 3 OR 4 AND ROUND 2 IS WHERE THE NATIONAL

COUNCIL CHAIRPERSON AND OUR PRESIDENT MATT KNOTT MAKE THE FINAL

SELECTION.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

FEEDING AMERICA

**Compensation Information**

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

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

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Employer identification number

36-3673599

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** 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

**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 in line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's 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.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**  **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**  **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**  **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**  **5a**
- b** Any related organization? **5b**  **5b**
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**  **6a**
- b** Any related organization? **6b**  **6b**
- If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III **7**  **7**

**8** Were any amounts reported in 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**  **8**

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**  **9**

	Yes	No
<b>1a</b>		
<b>1b</b>		
<b>2</b>		
<b>3</b>		
<b>4a</b>		<input checked="" type="checkbox"/>
<b>4b</b>		<input checked="" type="checkbox"/>
<b>4c</b>		<input checked="" type="checkbox"/>
<b>5a</b>	<input checked="" type="checkbox"/>	
<b>5b</b>		<input checked="" type="checkbox"/>
<b>6a</b>		<input checked="" type="checkbox"/>
<b>6b</b>		<input checked="" type="checkbox"/>
<b>7</b>		<input checked="" type="checkbox"/>
<b>8</b>		<input checked="" type="checkbox"/>
<b>9</b>		<input checked="" type="checkbox"/>

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

Schedule J (Form 990) 2014

**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 in 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 are not 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.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
<b>1</b> ROBERT AIKEN CEO JULY TO MAY 2015	(i) 455,080.	(ii) 147,176.	(iii) 4,265.	15,600.	28,962.	651,083.	0
(ii) 0	0	0	0	0	0	0	0
<b>2</b> MARISOL BUONOMO VP FINANCE & CONTROLLER	(i) 169,752.	(ii) 0	(iii) 1,617.	10,437.	22,371.	204,177.	0
(ii) 0	0	0	0	0	0	0	0
<b>3</b> MAURA DALY CHIEF EXTERNAL AFFAIRS OFFICER	(i) 231,887.	(ii) 41,313.	(iii) 4,215.	15,600.	8,818.	301,833.	0
(ii) 0	0	0	0	0	0	0	0
<b>4</b> LISA DAVIS SVP GOVERNMENT RELATIONS	(i) 199,631.	(ii) 39,841.	(iii) 1,977.	15,116.	31,191.	287,756.	0
(ii) 0	0	0	0	0	0	0	0
<b>5</b> PAUL HENRYS CFO/TREASURER	(i) 246,876.	(ii) 35,942.	(iii) 3,058.	15,600.	23,717.	325,193.	0
(ii) 0	0	0	0	0	0	0	0
<b>6</b> RONALD MARTIN VP OF FIN REPORTING & BUDGETIN	(i) 161,553.	(ii) 24,209.	(iii) 1,832.	11,571.	25,348.	224,513.	0
(ii) 0	0	0	0	0	0	0	0
<b>7</b> MATTHEW KNOTT PRESIDENT-INTERIM CEO MAY 2015	(i) 307,783.	(ii) 67,334.	(iii) 2,502.	15,600.	26,432.	419,651.	0
(ii) 0	0	0	0	0	0	0	0
<b>8</b> DANIEL KROHM VP-STRATEGIC INITIATIVES & SC	(i) 167,157.	(ii) 1,822.	(iii) 2,303.	10,199.	724.	182,205.	0
(ii) 0	0	0	0	0	0	0	0
<b>9</b> DAPHNE LOGAN SVP OF HUMAN RESOURCES	(i) 194,866.	(ii) 32,098.	(iii) 2,163.	13,733.	14,127.	256,987.	0
(ii) 0	0	0	0	0	0	0	0
<b>10</b> KEVIN LUTZ SVP, INFORMATION TECHNOLOGY	(i) 212,723.	(ii) 0	(iii) 4,186.	13,352.	26,184.	256,445.	0
(ii) 0	0	0	0	0	0	0	0
<b>11</b> DANIEL NISBET VP OF DEVELOPMENT	(i) 182,052.	(ii) 1,822.	(iii) 1,477.	11,122.	8,103.	204,576.	0
(ii) 0	0	0	0	0	0	0	0
<b>12</b> LEAH RAY SVP OF DEVELOPMENT	(i) 179,906.	(ii) 15,098.	(iii) 1,388.	11,824.	8,645.	216,861.	0
(ii) 0	0	0	0	0	0	0	0
<b>13</b> WILLIAM THOMAS CHIEF SUPPLY CHAIN OFFICER	(i) 250,689.	(ii) 41,871.	(iii) 4,116.	15,600.	26,488.	338,764.	0
(ii) 0	0	0	0	0	0	0	0
<b>14</b> JOHANNA VETTER CHIEF MARKETING OFFICER	(i) 232,846.	(ii) 38,188.	(iii) 2,087.	15,600.	4,011.	292,732.	0
(ii) 0	0	0	0	0	0	0	0
<b>15</b> ANDREA YAO SECRETARY	(i) 129,474.	(ii) 1,822.	(iii) 1,267.	8,437.	27,743.	168,743.	0
(ii) 0	0	0	0	0	0	0	0
<b>16</b>							
(i)							
(ii)							

