

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

OMB No 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07-01-2017, and ending 06-30-2018

<p>B Check if applicable:</p> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<p>C Name of organization SHARE OUR STRENGTH</p> <hr/> <p>Doing business as</p> <hr/> <p>Number and street (or P O box if mail is not delivered to street address) Room/suite 1030 15TH STREET NW NO 1100W</p> <hr/> <p>City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20005</p>	<p>D Employer identification number 52-1367538</p> <hr/> <p>E Telephone number (202) 393-2925</p> <hr/> <p>G Gross receipts \$ 74,878,329</p>
<p>I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</p>	<p>F Name and address of principal officer WILLIAM H SHORE 1030 15TH STREET NW NO 1100W WASHINGTON, DC 20005</p>	<p>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶</p>
<p>J Website: ▶ WWW.SHAREOURSTRENGTH.ORG</p>	<p>K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</p>	<p>L Year of formation 1984 M State of legal domicile DC</p>

Part I Summary

1	Briefly describe the organization's mission or most significant activities TO END HUNGER AND POVERTY IN THE U.S. AND ABROAD, WITH A PRIORITY ON ENDING CHILDHOOD HUNGER IN AMERICA		
2 Check this box <input type="checkbox"/> 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)	3	19
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	339
6	Total number of volunteers (estimate if necessary)	6	3,000
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	46,674
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	60,290,994	68,847,785
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	38,060	176,640
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	45,292	290,305
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-4,193,989	-2,900,948
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	56,180,357	66,413,782
	14 Benefits paid to or for members (Part IX, column (A), line 4)	8,882,281	10,924,850
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	21,428,376	24,025,124
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 13,160,496	721,590	1,263,482
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	20,024,519	21,385,507	
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	51,056,766	57,598,963	
19 Revenue less expenses Subtract line 18 from line 12	5,123,591	8,814,819	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	31,857,505	42,073,384
	22 Net assets or fund balances Subtract line 21 from line 20	9,188,810	10,663,406

Part II Signature Block

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

Sign Here	2019-03-20
Signature of officer	Date
JESSICA SHERRY SENIOR VP, CFO	
Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name FRANK H SMITH	Preparer's signature FRANK H SMITH	Date 2019-03-17	Check <input type="checkbox"/> if self-employed	PTIN P00639053
	Firm's name ▶ MARCUM LLP	Firm's EIN ▶ 11-1986323		Phone no (202) 227-4000	
	Firm's address ▶ 1899 L STREET NW SUITE 850 WASHINGTON, DC 20036				

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

SHARE OUR STRENGTH WAS FOUNDED WITH THE BELIEF THAT EVERYONE HAS A STRENGTH TO SHARE IN THE GLOBAL FIGHT AGAINST HUNGER AND POVERTY, AND THAT IN THESE SHARED STRENGTHS LIE SUSTAINABLE SOLUTIONS TODAY WE FOCUS THESE STRENGTHS ON ENDING CHILDHOOD HUNGER THROUGH OUR CAMPAIGNS, LIKE NO KID HUNGRY, WHICH WILL END CHILDHOOD HUNGER IN THE UNITED STATES, AND COOKING MATTERS, WHICH INSPIRES FAMILIES TO MAKE HEALTHY, AFFORDABLE FOOD CHOICES

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

If "Yes," describe these new services on Schedule O

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 29,402,361 including grants of \$ 10,463,350) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ 10,214,987 including grants of \$ 461,500) (Revenue \$ 40,990)
See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 39,617,348

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
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)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	Yes	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
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? <i>If "Yes," complete Schedule R, Part VI</i>		No
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	Yes	

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (19), 1b (18), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

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

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 (List of states), 18 (Public inspection methods), 19 (Schedule O disclosure), 20 (Person with books and records).

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	4,812,411			
	d Related organizations	1d				
	e Government grants (contributions)	1e	4,292,796			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	59,742,578			
	g Noncash contributions included in lines 1a-1f \$ <u>1,159,421</u>					
	h Total. Add lines 1a-1f		68,847,785			
Program Service Revenue		Business Code				
	2a EXHIBITOR FEES	900099	135,650		135,650	
	b CLASS FEES	900099	30,990	30,990		
	c HONORARIA	900099	10,000	10,000		
	d _____					
	e _____					
	f All other program service revenue		176,640			
g Total. Add lines 2a-2f		176,640				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		150,860		150,860	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties		3,127		3,127	
	6a Gross rents	(i) Real				
		285,699				
		b Less rental expenses	0			
		c Rental income or (loss)	285,699			
	d Net rental income or (loss)		285,699		285,699	
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		1,967,069				
		b Less cost or other basis and sales expenses	1,827,624			
		c Gain or (loss)	139,445			
	d Net gain or (loss)		139,445		139,445	
	8a Gross income from fundraising events (not including \$ <u>4,812,411</u> of contributions reported on line 1c) See Part IV, line 18	a		3,449,883		
		b Less direct expenses	b	6,609,592		
c Net income or (loss) from fundraising events			-3,159,709		-3,159,709	
9a Gross income from gaming activities See Part IV, line 19	a		109,322			
	b Less direct expenses	b	27,331			
	c Net income or (loss) from gaming activities		81,991		81,991	
10a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code					
11a INTERCOMPANY REVENUE	900099	26,000		26,000		
b MISCELLANEOUS	900099	3,781		3,781		
c REFUNDS	900099	2,845		2,845		
d All other revenue		-144,682		-144,682		
e Total. Add lines 11a-11d		-112,056				
12 Total revenue. See Instructions		66,413,782	40,990	0	-2,474,993	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	10,824,850	10,824,850		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	100,000	100,000		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,589,656	2,033,139	629,201	927,316
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	16,829,965	10,657,672	1,600,085	4,572,208
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	357,545	239,921	19,340	98,284
9 Other employee benefits	1,812,130	1,149,480	172,951	489,699
10 Payroll taxes	1,435,828	909,168	149,881	376,779
11 Fees for services (non-employees)				
a Management				
b Legal	50,042	8,581	41,461	
c Accounting	76,381		76,381	
d Lobbying	281,280	281,280		
e Professional fundraising services See Part IV, line 17	1,263,482			1,263,482
f Investment management fees	28,364		28,364	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,281,363	3,742,830	538,533	
12 Advertising and promotion	2,940,067	1,795,686	175,708	968,673
13 Office expenses	930,860	504,284	80,882	345,694
14 Information technology	1,605,776	1,107,738	80,471	417,567
15 Royalties				
16 Occupancy	2,280,412	1,440,319	204,958	635,135
17 Travel	1,556,219	1,012,003	95,293	448,923
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	5,052,255	2,306,459	283,409	2,462,387
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	507,223	367,344	47,602	92,277
23 Insurance	244,406	155,430	26,904	62,072
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.)				
a COOKING MATTERS PROGRAM	981,164	981,164		
b FEES AND LICENSES	465,320		465,320	
c BAD DEBT	88,441		88,441	
d UBI TAXES	15,934		15,934	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	57,598,963	39,617,348	4,821,119	13,160,496
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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	5,020,483	2,184,495	107,219	2,728,769

