For Paperwork Reduction Act Notice, see the separate instructions.

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

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

2016
Open to Public Inspection

Form 990 (2016)

For the 2016 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Check if applicable Address change FISH Food Bank Doing business as 46-2588355 Name change Number and street (or P O box if mail is not delivered to street address) 1767 12th Street, No 147 541-386-3474 Initial return Final return/ City or town state or province, country, and ZIP or foreign postal code Hood River OR 97031 G Gross receipts \$ 237,863 Amended return Name and address of principal officer Application pending H(a) Is this a group return for subordinates? Marianne Durkan 1065 Eby Road H(b) Are all subordinates included? Hood River OR 97031 If "No." attach a list (see instructions) X 501(c)(3) 501(c) () (insert no) Tax-exempt status 527 www.fish-food-bank.com Website⁻ ▶ H(c) Group exemption number ▶ X Corporation Trust Form of organization Association Year of formation M State of legal domicile ∂ Part I Summary Activities & Governance 1 Briefly describe the organization's mission or most significant activities See Schedule O 2 Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 4 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 4 6 Total number of volunteers (estimate if necessary) 0 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 7a b Net unrelated business taxable income from Form 990-1, line 0 7b Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h) 237,148 Revenue S 9 Program service revenue (Part VIII, line 2q) 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 715 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c; and 11e) 12 Total revenue – add lines 8 through 11 (must equal Part VIII Column (A) line 12) 237, 863 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 38,858 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 **b** Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 108,021 146,879 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 90,984 Assets or Balances **Beginning of Current Year** End of Year 189,255 280 20 Total assets (Part X, line 16) 239 21 Total liabilities (Part X, line 26) 189,255 280 22 Net assets or fund balances Subtract line 21 from line 20 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 Sign Becky Bugge Here Treasurer Type or print name and title Print/Type preparer's name Preparer's signature X ıf PTIN Check Paid Wendy B Willow Wendy B Willo self-employed P00300672 Preparer Wendy B Willow LLC 91-1816483 Firm's EIN Firm's name **Use Only** PO Box 1267 97031-9781 Hood River, OR 541-386-5208 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

orm 990 (2016)	FISH Food Ban	<u>k</u>	46-2588355	Page 2
	•	Service Accomplishments		
		ontains a response or note to any	line in this Part III	X
	ibe the organization's mission	on		
See Sche	edule O			
2 Did the organ	nization undertake any sign	ficant program services during the year w	thich were not listed on the	
	90 or 990-EZ?	meant program services during the year w	mich were not listed on the	Yes X No
•	cribe these new services or	Schedule O		163 [3] 110
		or make significant changes in how it cond	ducts, any program	
services?	g,		, p 3. 2	Yes X No
If "Yes," des	cribe these changes on Sch	nedule O		
			e largest program services, as measured by	
			e amount of grants and allocations to others	
· ·		for each program service reported	•	•
4a (Code) (Expenses \$	146,879 including grants of		
Destrib	uted food regi	larly and on an eme	rgency basis regardle:	ss of gender,
			a friendly, instant,	
			manner; in cocoperation	on with faith
groups,	businesses and	nd community members	•	
4b (Code) (Expenses \$	including grants of	\$) (Revenue	\$
4c (Code) (Expenses \$	including grants of	\$) (Revenue	¢ \
46 (Code) (⊏xpenses ⊅	including grants of) (Revenue	,
4d Other progra	am services (Describe in Sc	hedule O)		
(Expenses		including grants of \$) (Revenue \$)
	m service expenses ▶	146,879		
F:				

Form 990 (2016) FISH Food Bank Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	_ }	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	1	}	
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		1	
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a		1	
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or	!		
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u>x</u>
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted		}	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1		
	VII, VIII, IX, or X as applicable))	1	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		<u> </u>
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С			1	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
d			İ	77
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	- {	v
12-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	425	ļ	x
L	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a		
b	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	+	$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		$\frac{\mathbf{x}}{\mathbf{x}}$
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	170	-+	<u></u>
~	fundraising, business, investment, and program service activities outside the United States, or aggregate		į	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	ļ	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Ì	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Ì	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	1	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	}	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
			000	