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 5 A

FEEDING AMERICA MAY PROVIDE EXECUTIVES WITH LUMP-SUM BONUSES BASED ON AN EXECUTIVE'S PERFORMANCE AGAINST PRE-ESTABLISHED GOALS AND THE RESULTS OF THE ORGANIZATION. BONUSES ARE REVIEWED AND APPROVED BY THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD.

THE INDICIA USED IN THIS PERFORMANCE BASED COMPENSATION PLAN INCLUDE REVENUE, POUNDS/MEALS PROVIDED, AND OTHER "NON-REVENUE" RELATED GOALS AND METRICS OF THE ORGANIZATION THAT ARE LINKED TO FEEDING AMERICA'S STRATEGIC AND FISCAL YEAR BUSINESS PLANNING PROCESS.

**SCHEDULE L**  
**(Form 990 or 990-EZ)**

**Transactions With Interested Persons**

OMB No. 1545-0047

**2014**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**  
▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Information about Schedule L (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**Open To Public Inspection**

Name of the organization  
**FEEDING AMERICA**

Employer identification number  
**36-3673599**

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).  
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**  
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
				(1)									
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
<b>Total</b> . . . . .							\$						

**Part III Grants or Assistance Benefiting Interested Persons.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) SEE PART V - SUPPLEMENTAL INFORMATION					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**Part V Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions).

FORM SCH L PART IV

DEBORAH FLATEMAN, CHIEF EXECUTIVE OFFICER OF MARYLAND FOOD BANK, SERVES AS A VOTING MEMBER OF FEEDING AMERICA BOARD OF DIRECTORS. AMOUNT OF RELATED TRANSACTIONS: \$362,434. DESCRIPTION OF TRANSACTIONS: PROCEEDS FROM GROCERY AND PRODUCE PROGRAMS, MEMBERSHIP FEES, PAYMENT OF MEMBER GRANTS AND TRAVEL REIMBURSEMENTS.

JAN PRUITT, PRESIDENT AND CHIEF EXECUTIVE OFFICER OF NORTH TEXAS FOOD BANK, SERVES AS A VOTING MEMBER OF FEEDING AMERICA BOARD OF DIRECTORS. AMOUNT OF RELATED TRANSACTIONS: \$1,989,314. DESCRIPTION OF TRANSACTIONS: PROCEEDS FROM GROCERY AND PRODUCE PROGRAMS, MEMBERSHIP FEES, PAYMENT OF MEMBER GRANTS AND TRAVEL REIMBURSEMENTS.

KATHY JACKSON, PRESIDENT AND CHIEF EXECUTIVE OFFICER OF SECOND HARVEST SANTA CLARA & SAN MATEO COUNTIES, SERVES AS A VOTING MEMBER OF FEEDING AMERICA BOARD OF DIRECTORS. AMOUNT OF RELATED TRANSACTIONS: \$1,195,006. DESCRIPTION OF TRANSACTIONS: PROCEEDS FROM GROCERY AND PRODUCE PROGRAMS, MEMBERSHIP FEES, PAYMENT OF MEMBER GRANTS AND TRAVEL REIMBURSEMENTS.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2014**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