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	9,538,055	1	6,484,346
	2 Savings and temporary cash investments	443,689	2	7,164,927
	3 Pledges and grants receivable, net	12,194,439	3	17,319,637
	4 Accounts receivable, net	653,602	4	356,575
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	203,238
	8 Inventories for sale or use	11,965	8	11,042
	9 Prepaid expenses and deferred charges	1,479,364	9	2,118,986
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	4,173,194		
	b Less accumulated depreciation	2,312,540		
	11 Investments—publicly traded securities	4,258,786	11	5,656,249
	12 Investments—other securities See Part IV, line 11	1,007,770	12	863,088
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	61,882	15	34,642
16 Total assets. Add lines 1 through 15 (must equal line 34)	31,857,505	16	42,073,384	
Liabilities	17 Accounts payable and accrued expenses	3,964,158	17	4,929,846
	18 Grants payable	780,644	18	1,583,309
	19 Deferred revenue	802,408	19	832,464
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	3,641,600	25	3,317,787
	26 Total liabilities. Add lines 17 through 25	9,188,810	26	10,663,406
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,366,781	27	7,697,966
	28 Temporarily restricted net assets	18,301,914	28	23,712,012
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	22,668,695	33	31,409,978	
34 Total liabilities and net assets/fund balances	31,857,505	34	42,073,384	

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)	1	66,413,782
2	Total expenses (must equal Part IX, column (A), line 25)	2	57,598,963
3	Revenue less expenses Subtract line 2 from line 1	3	8,814,819
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	22,668,695
5	Net unrealized gains (losses) on investments	5	-73,536
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	31,409,978

Part XII Financial Statements and Reporting

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

		Yes	No
<p>1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O</p>			
<p>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</p> <p><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2a		No
<p>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</p> <p><input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2b	Yes	
<p>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</p>	2c	Yes	
<p>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?</p>	3a	Yes	
<p>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</p>	3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 52-1367538

Name: SHARE OUR STRENGTH

Form 990 (2017)

Form 990, Part III, Line 4a:

NO KID HUNGRY ACCESS AND ADVOCACY SINCE LAUNCHING THE NO KID HUNGRY CAMPAIGN, SHARE OUR STRENGTH HAS CONNECTED KIDS STRUGGLING WITH HUNGER WITH MORE THAN 1 BILLION MEALS AND ONE-THIRD FEWER CHILDREN ARE NOW STRUGGLING WITH HUNGER. BY WORKING WITH OUR PARTNERS AND INVESTING IN PRACTICAL SOLUTIONS TO END HUNGER, WE ARE FEEDING MORE KIDS EVERY DAY, MAKING SURE THEY HAVE THE FOOD THEY NEED TO LEARN AND GROW. SCHOOLS ARE MAKING BREAKFAST PART OF THE SCHOOL DAY WITH THE HELP OF NO KID HUNGRY. WE'VE SUCCESSFULLY ADVOCATED FOR BREAKTHROUGH POLICY CHANGES TO FEED MORE CHILDREN. AND, WE'RE FINDING NEW WAYS TO REACH KIDS WITH MEALS DURING THE SUMMER AND AFTER THE SCHOOL DAY, EVERYWHERE FROM MAJOR CITIES LIKE NEW YORK CITY TO THE RURAL APPALACHIAN HILL COUNTRY. NO MATTER THE TIME OF DAY, OR TIME OF YEAR, WE'RE THERE FOR KIDS WITHOUT ENOUGH FOOD AT HOME.