Form 990 (2016) FISH Food Bank Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	1		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21_		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		.	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	- (ļ	
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		_X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		_X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	1)	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	1	,	
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any		7	
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member or to a 35% controlled		l	
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	- 1	İ	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	- {	}	
	Schedule L, Part IV	28ь		_X_
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	- {	- 1	
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	- 1		
	conservation contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	ì	1	
	complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		1	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	1	1	
	or IV, and Part V, line 1	34		<u> </u>
35a		35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		Ì	
		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
		36		_ <u>X</u> _
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		- 1	
	F	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			_
_	19? Note. All Form 990 filers are required to complete Schedule O	38	1	<u> </u>
		Forr	" 990	(2016)

Form 990 (2016) FISH Food Bank

Pa	irt 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			ᆚ
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
1a				1
b		 -		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	, ,		ł
L	Statements, filed for the calendar year ending with or within the year covered by this return [2a 4]		x	ļ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		├
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20		x
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		1
b 4a		30		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			ļ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4-		x
L	account)?	4a		<u> </u>
U	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			ĺ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	02		
•	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	55		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			l
_	and services provided to the payor?	7a		l
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		ĺ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8_		
9	Sponsoring organizations maintaining donor advised funds.			1
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter	[[Į	Į
а	Initiation fees and capital contributions included on Part VIII, line 12			l
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		ļ	
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders		- 1	
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L -	Note. See the instructions for additional information the organization must report on Schedule O			:
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		Į	í
_				ı
C 14a	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
l4a h	If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		

Form 990 (2016) FISH Food Bank 46-2588355 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed OR Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records 3481 Ehrck Hill Road Becky Bugge

541-386-3474

OR 97031

Hood River

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

|X| 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	erage Position rs per (do not check more than one eek box, unless person is both an						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(w-2/1099-MISC)	from the organization and related organizations
(1) Marianne Durkan			_							
	2.00								_	_
President	0.00	X	<u> </u>	X		-		0	0	0
(2) Gail Lyon	2.00									
Vice President	0.00	x		x	ĺ			o	o	О
(3) Bette Lou Yenne	0.00	1		^	-	+				
(5) Decte Hou Tenne	6.00	İ				1				
Secretary	0.00	x		x				О	0	0
(4) Becky Bugge	0.00	† 	 	=	_	1 1				
(,,	15.00	1	Ì							
Treasurer	0.00	x		x				o	o	0
(5)										
(6)		-								
(7)					-		_			
(8)		-			_					
(9)										
(10)			-							
(11)		-	-							

<u>Pa</u>	rt VII Section A. Officers	, Directors, Trus	tees	s, Ke	y Er	nplo	yees	s, ar	nd Highest Compensated	Employees (continued)			_
	(A) Name and title	(B) Average hours per week (list any	bo	x unle	Pos check ess pe nd a d	rson ı	than o s both r/truste	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	cor	(F) stimated mount of other npensatio	n
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(4V-2/1099-MISC)	or aı	from the ganization nd related janization:	3
			ļ 										
													-
1b c d_	Sub-total Total from continuation sheet Total (add lines 1b and 1c)	ets to Part VII, S	ecti	on A				> > >					
2	Total number of individuals (increportable compensation from			to th	ose	liste	d abo	ove)	who received more than \$1	00,000 of			
3	Did the organization list any fo	rmer officer, dire	ctor,	or tr	uste	e, ke	y em	ploy	yee, or highest compensated	I		Ye	
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	1a, is the sum o	f rep	ortat	ole co	ompe	ensat	tion		m the		3	X
5	Individual Did any person listed on line 1stor services rendered to the or	ganization? If "Ye	ue co s," c	ompe omp	nsat <i>lete</i>	ion f Sche	rom : edule	any <i>J fo</i>	unrelated organization or incorruct	dividual		5	x
1	tion B. Independent Contracto Complete this table for your five	e highest compe	nsate	ed in	depe	nde	nt co	ntra	ctors that received more tha	n \$100,000 of			
	compensation from the organia	(A) I business address	nper	nsati	on to	or the	cale	enda		(B) tion of services		(C Compe) esation
						·							
								<u> </u>					
2	Total number of independent of received more than \$100,000	contractors (included)	ding from	but r	ot lir orga	nited	to th	nose	e listed above) who	0			
DAA								_				Form 9	90 (2016)