FEEDING AMERICA

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**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art . . . . .				
2 Art - Historical treasures . . . . .				
3 Art - Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities - Publicly traded . . . . .	X	77.	396,951.	SELLING PRICE
10 Securities - Closely held stock . . . . .				
11 Securities - Partnership, LLC, or trust interests . . . . .				
12 Securities - Miscellaneous . . . . .				
13 Qualified conservation contribution - Historic structures . . . . .				
14 Qualified conservation contribution - Other . . . . .				
15 Real estate - Residential . . . . .				
16 Real estate - Commercial . . . . .				
17 Real estate - Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .	X	1,214,340,805.	2,064,379,369.	PRODUCT VALUATION
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( COMP EQUIP/SOFT ) . . . . .	X	10,545.	725,175.	FAIR MARKET VALUE
26 Other ▶ ( GAS CARDS ) . . . . .	X	474.	4,740.	FAIR MARKET VALUE
27 Other ▶ ( _____ ) . . . . .				
28 Other ▶ ( _____ ) . . . . .				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . **29** 63.

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2014)

JSA

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**Part II** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

PART I, LINE 19

NUMBER OF CONTRIBUTIONS REPORTED IN POUNDS. ANNUALLY, FEEDING AMERICA PERFORMS A STUDY TO CALCULATE THE AVERAGE WHOLESALE PRICE PER POUND (PRODUCT VALUATION STUDY). THIS VALUE IS THEN USED TO DETERMINE THE FAIR VALUE OF DONATED PRODUCE AND GROCERY ITEMS.

PART I, LINE 31

FEEDING AMERICA RECEIVES GIFTS OF SECURITIES FROM DONORS WHICH ARE DELIVERED TO ITS BROKER, WHO SELLS THEM ON THE SAME DAY AND REMITS THE SALES PROCEEDS TO FEEDING AMERICA.



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

Department of the Treasury  
Internal Revenue Service

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

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

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Name of the organization

FEEDING AMERICA

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FORM 990 PART III LINE 4A

FOOD PROCUREMENT - THE FOOD PROCUREMENT PROGRAM INCLUDES SUPPLY CHAIN,  
LOGISTICS AND PRODUCT SOURCING SERVICES. SUPPLY CHAIN SERVICES FACILITATE  
THE ACQUISITION OF FOOD AND GROCERY PRODUCTS FOR FREE DISTRIBUTION TO  
AMERICANS IN COMMUNITIES ACROSS THE COUNTRY.

THE FEEDING AMERICA NATIONAL OFFICE AUGMENTS DONATED FOOD AND GROCERY  
PRODUCTS WITH PRODUCE PROCURED FROM BROKERS AND GROWERS TO ENSURE A  
NUTRITIONAL AND WELL-ROUNDED MIX OF PRODUCT IS AVAILABLE TO THE NETWORK.  
A PORTION OF THESE PROCUREMENT COSTS ARE OFFSET BY FEES PAID BY MEMBER  
FOOD BANKS TO THE DONOR/SERVICE PROVIDER, WHICH MAY INCLUDE THE COST OF  
PACKAGING, TRANSPORTATION, AND PROCESSING FEES. SUPPLY CHAIN SERVICES  
ALSO FACILITATE FREE OR LOW-COST TRANSPORTATION FOR PRODUCT DISTRIBUTED  
NATIONWIDE AND PROVIDE SUBSIDIES FOR FRESH PRODUCE TO HELP MOVE  
PERISHABLE FRUITS AND VEGETABLES QUICKLY AND SAFELY TO PEOPLE IN NEED.  
DURING FISCAL YEAR 2015 THE NATIONAL PRODUCE PROGRAM DISTRIBUTED 116  
MILLION POUNDS OF FRESH PRODUCE TO OUR MEMBER FOOD BANKS. THE FEEDING  
AMERICA NETWORK COLLECTIVELY SECURED MORE THAN 685 MILLION POUNDS OF  
FRESH PRODUCE (PRODUCE SOURCED THROUGH OUR OTHER CHANNELS IS NOT INCLUDED  
IN THIS NUMBER).