Form 990, Part III, Line 4b:

COOKING MATTERS CAMPAIGN SHARE OUR STRENGTH HAS MORE THAN 20 YEARS OF EXPERIENCE IN DELIVERING QUALITY NUTRITION EDUCATION THROUGH COOKING MATTERS, A CAMPAIGN TO EMPOWER LOW-INCOME FAMILIES WITH THE SKILLS TO STRETCH THEIR FOOD BUDGETS SO THEIR CHILDREN GET HEALTHY MEALS AT HOME COOKING MATTERS SERVES FAMILIES AT MORE THAN 1,200 LOCATIONS ACROSS THE COUNTRY THROUGH HANDS-ON, SIX-WEEK COOKING COURSES, INTERACTIVE GROCERY STORE TOURS, AND MOBILE, ONLINE AND EDUCATIONAL TOOLS PARTICIPANTS LEARN TO SHOP SMARTER, USE NUTRITION INFORMATION TO MAKE HEALTHIER CHOICES, AND COOK DELICIOUS, AFFORDABLE MEALS IN 2017, WE REACHED A MAJOR MILESTONE MORE THAN 500,000 FAMILIES HAVE LEARNED HOW TO PURCHASE AND PREPARE NUTRITIOUS FOOD THROUGH OUR PROGRAMMING

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM H SHORE FOUNDER, EXECUTIVE CHAIRMAN	4 00	X		X				378,928	0	42,716
SID ABRAMS DIRECTOR	2 00	X						0	0	0
JAMES BAREUTHER DIRECTOR	1 00	X						0	0	0
JIM BERRIEN DIRECTOR	1 00	X						0	0	0
JUDYANN BIGBY DIRECTOR	1 00	X						0	0	0
NEIL BRAUN DIRECTOR	2 00	X						0	0	0
JONI DOOLIN DIRECTOR	1 00	X						0	0	0
WALLY DOOLIN DIRECTOR	3 00	X						0	0	0
NOAH GLASS DIRECTOR	1 00	X						0	0	0
MICHAEL GORDON DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BOB GREENSTEIN DIRECTOR	1 00	X						0	0	0
ROZ MALLETT DIRECTOR	2 00	X						0	0	0
MIKE MCCURRY DIRECTOR	1 00	X						0	0	0
DANNY MEYER DIRECTOR	1 00	X						0	0	0
MARY SUE MILLIKEN DIRECTOR	1 00	X						0	0	0
DONNA MOREA DIRECTOR	2 00	X						0	0	0
JEANNE NEWMAN DIRECTOR	1 00	X						0	0	0
MARK RODRIGUEZ DIRECTOR	2 00	X						0	0	0
STEVE ROMANIELLO DIRECTOR	1 00	X						0	0	0
DEBBIE SHORE CO-FOUNDER	40 00			X				219,685	0	15,061

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
THOMAS NELSON PRESIDENT & CEO, SECRETARY	40 00			X				414,283	0	33,797
JESSICA SHERRY SENIOR VP, CHIEF FINANCIAL OFFICER	40 00			X				154,703	0	12,724
PETER KAYE CHIEF REVENUE & MARKETING	40 00				X			290,399	0	31,425
CHARLES SCOFIELD EXECUTIVE VICE PRESIDENT	40 00				X			261,059	0	20,889
DIANA HOVEY SENIOR VP, DINE OUT, NO KID HUNGRY	40 00				X			209,220	0	21,317
LISA DAVIS SENIOR VP, NO KID HUNGRY PROGRAM	40 00				X			211,906	0	21,236
CLAY DUNN SENIOR VP, CHIEF COMM OFFICER	40 00				X			200,975	0	19,333
DUKE STOREN SENIOR VP RELAT & PROG - UNTIL 01/2018	40 00				X			199,623	0	23,904
JILL DAVIS SENIOR VP, CORPORATE PARTN	40 00				X			196,697	0	13,677
SERENA WILLIAMS SENIOR VP, CHIEF PEOPLE OFFICER	40 00				X			193,711	0	25,060

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
AMY ZGANJAR SENIOR VP, DEVELOPMENT	40 00				X			185,345	0	6,412
ELLIOTT GARKINS MANAGING DIRECTOR OF DEVELOPMENT	40 00					X		157,155	0	14,098
JENNIFER DIRKSEN CHEF RELATIONS DIRECTOR	40 00					X		151,971	0	4,148
DIANE CLIFFORD DIRECTOR, INTEGRATED FUNDRAISING	40 00					X		150,184	0	20,634
ANDREA HOEFLING DIRECTOR OF DEVELOPMENT	40 00					X		147,568	0	19,818
TAMRA MCCRAW DIRECTOR, CORPORATE PARTNERSHIPS	40 00					X		147,039	0	15,586

SCHEDULE A
(Form 990 or
990EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

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

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SHARE OUR STRENGTH

Employer identification number

52-1367538

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	13,854,522	51,227,491	53,054,370	60,290,994	68,847,785	247,275,162
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	13,854,522	51,227,491	53,054,370	60,290,994	68,847,785	247,275,162
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)						24,774,424
6 Public support. Subtract line 5 from line 4						222,500,738

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	13,854,522	51,227,491	53,054,370	60,290,994	68,847,785	247,275,162
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	23,026	190,092	275,225	321,619	439,686	1,249,648
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.)	477,505	559,456	797	6,000	29,781	1,073,539
11 Total support. Add lines 7 through 10						249,598,349

12 Gross receipts from related activities, etc (see instructions) **12** 10,935,302

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	89.140 %
15 Public support percentage for 2016 Schedule A, Part II, line 14	15	89.310 %

16a 33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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						
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)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
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						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	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 .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	10b		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
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			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

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

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	OTHER - 2013 AMOUNT \$ 102,774 2014 AMOUNT \$ 252,916 2015 AMOUNT \$ -5,703 2016 AMOUNT \$ 0 2017 AMOUNT \$ 3,781 BOOK/PRODUCT SALES - 2013 AMOUNT \$ 730 2014 AMOUNT \$ 2,406 2015 AMOUNT \$ 0 2016 AMOUNT \$ 0 2017 AMOUNT \$ 0 HONORARIUM - 2013 AMOUNT \$ 500 2014 AMOUNT \$ 0 2015 AMOUNT \$ 0 2016 AMOUNT \$ 0 2017 AMOUNT \$ 0 OTHER EVENT REVENUE - 2013 AMOUNT \$ 370,501 2014 AMOUNT \$ 298,134 2015 AMOUNT \$ 0 2016 AMOUNT \$ 0 2017 AMOUNT \$ 0 INTERCOMPANY REVENUE - 2013 AMOUNT \$ 3,000 2014 AMOUNT \$ 6,000 2015 AMOUNT \$ 6,500 2016 AMOUNT \$ 6,000 2017 AMOUNT \$ 26,000