	_	Check if Schedule				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
S S	1a	Federated campaigns	1a				reveride		512-514
	b	Membership dues	1b						ļ
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising events	1c			j			
IZ IZ	d	Related organizations	1d		70,116				
المارين	е	Government grants (contributions)	1e						
	f	All other contributions, gifts, grants,							
HE E		and similar amounts not included above	1f	:	167,032				
ĒÖ	g	Noncash contributions included in lines 1a				1			1
일일	h	Total. Add lines 1a-1f	•		▶	237,148			
e l					Busn Code				
le l	2a								
Re	b			[
je	С			[
Sel	d			[
Ë	е								
Program Service Revenue	f	All other program service reve	nue	Į					
۵	g	Total. Add lines 2a-2f			•			_ 	
	3	Investment income (including	dıvıdends	, interest,					
		and other similar amounts)			▶	715	715		
	4	Income from investment of tax	-exempt	bond prod	ceeds 🕨 📙				
	5	Royalties							
		(ı) Real		(II) Pe	ersonal				
	6a	Gross rents							
	b	Less rental exps				Į			
	С	Rental inc or (loss)				ł			
	d 7a	Net rental income or (loss) Gross amount from			<u> </u>				
		sales of assets (i) Securities		(11) (Other				
		other than inventory							
	b	Less cost or other							
		basis & sales exps							
		Gain or (loss)							
		Net gain or (loss) Gross income from fundraising ever	nte [· · · · · · · · · · · · · · · · · · ·			<u> </u>
e e	oa	(not including \$	311.5						
Ven		of contributions reported on line 1c	,						
Re.		See Part IV, line 18	/ a		Į.				
Other Revenue	h	Less direct expenses	ь						·
ŏ		Net income or (loss) from fund		vents	•				
		Gross income from gaming activities							
		See Part IV, line 19	а		}				
	ь	Less direct expenses	b		-				
		Net income or (loss) from gam	ے ing activi	ties					
		Gross sales of inventory, less							
		returns and allowances	а						
	ь	Less cost of goods sold	ь						
	C	Net income or (loss) from sale	s of inver	ntory	>				
		Miscellaneous Revenue			Busn Code		-		
	11a								
	b			ļ					
	С								
	d	All other revenue		Į					
	е	Total. Add lines 11a-11d			> _				
	12	Total revenue. See instructio	ns		>	237,863	715	0	0

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)