DURING FISCAL YEAR 2009, THE SUPPLY CHAIN TEAM LAUNCHED A NATIONAL  
GROCERY PROGRAM TO OBTAIN LOWER PRICES FOR PURCHASED GROCERIES BY  
LEVERAGING THE COLLECTIVE BUYING POWER OF OUR MEMBER FOOD BANKS. DURING

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FISCAL YEAR 2015, 156 MEMBERS PARTICIPATED IN THE NATIONAL GROCERY PROGRAM, WITH PURCHASES OF \$41.5 MILLION IN FOOD AND GROCERY PRODUCTS THAT RESULTED IN MORE THAN 72 MILLION POUNDS OF PURCHASED FOOD.

PRODUCT SOURCING FACILITATES THE DONATION OF FOOD AND GROCERY PRODUCTS FROM MAJOR NATIONAL AND REGIONAL MANUFACTURERS AND RETAILERS. THROUGH THE EFFORTS OF FOOD SOURCING STAFF ACROSS THE NETWORK AND THE HELP OF OUR TRUSTED RETAIL PARTNERS, THE GROCERY RESCUE PROGRAM (RETAIL STORE DONATION PROGRAM) SECURED MORE THAN 1.4 BILLION POUNDS OF PRODUCT. FOOD MANUFACTURERS DONATED MORE THAN 807 MILLION POUNDS OF FOOD TO OUR MEMBER FOOD BANKS.

IN TOTAL, THE FEEDING AMERICA NETWORK DISTRIBUTED MORE THAN 4.2 BILLION POUNDS OF FOOD AND GROCERY ITEMS IN FISCAL YEAR 2015 TO PEOPLE IN NEED. THIS REPRESENTS GREATER THAN 7 PERCENT GROWTH OVER FISCAL YEAR 2014.

FORM 990 PART III LINE 4B

MEMBER SERVICES - MEMBER SERVICES ADVANCE THE OPERATIONS OF NETWORK FOOD BANKS THROUGH CAPABILITY DEVELOPMENT, CONSULTING, ASSESSMENT AND TRAINING. THE FEEDING AMERICA NATIONAL OFFICE INSPECTS EACH NETWORK MEMBER EVERY 24 MONTHS TO ENSURE COMPLIANCE WITH THE HIGHEST STANDARDS OF FOOD SAFETY, MANAGEMENT, GOVERNANCE AND ACCOUNTABILITY. SIGNIFICANT PORTIONS OF THE MEMBER SERVICES FISCAL YEAR 2015 BUDGET HELPED TO PROVIDE GRANTS TO MEMBER FOOD BANKS SUPPORTING DEVELOPMENT OF INNOVATIVE CHARITABLE FEEDING PROGRAMS AND STRATEGIC INITIATIVES.

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OF ALL FOOD AND FUNDS RAISED BY THE NATIONAL OFFICE, MORE THAN 98 PERCENT GOES DIRECTLY BACK TO NETWORK MEMBERS TO SUPPORT PROGRAMS AND SERVICES, INCLUDING NEARLY \$40 MILLION OF DIRECT SUPPORT TO THE NETWORK. OUR MEMBER SERVICES PROGRAM ALSO ADVANCES LOGISTICS AND SERVICE CAPACITY THROUGH INFORMATION TECHNOLOGY; PREPARES OUR NETWORK FOR RESPONSES TO NATURAL DISASTERS THROUGH PLANNING, INFORMATION SHARING AND PRODUCT DEPLOYMENT THROUGH DISASTER SERVICES; AND SHARES BEST PRACTICES AND WISDOM AMONG NETWORK MEMBERS THROUGH KNOWLEDGE AND LEARNING.

FORM 990 PART III LINE 4C

RESEARCH AND ANALYSIS - RESEARCH AND ANALYSIS SERVICES INVESTIGATE DOMESTIC HUNGER AND PRODUCE QUALITY DATA AND REPORTS THAT ARE UTILIZED BY MANY OF THE ORGANIZATION'S OUTREACH EFFORTS. WE ANALYZE THE DYNAMICS AT PLAY AMONG THE NATION'S FOOD INSECURE INDIVIDUALS AND FAMILIES, THE PATTERNS SURROUNDING THEIR USE OF OUR EMERGENCY FEEDING SERVICES, AND ENDEAVOR TO UTILIZE THIS DATA TO ULTIMATELY CREATE BETTER LOCAL FEEDING PROGRAMS. ADDITIONALLY, OUR RESEARCH AND ANALYSIS SERVICES INVESTIGATE OUR OWN ORGANIZATIONAL OPERATIONS AS A NETWORK, IDENTIFYING OPPORTUNITIES FOR CONTINUAL GROWTH AND REFINEMENT.