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

OMB No 1545-0047

2017
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If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

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

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

Name of the organization SHARE OUR STRENGTH	Employer identification number 52-1367538
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions) _____

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

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

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

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

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

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	106,852													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	557,289													
c	Total lobbying expenditures (add lines 1a and 1b)	664,141													
d	Other exempt purpose expenditures	55,666,961													
e	Total exempt purpose expenditures (add lines 1c and 1d)	56,331,102													
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000
c Total lobbying expenditures	606,574	677,800	556,274	664,141	2,504,789
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	87,847	177,625	112,058	106,852	484,382

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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

Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public Inspection

Name of the organization
SHARE OUR STRENGTH

Employer identification number
52-1367538

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

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

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		2,409,554	981,309	1,428,245
d Equipment				
e Other		1,763,640	1,331,231	432,409
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				1,860,654

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
DEFERRED RENT AND LEASEHOLD INCENTIVES	3,295,775
SECURITY DEPOSIT	22,012
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	3,317,787

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	110,488,745
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-73,536
b	Donated services and use of facilities	2b	37,539,940
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	6,636,923
e	Add lines 2a through 2d	2e	44,103,327
3	Subtract line 2e from line 1	3	66,385,418
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	28,364
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	28,364
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	66,413,782

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	101,747,462
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	37,539,940
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	6,636,923
e	Add lines 2a through 2d	2e	44,176,863
3	Subtract line 2e from line 1	3	57,570,599
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	28,364
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	28,364
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	57,598,963

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 52-1367538

Name: SHARE OUR STRENGTH

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	SHARE OUR STRENGTH EVALUATED ITS UNCERTAINTY IN INCOME TAXES FOR THE YEAR ENDED JUNE 30, 2018, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	SPECIAL EVENT EXPENSES 6,609,592 GAMING EVENT EXPENSES 27,331

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	SPECIAL EVENT EXPENSES 6,609,592 GAMING EVENT EXPENSES 27,331

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2017

**Open to Public
Inspection**

- ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
- ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
SHARE OUR STRENGTH

Employer identification number

52-1367538

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		100,000
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			100,000
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	0	0			100,000

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		EAST ASIA AND THE PACIFIC	INTERNATIONAL AID (SCHOOL MEALS PROGRAMMING)	100,000	WIRE TRANSFER			
(2)								
(3)								
(4)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 1

3 Enter total number of other organizations or entities ▶ 0

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

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

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
PART I, LINE 2	ORGANIZATIONS OUTSIDE THE UNITED STATES MUST MEET CERTAIN CRITERIA IN ORDER TO BE FUNDED BY SHARE OUR STRENGTH FURTHER, SHARE OUR STRENGTH PERFORMS A SEARCH ON THE ORGANIZATION THROUGH THE OFFICE OF FOREIGN ASSETS CONTROL (OFAC) TO CONFIRM THE ORGANIZATION IS NOT LISTED ON OFAC'S SANCTIONS LIST SIMILAR TO ENTITIES INSIDE THE UNITED STATES, ORGANIZATIONS OUTSIDE THE UNITED STATES ALSO PROVIDE CERTAIN ORGANIZATIONAL, PROGRAMMATIC AND FINANCIAL INFORMATION SO THAT SHARE OUR STRENGTH CAN CONFIRM THAT THE CHARITABLE USE OF GRANT FUNDS ALIGNS WITH ITS MISSION SHARE OUR STRENGTH USES A COMBINATION OF STRATEGIES TO ENSURE THAT OUR GRANTEE ORGANIZATIONS OUTSIDE THE UNITED STATES ARE IN COMPLIANCE WITH OUR GRANT AWARD GUIDELINES THESE STRATEGIES INCLUDE SEMI-ANNUAL AND/OR ANNUAL REPORTING OF PROGRESS AGAINST GOALS, REVERSE SITE VISITS WHERE GRANTEES VISIT OUR OFFICES TO SHARE INFORMATION ABOUT THEIR PROJECTS, PROGRESS AND IMPACT, AND TELEPHONE CALLS TO DISCUSS FUNDED PROJECTS REPORTS ARE STORED ELECTRONICALLY USING AN ONLINE GRANTS MANAGEMENT SYSTEM

Return Reference	Explanation
PART I, LINE 3	IN ACCORDANCE WITH IRS INSTRUCTIONS, ALL AMOUNTS REPORTED IN PART I AND II OF SCHEDULE F ARE REPORTED USING THE ACCRUAL BASIS OF ACCOUNTING WHICH IS THE SAME METHOD OF ACCOUNTING USED IN THE FINANCIAL STATEMENTS