	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				i
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees		·		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			·	
7	Other salaries and wages	29,336	29,336		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)		· · · · · · · · · · · · · · · · · · ·		
9	Other employee benefits				
10	Payroll taxes	9,522	9,522		
11	Fees for services (non-employees)				
а	Management				
b	Legal	858	858	<u> </u>	
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)		<u> </u>		
12	Advertising and promotion			·	
13	Office expenses	6,368	6,368		
14	Information technology				
15	Royalties				
16	Occupancy	19,662	19,662		
17	Travel	1,026	1,026		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		<u></u>		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,830	2,830		
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Food/Groceries	48,121	48,121		
b	Mid Columbia Action Prog	27,080	27,080		
c	Special Projects	1,985	1,985		<u> </u>
d	Miscellaneous	167	167		
е	All other expenses	-76	-76		
25	Total functional expenses Add lines 1 through 24e	146,879	146,879	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Part	X Balance Sheet			
	Check if Schedule O contains a response or	note to any line in this Part X		
	<u> </u>		(A) Beginning of year	(B) End of year
1	Cash—non-interest bearing		117,852 1	138,000
2	2 Savings and temporary cash investments		71,403 2	142,23
3	Pledges and grants receivable, net		3	
4	4 Accounts receivable, net		4	
5	5 Loans and other receivables from current and form	er officers, directors,		
- }	trustees, key employees, and highest compensate	d employees	ļ	
İ	Complete Part II of Schedule L	, ,	5	
6	Loans and other receivables from other disqualified	d persons (as defined under section		
	4958(f)(1)), persons described in section 4958(c)(3] }	
	sponsoring organizations of section 501(c)(9) volume		į į	
χ, l	organizations (see instructions) Complete Part II o		6	
Assets 7 8			7	
₹ 8	8 Inventories for sale or use		8	
9	9 Prepaid expenses and deferred charges	9		
10	0a Land, buildings, and equipment cost or			
1	other basis Complete Part VI of Schedule D	10a		
	b Less accumulated depreciation	10b	10c	
11			11	<u></u>
12	· · · · · · · · · · · · · · · · · · ·		12	
13		1	13	
14	· · · · · · · · · · · · · · · · · · ·		14	
15		15		
16		line 34)	189,255 16	280,23
17			17	
18			18	
19	-		19	
20	Tax-exempt bond liabilities		20	
21	•	t IV of Schedule D	21	
22				
월	trustees, key employees, highest compensated em	•		
	disqualified persons Complete Part II of Schedule	•	22	
تّ ₂₃			23	
24			24	
25	5 Other liabilities (including federal income tax, paya			
	parties, and other liabilities not included on lines 17			
	of Schedule D	, .	25	
26			0 26	(
1	Organizations that follow SFAS 117 (ASC 958),	check here ▶ X and		
န္မ	complete lines 27 through 29, and lines 33 and			
∑ ⊑ 27	•		189,255 27	209,982
28			28	70,257
29	· · · · · · · · · · · · · · · · · · ·		29	
5 -	Organizations that do not follow SFAS 117 (AS	C 958), check here ▶ ☐ and		
5	complete lines 30 through 34.		i !	
S 30	•		30	
2 31		oment fund	31	
27 28 29 29 29 29 29 29 29 29 29 29 29 29 29			32	
B 32			189,255 33	280,239
	4 Total liabilities and net assets/fund balances		189,255 34	280,239

Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 3 90, 94 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Univestment expenses 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Univestment (B) 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 X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2 Were the organization's financial statements compiled or reviewed by an independent accountant? 16 "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, or both Separate basis Consolidated basis, or both	orm	990 (2016) FISH Food Bank 46-2588355			Pa	ge 12
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 3 3 90, 9 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 189, 2 5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 6 Investment expenses 7 7 8 Prior pend adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Interpretation of the balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances (explain in Schedule O) 9 Interpretation of the balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 11 Accounting method used to prepare the Form 990 X Cash Accrual Other 12 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 14 Were the organization's financial statements compiled or reviewed by an independent accountari? 16 "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 16 Separate basis Consolidated basis Both consolidated and separate basis 16 Were the organization's financial statements audited by an independent accountari? 16 "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis Consolidated basis, or both 16 Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis Both consolidated and separate basis Consolidated basis Both consolidated and separate basis Consolidated basis Both consolidated and separate basis Consolidated basis Both consolidated basis Both consoli						
2 146,8 3 Revenue less expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 3 90,9 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 189,2 5 Net unrealized gains (losses) on investments 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 7 7 8 Prior peniod adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line) 33, column (B)) 10 280,2 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 X 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? 1 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 by an independent accountant? 1 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis by an independent accountant? 1 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis by an independent accountant? 1 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis by an independent accountant? 1 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis by an independent accountant? 1 If "Yes," check a box below to indicate whether the financial statements of the year were audited on a separate bas		Check if Schedule O contains a response or note to any line in this Part XI			_	
3	1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	37,	863
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 11 Accounting method used to prepare the Form 990 X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 11 Accounting method used to prepare the Form 990 X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 12 Were the organization's financial statements compiled or reviewed by an independent accountant?	2	Total expenses (must equal Part IX, column (A), line 25)	2	1	46,	879
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior penod adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Other changes in net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 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 X 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? 2a 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? 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis c if If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis c if Yes, to line 2 a 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 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O If the organization changed either its oversight process or selection process during the tax year, explain in the Single Audit Act and OMB Circular A-133? If the o	3	Revenue less expenses Subtract line 2 from line 1	3		90,	984
6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Part XII Financial Statements and Reporting 11 Check if Schedule O contains a response or note to any line in this Part XII 12 Accounting method used to prepare the Form 990	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1:	89,	255
7 Investment expenses 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 9 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 280, 22 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Financial Statements of a cocounting 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? 2a 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 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis 2b 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 2c If "Yes," to line 2 a 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? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	5	Net unrealized gains (losses) on investments	5			
8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33. column (B)) 10 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	6	Donated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 280, 2: 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 X 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? 2a : 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 Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b 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," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis c If "Yes," to line 2 a 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? 2c 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? 3a If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	7	Investment expenses	7			
Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 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 X 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 Both consolidated and separate basis c If "Yes," check a box below to indicate whether the financial statements for the year were audited on a 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	8	Prior period adjustments	8			
33, column (B)) 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 X 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 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 Both consolidated and separate basis c If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis c If "Yes," theck a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis c If "Yes," theck a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis Both consolidated and separate basis c If "Yes," the car of 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? 3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	9	Other changes in net assets or fund balances (explain in Schedule O)	9			
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 X 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? 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a 'if "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a 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 Both consolidated and separate basis c If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis c If "Yes," the can be 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	10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990 X Cash Accrual Other		33, column (B))	10	28	80,	239
Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990 X Cash Accrual Other	Pa	rt XII Financial Statements and Reporting				
1 Accounting method used to prepare the Form 990 X 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? 2a 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? 2b 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? 2c 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		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					Yes	No
Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were 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? 2c 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? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	1	Accounting method used to prepare the Form 990 X Cash Accrual Other				
Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were 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? 2c 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? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		If the organization changed its method of accounting from a prior year or checked "Other," explain in		_		
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 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? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						
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 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? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
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? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						
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		•				
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? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						
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	b			2h		x
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	_			1		
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		•				
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? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						}
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? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	c					
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? 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	Ū	· · · · · · · · · · · · · · · · · · ·		20		
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						
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						
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	3a			li		
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				_{3a}		
	b					
- ogained death of decides of the contract of	_			3b		
Form 990 (2					n 990	(2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