DURING 2014, WE RELEASED RESULTS FROM OUR SIXTH QUADRENNIAL HUNGER IN AMERICA STUDY, WHICH IS THE LARGEST STUDY OF CHARITABLE FOOD ASSISTANCE PROGRAMS IN THE U.S. THIS STUDY PROVIDES COMPREHENSIVE DEMOGRAPHIC PROFILES OF PEOPLE SEEKING FOOD ASSISTANCE THROUGH THE CHARITABLE SECTOR AND AN IN-DEPTH ANALYSIS OF THE PARTNER AGENCIES IN THE FEEDING AMERICA NETWORK THAT PROVIDE THIS ASSISTANCE. WE ALSO PUBLISHED OUR FIFTH

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ITERATION OF THE MAP THE MEAL GAP STUDY, WHICH MAKES AVAILABLE VALUABLE DATA ABOUT FOOD INSECURITY AND MEAL COSTS IN EVERY COUNTY AND CONGRESSIONAL DISTRICT IN THE UNITED STATES. THIS STUDY PROVIDES THE INFORMATION NEEDED TO BUILD HUNGER-RELIEF INITIATIVES TO ADDRESS THE SPECIFIC NEEDS OF RESIDENTS IN DIFFERENT COMMUNITIES.

FORM 990 PART III LINE 4D

PUBLIC AWARENESS AND EDUCATION SERVICES ADVANCE AWARENESS OF AND ENGAGEMENT WITH THE ISSUE OF HUNGER THROUGH MARKETING, MEDIA RELATIONS AND OTHER OUTREACH MEANS. FOR FISCAL YEAR 2015, FEEDING AMERICA'S PUBLIC SERVICE ANNOUNCEMENT (PSA) CAMPAIGN IN PARTNERSHIP WITH AD COUNCIL EARNED \$62 MILLION IN DONATED MEDIA.

FEEDING AMERICA EMBARKED ON AN EFFORT TO HARNESS THE COLLECTIVE VOICES OF THE NETWORK OF FOOD BANKS THROUGH A STRATEGIC MESSAGING PLATFORM. EXTENSIVE TESTING SHOWED THAT "TOGETHER WE CAN SOLVE HUNGER" WAS A MOTIVATING MESSAGE AMONG POTENTIAL SUPPORTERS THAT ELICITS A FEELING OF HOPE, CONVEYS THAT THE PROBLEM IS SOLVABLE AND INSPIRES INDIVIDUALS TO MAKE A DIFFERENCE. "TOGETHER WE CAN SOLVE HUNGER" IS THE BASIS FOR CURRENT NATIONAL AND LOCAL RADIO ADS, PRINT ADS, BILLBOARDS, DIGITAL ASSETS LIKE INFOGRAPHICS AND WEBSITE BANNERS, MESSAGING AND EVENT ASSETS LIKE POSTERS AND FOOD DONATION BARREL WRAPS.

FEEDING AMERICA ALSO ACHIEVED STRONG MEDIA PLACEMENTS IN TOP OUTLETS SUCH AS USA TODAY, THE WALL STREET JOURNAL, TIME, "CBS EVENING NEWS," "GOOD MORNING AMERICA," "THE CHEW," "TODAY," FOX NEWS CHANNEL AND NATIONAL

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GEOGRAPHIC TO GARNER MORE THAN 37 BILLION MEDIA IMPRESSIONS ON BEHALF OF FEEDING AMERICA AND OUR FOOD BANKS.

OUR PUBLIC AWARENESS AND EDUCATION SERVICES FUND OUR MEDIA RELATIONS AND PUBLICATIONS INITIATIVES, WHICH ALL AIM TO MOBILIZE THE PUBLIC AND DRIVE AWARENESS AND SUPPORT OF BOTH THE ISSUE OF DOMESTIC HUNGER GENERALLY AND FEEDING AMERICA SPECIFICALLY.