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
SHARE OUR STRENGTH

Employer identification number
52-1367538

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

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|--|
| a <input checked="" type="checkbox"/> Mail solicitations | e <input checked="" type="checkbox"/> Solicitation of non-government grants |
| b <input checked="" type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input checked="" type="checkbox"/> Phone solicitations | g <input checked="" type="checkbox"/> Special fundraising events |
| d <input checked="" type="checkbox"/> In-person solicitations | |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 AGENCY 21 CONSULTING 1428 BRICKELL AVENUE SUITE 303 MIAMI, FL 33131	FUNDRAISING		No	1,736,750	325,012	1,411,738
2 TYPE A DEVELOPMENT LLC (ALLISON PALLESTRINI) 4540 HUNTING HOUND LANE MARIETTA, GA 30062	SPECIAL EVENT FUNDRAISING & MANAGEMENT/PRODUCTION		No	806,517	113,583	692,934
3 SEA CHANGE STRATEGIES 7409 BIRCH AVENUE TAKOMA PARK, MD 20912	ONLINE FUNDRAISING CONSULTING		No	418,767	119,500	299,267
4 STOTT DEVELOPMENT SOLUTIONS GROUP 4516 WOODDALE AVENUE EDINA, MN 55424	FUNDRAISING TEAM DESIGN, STRATEGY & PLANNING, FUNDRAISING		No	386,600	210,000	176,600
5 CONCORD DIRECT 92 OLD TURNPIKE ROAD CONCORD, NH 03301	DIRECT MAIL FUNDRAISING CONSULTING		No	335,770	72,000	263,770
6 SKY ADVISORY GROUP (LINDSAY RACHELEFSKY) 11693 SAN VICENTE BOULEVARD SUITE LOS ANGELES, CA 90049	STRATEGY & FUNDRAISING		No	319,350	65,000	254,350
7 BROCK DEVELOPMENT LLC (MELANIE BROCK) 502 CANYON GATE DRIVE MISSOULA, MT 59803	STRATEGY & FUNDRAISING		No	282,500	55,000	227,500
8 BOWIE CONSULTING LLC (MICHAEL DOER) 6513 KENSINGTON AVENUE RICHMOND, VA 23226	STRATEGY & FUNDRAISING		No	125,000	52,500	72,500
9 APPCO GROUP USA 315 W 36TH STREET 10TH FLOOR NEW YORK, NY 10018	FACE-TO-FACE FUNDRAISING		No	13,380	152,315	-138,935
10 DONOR VOICE LLC 11710 PLAZA AMERICA DRIVE SUITE 20 RESTON, VA 20190	DONOR STEWARDSHIP ACTIVITIES		No	0	77,700	-77,700
Total				4,424,634	1,242,610	3,182,024

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

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

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

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d)
		NYCFFF (event type)	(event type)	(total number)	Total events (add col (a) through col (c))
1	Gross receipts	8,262,294			8,262,294
2	Less Contributions	4,812,411			4,812,411
3	Gross income (line 1 minus line 2)	3,449,883			3,449,883
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	1,225,715			1,225,715
	7 Food and beverages	816,010			816,010
	8 Entertainment	52,755			52,755
	9 Other direct expenses	4,515,112			4,515,112
10	Direct expense summary Add lines 4 through 9 in column (d) ▶				6,609,592
11	Net income summary Subtract line 10 from line 3, column (d) ▶				-3,159,709

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

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		1	Gross revenue		
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs			27,331	27,331
5	Other direct expenses				
6	Volunteer labor	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input checked="" type="checkbox"/> No	
7	Direct expense summary Add lines 2 through 5 in column (d) ▶				27,331
8	Net gaming income summary Subtract line 7 from line 1, column (d) ▶				81,991

9 Enter the state(s) in which the organization conducts gaming activities See Additional Data Table

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in

a	The organization's facility		%
b	An outside facility		%

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

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 52-1367538

Name: SHARE OUR STRENGTH

Form 990 Schedule G Part III Line 9

Enter the state(s) in which the organization operates gaming activities

CA, CT, DC, FL, GA, IL, MA, MN, MO, NC, NH, NY, PA, TX

**Schedule I
(Form 990)**

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

OMB No 1545-0047

2017

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
SHARE OUR STRENGTH

Employer identification number
52-1367538

Part I General Information on Grants and Assistance

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ _____ 289

3 Enter total number of other organizations listed in the line 1 table ▶ _____ 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	ORGANIZATIONS INSIDE THE UNITED STATES MUST MEET CERTAIN CRITERIA IN ORDER TO BE FUNDED BY SHARE OUR STRENGTH FOR EXAMPLE, ALL ORGANIZATIONS MUST PROVIDE THEIR EMPLOYER IDENTIFICATION NUMBER (EIN) SO THAT TAX EXEMPTION CAN BE CONFIRMED EITHER VIA GUIDESTAR OR IRS TAX EXEMPT ORGANIZATION SEARCH (TEOS) ADDITIONALLY, ORGANIZATIONS PROVIDE CERTAIN ORGANIZATIONAL, PROGRAMMATIC AND FINANCIAL INFORMATION SO THAT SHARE OUR STRENGTH CAN CONFIRM THAT THE CHARITABLE USE OF GRANT FUNDS ALIGNS WITH ITS MISSION SHARE OUR STRENGTH USES A COMBINATION OF STRATEGIES TO ENSURE THAT OUR GRANTEE ORGANIZATIONS ARE IN COMPLIANCE WITH OUR GRANT AWARD GUIDELINES THESE STRATEGIES INCLUDE QUARTERLY, SEMI-ANNUAL AND/OR ANNUAL REPORTING OF PROGRESS AGAINST GOALS, SITE VISITS TO GRANTEE ORGANIZATIONS TO MONITOR ACTIVITIES BEING FUNDED, REVERSE SITE VISITS WHERE GRANTEES VISIT OUR OFFICES TO SHARE INFORMATION ABOUT THEIR PROJECTS, PROGRESS AND IMPACT, AND TELEPHONE CALLS TO DISCUSS FUNDED PROJECTS REPORTS ARE STORED ELECTRONICALLY USING AN ONLINE GRANTS MANAGEMENT SYSTEM