2016 Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

lame	of the	organization	FISH Food Ba	nk			Employer Ident 46-258	fication number	
P	art I	Reas		Status (All organizations	must co	mnlete			
				it is (For lines 1 through 12, che			ans part, occ mandeton		
1			·	ciation of churches described in	•	•	A)(i)		
2)(ii). (Attach Schedule E (Form					
3	H			organization described in secti			L.		
4	H		·	in conjunction with a hospital de				ıtal's name.	
		city, and state	-					,	
5		. ·		a college or university owned or	operated	by a gove	ernmental unit described in		
		section 170(b)(1)(A)(iv). (Complete Part I	1)		, ,			
6		A federal, stat	te, or local government or gov	vernmental unit described in sec	tion 170(b)(1)(A)(v	<i>י</i>).		
7	X	_	on that normally receives a su section 170(b)(1)(A)(vi). (Co	ubstantial part of its support from mplete Part II)	a govern	mental ur	nit or from the general public		
8		A community	trust described in section 17	'0(b)(1)(A)(vi). (Complete Part II)				
9		An agricultura	al research organization desc	ribed in section 170(b)(1)(A)(ix) operated	ın conjur	iction with a land-grant college		
		or university of university	or a non-land grant college of	agriculture (see instructions) Ei	nter the na	ime, city,	and state of the college or		
10		An organization	on that normally receives (1)	more than 33 1/3% of its suppo	rt from cor	ntributions	s, membership fees, and gross		
		•	· · · · · · · · · · · · · · · · · · ·	t functions—subject to certain e					
			_	l unrelated business taxable inco , 1975 See section 509(a)(2). (11 tax) from businesses		
11		, ,		clusively to test for public safety	•		2)(4)		
12	H	ū	· ·	clusively to test for public salety			• • •		
	L	•	•	tions described in section 509(
		Check the box	x in lines 12a through 12d tha	it describes the type of supporting	ig organiza	ation and	complete lines 12e, 12f, and 12	g	
	а	Type I. A	supporting organization oper	rated, supervised, or controlled b	y its supp	orted orga	anization(s), typically by giving		
			• • • •	er to regularly appoint or elect a mplete Part IV, Sections A an		f the direc	tors or trustees of the		
	b	Type II. A	A supporting organization sup	ervised or controlled in connecti	on with its	supporte	d organization(s), by having		
			-	ng organization vested in the sa	me persor	s that co	ntrol or manage the supported		
		_ `	ion(s) You must complete I						
	С	its suppor	rted organization(s) (see instr	ipporting organization operated in ructions) You must complete F	art IV, Se	ctions A	, D, and E.		
	d			. A supporting organization opera organization generally must satis)	
				ust complete Part IV, Sections	•				
	е		·	ived a written determination from					
				functionally integrated supportin			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	f		nber of supported organization						
	9	Provide the fo	ollowing information about the	supported organization(s)					
•		e of supported	(II) EIN	(iii) Type of organization (described on lines 1-10	1 ' '	organization or governing	(v) Amount of monetary	(vi) Amount of	
	Org	ganization		above (see instructions))	1	ment?	support (see instructions)	other support (see instructions)	
				_	Yes	No			
(A)									
(B)									
					 	<u> </u>			
(C)									
<u> </u>			 		+				
(D))								
(E)					†	 			
\ <u>-</u>									
					l	[

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 I fithe organization fails to qualify under the tests listed below, please complete Part III)

	tion A. Public Support						
Caler	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		106,668	126,540	173,634	237,148	643,990
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		106,668	126,540	173,634	237,148	643,990
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						643,990
Sec	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4		106,668	126,540	173,634	237,148	643,990
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, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10		<u> </u>				643,990
12	Gross receipts from related activities, etc. (s	see instructions)				12	966
13	First five years. If the Form 990 is for the o	organization's first,	second, third, fourth	, or fifth tax year as	a section 501(c)(3	3)	
	organization, check this box and stop here						<u> </u>
Sec	tion C. Computation of Public Su	· ·					
14	Public support percentage for 2016 (line 6,))		14	%_
15	Public support percentage from 2015 Scheo					15	%_
16a	33 1/3% support test—2016. If the organiz				3% or more, chect	k this	
	box and stop here . The organization qualifi		· · · -				▶
b	33 1/3% support test—2015. If the organization q				33 1/3% or more,	check	▶ [
17a	10%-facts-and-circumstances test—201 10% or more, and if the organization meets Part VI how the organization meets the "fac	the "facts-and-circ	umstances" test, che	eck this box and st	op here. Explain ir	1	
	organization						▶ □
b	10%-facts-and-circumstances test—201 15 is 10% or more, and if the organization r Explain in Part VI how the organization mee	neets the "facts-an	d-circumstances" te:	st, check this box a	nd stop here.		
18	supported organization Private foundation. If the organization did					-	▶ [
	instructions						▶ [

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support							
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 201	6	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513						_	
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5					<u> </u>		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
C	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6)							
Sec	tion B. Total Support		L		<u> </u>	L		
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 201	6	(f) Total
9	Amounts from line 6	<u> </u>	(1/10.0	(4) = 3 · ·	(=,==,=	(0, 20		(i) Total
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b					<u> </u>		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
13	Total support. (Add lines 9, 10c, 11,							
	and 12)		<u> </u>		<u> </u>			
14	First five years. If the Form 990 is for the		second, third, four	th, or fifth tax year a	as a section 501(c)	(3)		
Sec	organization, check this box and stop here tion C. Computation of Public Su		tage					
	Public support percentage for 2016 (line 8,			(f))			15	
15 16	Public support percentage from 2015 Sche			(1))			16	<u>%</u> %
	tion D. Computation of Investme						101	
<u>360</u> 17	Investment income percentage for 2016 (Iii			column (f))			17	%
18	Investment income percentage from 2015			50.0 (17)			18	<u>%</u>
19a	33 1/3% support tests—2016. If the organ			14. and line 15 is m	ore than 33 1/3%.	and line		
	17 is not more than 33 1/3%, check this bo							▶ □
b	33 1/3% support tests—2015. If the organ							
	line 18 is not more than 33 1/3%, check this							▶ 🗌
20	Private foundation. If the organization did							▶ □