PUBLIC PROGRAMS AND POLICY

FEEDING AMERICA'S NATIONAL PROGRAMS ARE TARGETED, SCALABLE DISTRIBUTION MODELS THAT INCREASE ACCESS TO MEALS, GROCERIES OR BENEFITS TO CHILDREN, FAMILIES AND SENIORS. WE STRENGTHEN OUR NETWORK BY PROVIDING GRANT FUNDING, PROGRAM STANDARDS, TECHNICAL ASSISTANCE AND TRAINING RESOURCES THAT INCREASE CAPACITY AND BUILD AWARENESS. WE HAVE EXPANDED THE REACH OF OUR NATIONAL PROGRAMS BY PROVIDING 103 MILLION MEALS THROUGH PROGRAMS THAT FEED CHILDREN, SUCH AS KIDS CAFE, BACKPACK, AND SCHOOL PANTRY PROGRAMS; BY PROVIDING ELIGIBLE FAMILIES ACCESS TO OVER 171 MILLION MEALS THROUGH SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) APPLICATION ASSISTANCE; AND BY PROVIDING 127 MILLION MEALS WORTH OF NUTRITIOUS FOOD TO FOOD-INSECURE SENIORS THROUGH SENIOR PROGRAMS.

OUR PUBLIC POLICY AND ADVOCACY PROGRAMS EDUCATE LAWMAKERS AND POLICY INFLUENCERS ABOUT HUNGER IN AMERICA AND IDENTIFY AND ADVANCE POLICY SOLUTIONS THAT ASSIST AMERICANS WHO ARE STRUGGLING WITH HUNGER AND STRENGTHEN FOOD BANKS. OUR BIPARTISAN EFFORTS HELP PROTECT AND STRENGTHEN

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FEDERAL NUTRITION PROGRAMS THAT PROVIDE MEALS TO FAMILIES, CHILDREN AND SENIORS IN NEED AND POLICIES THAT FACILITATE AND SUPPORT CHARITABLE GIVING OF FOOD AND FUNDS TO NON-PROFITS PROVIDING MEALS TO HUNGRY FAMILIES IN AMERICA.

IN FISCAL YEAR 2015, FEEDING AMERICA'S LEGISLATIVE FOCUS WAS ON PASSING A CHILD NUTRITION BILL THAT CLOSSES THE SUMMER GAP BY STREAMLINING PROGRAMS AND INCREASING ACCESS SO KIDS CAN GET MEALS DURING THE SUMMER MONTHS WHEN THEY ARE NOT IN SCHOOL AND MOVING THE AMERICA GIVES MORE ACT THROUGH CONGRESS, WHICH WOULD EXPAND AND A TAX DEDUCTION FOR GIVING FOOD TO CHARITIES. TO DATE, MUCH PROGRESS HAS BEEN MADE, WITH THE SENATE POISED TO MOVE A CHILD NUTRITION BILL OUT OF COMMITTEE AND THE HOUSE PASSING THE AMERICA GIVES MORE ACT.

WE CONTINUE TO BUILD ADVOCACY CAPACITY AND ENGAGEMENT ACROSS OUR NETWORK BY DEVELOPING ADVOCACY TRAINING PROGRAMS FOR FOOD BANK STAFF AND PROVIDING GRANTS TO OUR NETWORK FOR ADVOCACY. WE ALSO MOBILIZE ADVOCATES ONLINE, WITH 150,000 ONLINE ANTI-HUNGER ADVOCATES WHO GENERATE TENS OF THOUSANDS OF PHONE CALLS AND EMAILS IN SUPPORT OF POLICIES THAT REDUCE HUNGER IN AMERICA.

FORM 990 PART VI LINE 1A

FEEDING AMERICA HAS TWO NON-VOTING MEMBERS OF THE BOARD OF DIRECTORS: THE CHIEF EXECUTIVE OFFICER AND THE NATIONAL COUNCIL CHAIRPERSON.