Additional Data

Software ID:
Software Version:
EIN: 52-1367538
Name: SHARE OUR STRENGTH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARKANSAS HUNGER RELIEF ALLIANCE 1400 WEST MARKHAM STREET SUITE 304 LITTLE ROCK, AR 72201	30-0254995	501(C)(3)	510,000				NO KID HUNGRY STATE PARTNER GRANT
FOOD BANK FOR NEW YORK CITY 39 BROADWAY 10TH FLOOR NEW YORK, NY 10006	13-3179546	501(C)(3)	432,541				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF KING COUNTY 720 2ND AVENUE SEATTLE, DC 98104	91-0565555	501(C)(3)	431,480				NO KID HUNGRY SOCIAL INNOVATION FUND SUBGRANTEE, CHILDHOOD HUNGER PROGRAMS
BAYLOR UNIVERSITY ONE BEAR PLACE SUITE 97060 WACO, TX 767987060	74-1159753	501(C)(3)	384,683				NO KID HUNGRY SOCIAL INNOVATION FUND SUBGRANTEE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTANA DEPT OF PUBLIC HEALTH AND HUMAN SERVICES 2401 COLONIAL DRIVE 3RD FLOOR HELENA, MT 596044210	81-0302402	N/A	305,000				NO KID HUNGRY STATE PARTNER GRANT
JOHN HOPKINS CENTER FOR AMERICAN INDIAN HEALTH 415 N WASHINGTON STREET 4TH FLOOR BALTIMORE, MD 21231	52-0595110	N/A	300,000				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ATLANTA COMMUNITY FOOD BANK 732 JOSEPH E LOWERY BOULEVARD ATLANTA, GA 30318	58-1376648	501(C)(3)	285,225				CHILDHOOD HUNGER PROGRAMS
FLORIDA IMPACT 1331 EAST LAFAYETTE STREET SUITE A TALLAHASSEE, FL 32301	59-2859151	501(C)(3)	236,462				NO KID HUNGRY SOCIAL INNOVATION FUND SUBGRANTEE, CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUNGER TASK FORCE INC 201 S HAWLEY COURT MILWAUKEE, WI 532141966	39-1345847	501(C)(3)	203,575				NO KID HUNGRY SOCIAL INNOVATION FUND SUBGRANTEE
UNITED WAY FOR SOUTHEAST MICHIGAN 660 WOODWARD AVENUE SUITE 300 DETROIT, MI 482261899	20-3099071	501(C)(3)	203,054				NO KID HUNGRY SOCIAL INNOVATION FUND SUBGRANTEE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER CHICAGO FOOD DEPOSITORY 4100 WEST ANN LURIE PLACE CHICAGO, IL 60632	36-2971864	501(C)(3)	198,000				NO KID HUNGRY STATE PARTNER GRANT, CHILDHOOD HUNGER PROGRAMS
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL 104 AIRPORT DRIVE SUITE 2200 CHAPEL HILL, NC 275991350	56-6001393	501(C)(3)	170,118				NO KID HUNGRY STATE PARTNER GRANT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OAKLAND UNIFIED SCHOOL DISTRICT 1000 BROADWAY SUITE 680 OAKLAND, CA 94607	94-6000385	N/A	169,481				SCHOOL BREAKFAST PROGRAM SUPPORT
THREE SQUARE FOOD BANK 4190 N PECOS ROAD LAS VEGAS, NV 891150187	30-0396918	501(C)(3)	156,260				NO KID HUNGRY SOCIAL INNOVATION FUND SUBGRANTEE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SECOND HARVEST HEARTLAND FOOD BANK 1140 GERVAIS AVENUE ST PAUL, MN 551092020	23-7417654	501(C)(3)	136,589				NO KID HUNGRY STATE PARTNER GRANT, CHILDHOOD HUNGER PROGRAMS
MARY'S MEALS USA 75 ORCHARD STREET BLOOMFIELD, NJ 07003	33-1215331	501(C)(3)	135,000				INTERNATIONAL AID