Schedule A (Form 990 or 990-EZ) 2016

Part IV **Supporting Organizations**

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

	organization:	

- Are all of the organization's supported organizations listed by name in the organization's governing 1 documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor 7 (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

_		Yes	No
	1_		
	2		
	3a		
	3b	1	
	3c		
	4a		
	4b		
			i
	4c		
			i
	5a		
	5b		
İ	5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
A (F	orm 99	0 or 990-	EZ) 2016

3

b

Parent of Supported Organizations Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

3a

Schedule A (Form 990 or 990-EZ) 2016

(Form 990 or 990-EZ) 2016 FISH Food Bank		46-2588	3355	Page 6
Type III Non-Functionally Integrated 509(a)(3) Supporting Organizat	ions		
Check here if the organization satisfied the Integral Part Test as a	qualifying trust on Nov 20, 197	'0 (explain in Part VI) See		
instructions. All other Type III non-functionally integrated support	ting organizations must comple	te Sections A through E		
A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
et short-term capital gain	1			
ecoveries of prior-year distributions	2			
ther gross income (see instructions)	3			
dd lines 1 through 3	4			
and a send doubters				

ection A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)		
1 Net short-term capital gain	1			
2 Recoveries of prior-year distributions	2			
3 Other gross income (see instructions)	3			
4 Add lines 1 through 3	4			
5 Depreciation and depletion	5			
6 Portion of operating expenses paid or incurred for production or				
collection of gross income or for management, conservation, or				
maintenance of property held for production of income (see instructions)	6			
7 Other expenses (see instructions)	7			
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8			
ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)	
1 Aggregate fair market value of all non-exempt-use assets (see				
instructions for short tax year or assets held for part of year)				
a Average monthly value of securities	1a			
b Average monthly cash balances	1b			
c Fair market value of other non-exempt-use assets	1c			
d Total (add lines 1a, 1b, and 1c)	1d			
e Discount claimed for blockage or other				
factors (explain in detail in Part VI)				
2 Acquisition indebtedness applicable to non-exempt-use assets	2			
3 Subtract line 2 from line 1d	3			
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,				
see instructions)	4			
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	_ 5			
6 Multiply line 5 by 035	6			
7 Recoveries of prior-year distributions	7			
8 Minimum Asset Amount (add line 7 to line 6)	8			
Section C - Distributable Amount				
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2 Enter 85% of line 1	2			
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4 Enter greater of line 2 or line 3	4	- 		
5 Income tax imposed in prior year	5			
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	- T			
emergency temporary reduction (see instructions)	_ 6		l	

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970

Schedule A (Form 990 or 990-EZ) 2016

instructions)

Schedule A (Form 990 or 990-EZ) 2016

greater than zero, explain in Part VI See instructions Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

Excess distributions carryover to 2017. Add lines 3j

Part VI See instructions

Breakdown of line 7

b Excess from 2013 c Excess from 2014 d Excess from 2015 e Excess from 2016

and 4c

Part VI

Schedule A (Form 990 or 990-EZ) 2016

FISH Food Bank

46-2588355

Page 8

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

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

2016

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

OMB No 1545-0047

FISH Food Bank

Employer identification number

46-2588355

Form 990 - Organization's Mission

In cooperation with faith groups, businesses and community members, it is the mission of the FISH Food Bank to help alleviate hunger by distributing food regularly and on an emergency basis, regardless of gender, race, religion, or sexual orientation and in a friendly, instant, sympathetic, helpful, nonjudgmental and confidential manner.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public