FORM 990 PART VI LINE 10B

EACH MEMBER FOOD BANK IS AN INDEPENDENT 501(C)(3) ORGANIZATION THAT

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ENTERS INTO A LEGAL AND BINDING CONTRACT WITH FEEDING AMERICA. THE CONTRACT DEFINES MUTUAL ACCOUNTABILITY BETWEEN BOTH PARTIES AND OUTLINES A SET OF COMPLIANCE STANDARDS THAT DETAIL ADMINISTRATIVE, OPERATING, AND NON-COMPLIANCE POLICIES. AN IN-PERSON COMPLIANCE AUDIT IS CONDUCTED BY FEEDING AMERICA EVERY 18-36 MONTHS BASED ON A MEMBER'S COMPLIANCE HISTORY. THE VISIT ALLOWS FEEDING AMERICA TO VERIFY COMPLIANCE WITH THE MEMBER CONTRACT. FAILURE TO MAINTAIN COMPLIANCE CAN RESULT IN PROBATION, MEMBER SANCTIONS AND EVEN TERMINATION, BUT TYPICALLY ONLY AFTER STEPS ARE TAKEN BY FEEDING AMERICA STAFF TO ASSIST THE MEMBER IN ACHIEVING COMPLIANCE.

FORM 990 PART VI LINE 11B

THE AUDIT COMMITTEE AND THE EXECUTIVE COMPENSATION COMMITTEE OF THE FEEDING AMERICA BOARD OF DIRECTORS REVIEWED THE PREPARED FORM 990 IN NOVEMBER 2015, FOLLOWED BY A SIGN-OFF BY THE FULL BOARD OF DIRECTORS. BOTH BODIES REVIEWED THE DATA AND OFFERED REFINEMENTS TO NARRATIVE LANGUAGE. THE FINAL FORM 990 WAS SUBMITTED TO THE INTERNAL REVENUE SERVICE IN DECEMBER 2015. OUR AUDITING FIRM, KPMG, ALSO REVIEWED THESE FORMS.

FORM 990 PART VI LINE 12C

ANNUALLY, EXECUTIVE TEAM MEMBERS (CURRENTLY THE EIGHT HIGHEST-RANKING STAFF MEMBERS) AND BOARD MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST FORM DISCLOSING ANY SUCH ISSUES. THESE FORMS ARE REVIEWED BY THE SENIOR VICE PRESIDENT OF HUMAN RESOURCES TO ENSURE COMPLIANCE. ANY AREAS OF CONCERN ARE THOROUGHLY DISCUSSED AND REMEDIED AT THIS TIME AND

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THROUGHOUT THE YEAR.

FORM 990 PART VI LINE 15A

THE EXECUTIVE COMPENSATION COMMITTEE OF THE FEEDING AMERICA BOARD OF DIRECTORS IS CHARGED WITH OVERSEEING ISSUES SURROUNDING EXECUTIVE PAY AND BENEFITS. COMMITTEE MEMBERS ARE FULLY INDEPENDENT OF FEEDING AMERICA MANAGEMENT, HAVE NO PERSONAL INTEREST IN EXECUTIVE COMPENSATION AND ARE NOT RELATED TO OR UNDER THE CONTROL OF ANY INDIVIDUAL WHOSE COMPENSATION IS UNDER REVIEW. THE COMMITTEE DETERMINES THE CHIEF EXECUTIVE OFFICER'S COMPENSATION BASED ON A COMPETITIVE MARKET ANALYSIS. COMPENSATION DETERMINATIONS ARE ALSO BASED ON COMPETITIVE MARKET DATA FOR "DISQUALIFIED PERSONS" - RECOMMENDED BY THE CEO WITH ASSISTANCE FROM THE SVP OF HR AND APPROVED BY THE COMMITTEE. THE COMMITTEE APPROVES ALL COMPENSATION AGREEMENTS NOTED ABOVE IN ADVANCE OF THEIR IMPLEMENTATION AND DOCUMENTS ITS DISCUSSIONS AND DETERMINATIONS.

THE EXECUTIVE COMPENSATION COMMITTEE AND FEEDING AMERICA WORK WITH A HUMAN RESOURCES CONSULTING FIRM THAT SPECIALIZES IN COMPENSATION SERVICES TO NOT-FOR-PROFIT ORGANIZATIONS, WITH A PRIMARY FOCUS ON EXECUTIVES. THEY PROVIDE DATA TO THE COMMITTEE TO EVALUATE THE REASONABLENESS OF EACH EXECUTIVE'S TOTAL CASH COMPENSATION. COMPENSATION DECISIONS ARE CONSISTENT WITH FEEDING AMERICA'S BOARD APPROVED EXECUTIVE COMPENSATION PHILOSOPHY.