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOODCORPS 1140 SOUTHEAST 7TH AVENUE SUITE 110 110 PORTLAND, OR 97214	27-3990987	501(C)(3)	121,918				NO KID HUNGRY STATE PARTNER GRANT, CHILDHOOD HUNGER PROGRAMS
HUNGER SOLUTIONS NEW YORK 14 COMPUTER DRIVE EAST ALBANY, NY 12205	22-2954760	501(C)(3)	114,782				NO KID HUNGRY STATE PARTNER GRANT, CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOUSTON FOOD BANK 535 PORTWALL HOUSTON, TX 77029	74-2181456	501(C)(3)	100,000				DISASTER/EMERGENCY RELIEF
TEXAS ACCESS TO JUSTICE FOUNDATION PO BOX 12886 AUSTIN, TX 787112886	74-2354575	501(C)(3)	100,000				DISASTER/EMERGENCY RELIEF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA FOOD POLICY ADVOCATES 438 14TH STREET SUITE 1220 OAKLAND, CA 94612	94-3163142	501(C)(3)	95,386				CHILDHOOD HUNGER PROGRAMS
PASADENA INDEPENDENT SCHOOL DISTRICT 11825 TEANECK DRIVE HOUSTON, TX 77089	74-6001850	N/A	92,422				DISASTER/EMERGENCY RELIEF, SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RIALTO UNIFIED SCHOOL DISTRICT NUTRITION SERVICES 2140 WEST BUENA VISTA DRIVE RIALTO, CA 92377	33-0506526	N/A	80,190				SCHOOL BREAKFAST PROGRAM SUPPORT
NATIONAL NETWORK OF STATE TEACHERS OF THE YEAR PROJECT OF THE VENTURE FUND 1201 CONNECTICUT AVENUE SUITE 300 NW WASHINGTON, DC 20036	20-5806345	501(C)(3)	76,750				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILY LEAGUE OF BALTIMORE CITY 2305 N CHARLES STREET SUITE 200 BALTIMORE, MD 21218	52-1734848	501(C)(3)	76,500				AFTERSCHOOL MEALS PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT, NO KID HUNGRY STATE PARTNER GRANT
URBAN SCHOOL ALLIANCE 44-36 VERNON BOULEVARD ROOM 411 LONG ISLAND CITY, NY 11101	46-5754490	501(C)(3)	75,000				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAIRFAX COUNTY PUBLIC SCHOOL DISTRICT 8115 GATEHOUSE ROAD FALLS CHURCH, VA 22042	54-0805373	N/A	63,500				SCHOOL BREAKFAST PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT
18 REASONS 3150 18TH STREET BOX 315 SAN FRANCISCO, CA 94110	45-3059509	501(C)(3)	59,995				DISASTER/EMERGENCY RELIEF, COOKING MATTERS PROGRAMMING, CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALEXANDRIA CITY PUBLIC SCHOOL DISTRICT 3330 KING STREET ALEXANDRIA, VA 22302	54-6001106	N/A	59,570				SCHOOL BREAKFAST PROGRAM SUPPORT, AFTERSCHOOL MEALS PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT
FEEDING THE GULF COAST 1501 34TH STREET GULFPORT, MS 39501	63-0821997	501(C)(3)	58,366				NO KID HUNGRY STATE PARTNER GRANT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FEEDING FLORIDA 1489 MARKET STREET TALLAHASSEE, FL 32312	65-0467165	501(C)(3)	56,000				DISASTER/EMERGENCY RELIEF, CHILDHOOD HUNGER PROGRAMS
KENTUCKY ASSOCIATION OF FOOD BANKS PO BOX 1824 BEREA, KY 40403	61-1398656	501(C)(3)	55,648				NO KID HUNGRY STATE PARTNER GRANT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIDS MEALS INC 330 GARDEN OAKS BLVD HOUSTON, TX 77018	76-0330447	501(C)(3)	55,000				DISASTER/EMERGENCY RELIEF
TRIANGLE COMMUNITY OUTREACH 3505 PROCTER STREET PORT ARTHUR, TX 77642	76-0034306	501(C)(3)	55,000				DISASTER/EMERGENCY RELIEF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SECOND HARVEST FOOD BANK OF NORTHEAST TENNESSEE 127 DILLON COURT GRAY, TN 376153555	62-1303822	501(C)(3)	52,000				NO KID HUNGRY STATE PARTNER GRANT, CHILDHOOD HUNGER PROGRAMS
SAN FRANCISCO UNIFIED SCHOOL DISTRICT 460 ARGUELLO BOULEVARD SAN FRANCISCO, CA 94118	94-6000416	N/A	50,050				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION OF ARIZONA FOOD BANKS 2100 NORTH CENTRAL AVENUE SUITE 230 230 PHOENIX, AZ 85004	86-0507679	501(C)(3)	50,000				NO KID HUNGRY STATE PARTNER GRANT
BALTIMORE CITY PUBLIC SCHOOLS 200 E NORTH AVENUE BALTIMORE, MD 21202	52-2064235	N/A	50,000				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER PITTSBURGH COMMUNITY FOOD BANK 1 NORTH LINDEN STREET DUQUESNE, PA 15110	25-1420599	501(C)(3)	50,000				NO KID HUNGRY STATE PARTNER GRANT
HAWAII CHILD NUTRITION PROGRAMS 650 IWILEI SUITE 270 HONOLULU, HI 96817	99-0266482	N/A	50,000				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUNGER FREE AMERICA 16 BEAVER STREET 3RD FL SUITE 1520 NEW YORK, NY 100042314	13-3471350	501(C)(3)	50,000				CHILDHOOD HUNGER PROGRAMS, SUMMER MEAL PROGRAM SUPPORT
HUNGER FREE HEARTLAND 6001 DODGE STREET ROOM 126E OMAHA, NE 68182	47-0637701	501(C)(3)	50,000				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KANSAS STATE DEPARTMENT OF EDUCATION - LANDON STATE OFFICE BLDG 900 SW JACKSON SUITE 307 TOPEKA, KS 666121212	48-6029925	N/A	50,000				SCHOOL BREAKFAST PROGRAM SUPPORT
MICHIGAN DEPARTMENT OF EDUCATION PO BOX 30106 LANSING, MI 48909	38-6000134	N/A	50,000				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTH CAROLINA OFFICE OF THE GOVERNOR 20301 MAIL SERVICE CENTER RALEIGH, NC 276990301	56-1310675	N/A	50,000				SCHOOL BREAKFAST PROGRAM SUPPORT
SAN ANTONIO FOOD BANK 5200 ENRIQUE M BARRERA PARKWAY SAN ANTONIO, TX 78227	74-2122979	501(C)(3)	50,000				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH CAROLINA DEPARTMENT OF EDUCATION OFFICE OF FINANCE 1429 SENATE STREET COLUMBIA, SC 29201	57-6000286	N/A	50,000				SCHOOL BREAKFAST PROGRAM SUPPORT
PROJECT OPEN HAND 181 ARMOUR DRIVE NE ATLANTA, GA 30324	58-1816778	501(C)(3)	46,164				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD CENTRAL KITCHEN INC PO BOX 392289 PITTSBURGH, PA 15251	27-3521132	501(C)(3)	45,000				DISASTER/EMERGENCY RELIEF
BOSTON PUBLIC SCHOOLS 2300 WASHINGTON STREET ROXBURY, MA 02119	04-6001380	N/A	44,621				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S HUNGER ALLIANCE 370 SOUTH FIFTH STREET COLUMBUS, OH 432155408	23-7303509	501(C)(3)	43,662				NO KID HUNGRY STATE PARTNER GRANT, CHILDHOOD HUNGER PROGRAMS
FOOD RESEARCH & ACTION CENTER 1200 18TH STREET NW SUITE 400 WASHINGTON, DC 20036	23-7200739	501(C)(3)	43,500				SUMMER MEALS PROGRAM SUPPORT, CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARTNERS FOR A HUNGER FREE OREGON 712 SE HAWTHORNE BLVD SUITE 202 PORTLAND, OR 97214	20-4970868	501(C)(3)	43,000				NO KID HUNGRY STATE PARTNER GRANT, CHILDHOOD HUNGER PROGRAMS
LOWCOUNTRY FOOD BANK 2864 AZALEA DRIVE NORTH CHARLESTON, SC 29405	57-0751835	501(C)(3)	40,000				NO KID HUNGRY STATE PARTNER GRANT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHELDON ISD 11411 CE KING PARKWAY HOUSTON, TX 77044	74-6002290	N/A	39,756				DISASTER/EMERGENCY RELIEF
LYNCHBURG CITY SCHOOL DISTRICT PO BOX 2497 LYNCHBURG, VA 24505	54-1385200	N/A	38,000				AFTERSCHOOL MEALS PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TWIN RIVERS UNIFIED SCHOOL DISTRICT 5816 PIONEER WAY SACRAMENTO, CA 95841	30-0475870	N/A	37,500				SCHOOL BREAKFAST PROGRAM SUPPORT
EAST BATON ROUGE PARISH SD 3000 N SHERWOOD FOREST DRIVE BATON ROUGE, LA 70814	72-6000353	N/A	36,438				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TENNESSEE JUSTICE CENTER 211 SEVEN AVENUE NORTH SUITE 100 NASHVILLE, TN 37219	62-1630417	501(C)(3)	36,000				NO KID HUNGRY STATE PARTNER GRANT
PORT ARTHUR ISD 4801 9TH AVENUE PORT ARTHUR, TX 77642	74-6001903	N/A	35,000				DISASTER/EMERGENCY RELIEF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE FAMILY AND COMMUNITY TRUST 114B E HIGH STREET SUITE 202 JEFFERSON CITY, MO 65101	49-9686506	501(C)(3)	33,347				CHILDHOOD HUNGER PROGRAMS
CAPTAIN PLANET FOUNDATION 133 LUCKIE STREET NW 2ND FLOOR ATLANTA, GA 30303	58-1959421	501(C)(3)	32,329				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LAFAYETTE PARISH SCHOOL SYSTEM 113 CHAPLIN DRIVE LAFAYETTE, LA 70508	72-6000625	N/A	32,000				SCHOOL BREAKFAST PROGRAM SUPPORT
CORONA NORCO UNIFIED SCHOOL DISTRICT 1700 TEMESCAL AVENUE NORCO, CA 92860	30-0366587	N/A	30,552				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BEAUMONT INDEPENDENT SCHOOL DISTRICT 4315 CONCORD ROAD BEAUMONT, TX 77703	74-6000317	N/A	30,550				DISASTER/EMERGENCY RELIEF
HALIFAX CO PUBLIC SCHOOLS PO BOX 1849 HALIFAX, VA 24558	54-6001335	N/A	30,050				SCHOOL BREAKFAST PROGRAM SUPPORT, AFTERSCHOOL MEALS PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLESSINGS IN A BACKPACK PO BOX 950291 LOUISVILLE, KY 40295	26-1964620	501(C)(3)	30,000				CHILDHOOD HUNGER PROGRAMS
COMMUNITY ACTION PARTNERSHIP OF ORANGE COUNTY 11870 MONARCH STREET GARDEN GROVE, CA 928413902	95-2452787	501(C)(3)	30,000				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLEANERS COMMUNITY FOOD BANK OF SOUTHEASTERN MICHIGAN 2131 BEAUFAIT STREET DETROIT, MI 48207	38-2156255	501(C)(3)	30,000				COOKING MATTERS PROGRAMMING
LOUISA COUNTY PUBLIC SCHOOLS 953 DAVIS HIGHWAY MINERAL, VA 23117	54-6001399	N/A	30,000				SUMMER MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROJECT BREADWALK FOR HUNGER 145 BORDER STREET EAST BOSTON, MA 021281903	04-2931195	501(C)(3)	30,000				CHILDHOOD HUNGER PROGRAMS
SAVE THE CHILDREN FEDERATION INC 501 KINGS HIGHWAY EAST SUITE 400 FAIRFIELD, CT 06825	06-0726487	501(C)(3)	30,000				INTERNATIONAL AID