FORM 990 PART VI LINE 15B

THE EXECUTIVE COMPENSATION COMMITTEE AND FEEDING AMERICA WORK WITH A



Name of the organization FEEDING AMERICA	Employer identification number 36-3673599
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HUMAN RESOURCES CONSULTING FIRM THAT SPECIALIZES IN COMPENSATION SERVICES TO NOT-FOR-PROFIT ORGANIZATIONS, WITH A PRIMARY FOCUS ON EXECUTIVES. THEY PROVIDE DATA TO THE COMMITTEE TO EVALUATE THE REASONABLENESS OF EACH EXECUTIVE'S TOTAL CASH COMPENSATION. COMPENSATION DECISIONS ARE CONSISTENT WITH FEEDING AMERICA'S BOARD APPROVED EXECUTIVE COMPENSATION PHILOSOPHY.

FORM 990 PART VI LINE 19

FINANCIAL STATEMENTS ARE MADE AVAILABLE ON THE FEEDING AMERICA PUBLIC WEBSITE. THE CONFLICT OF INTEREST POLICY IS AVAILABLE TO THE GENERAL PUBLIC UPON WRITTEN REQUEST TO THE FEEDING AMERICA NATIONAL OFFICE FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN IRC SECTION 6104(D). GOVERNING DOCUMENTS ARE NOT CURRENTLY AVAILABLE TO THE PUBLIC.

FORM 990 PART VIII LINE 10B

DOES NOT INCLUDE THE FOLLOWING DIRECT COSTS RELATED TO SUPPORT THE NATIONAL GROCERY PROGRAM: SALARIES, TECHNOLOGY, OCCUPANCY AND OFFICE EXPENSES.

PART IX

PART IX, LINES 5 TO 24C INCLUDE THE FOLLOWING ALLOCATION OF INDIRECT EXPENSES:

PROGRAM SERVICES	\$4,298,207
MANAGEMENT & GENERAL	(\$5,908,350)
FUNDRAISING EXPENSES	\$1,610,143

Name of the organization FEEDING AMERICA	Employer identification number 36-3673599
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FORM 990 PART XI LINE 2

THIS LINE INCLUDES THE FOLLOWING NON-OPERATING EXPENSES:

CHANGE IN VALUE OF GIFT ANNUITIES	(\$34,818)
INTEREST EXPENSE RELATED TO LOAN PAYABLE PROGRAM	(\$1,938)
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TOTAL	(\$36,756)
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FORM 990 PART XI LINE 9

PROVISIONS FOR UNCOLLECTIBLE CONTRIBUTION REC.	(\$2,208)
NET PV OF LOSS ON SUBLEASE	\$34,100
CHANGE IN GIFT AMOUNT	(\$34,818)
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TOTAL	(\$2,926)

ATTACHMENT 1FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT,

DC, FL, GA, HI, IL, IN, KS, KY, LA, ME, MD, MA, MI,

MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

RI, SC, TN, UT, VA, WA, WV, WI,

ATTACHMENT 2990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
ALANIZ, INC. 1805 E. WASHINGTON MOUNT PLEASANT, IA 52641	PRINTING&PRODUCTION	570,094.

Name of the organization FEEDING AMERICA	Employer identification number 36-3673599
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ATTACHMENT 2 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
INNERWORKINGS 7503 SOLUTION CENTER CHICAGO, IL 60677	PRINTING&PRODUCTION	558,233.
THOMPSON, HABIB & DENISON, INC. 80 HAYDEN AVENUE, SUITE 300 LEXINGTON, MA 02421	CONSULTING	541,012.
BLACKBAUD 2000 DANIEL ISLAND DRIVE CHARLESTON, SC 29492-7541	CONSULTING	439,762.
BEACONFIRE CONSULTING, INC. 2300 CLARENSON BLVD, SUITE 1100 ARLINGTON, VA 22201	CONSULTING	415,757.