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SECOND HARVEST FOOD BANK OF ORANGE COUNTY 8014 MARINE WAY IRVINE, CA 92618	32-0362611	501(C)(3)	30,000				CHILDHOOD HUNGER PROGRAMS
SOUTHEAST TEXAS FOOD BANK PO BOX 21012 BEAUMONT, TX 77720	76-0338721	501(C)(3)	30,000				DISASTER/EMERGENCY RELIEF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COUNCIL OF CHIEF STATE SCHOOL OFFICERS ONE MASSACHUSETTS AVENUE NW SUITE 700 WASHINGTON, DC 20001	53-0198090	501(C)(3)	29,566				SCHOOL BREAKFAST PROGRAM SUPPORT
RUSSELLVILLE SCHOOL DISTRICT 2000 W PARKWAY DRIVE RUSSELLVILLE, AR 72802	71-6020690	N/A	29,530				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOUNT ROGERS HEALTH DISTRICT 201 FRANCIS MARION LANE MARION, VA 24354	54-6001775	N/A	28,500				COOKING MATTERS PROGRAMMING
BALTIMORE CO PUBLIC SCHOOL DISTRICT 6901 N CHARLES STREET TOWSON, MD 21204	52-1819200	N/A	25,820				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEGAL SERVICES ADVOCACY PROJECT 2324 UNIVERSITY AVENUE WEST SUITE 101 SAINT PAUL, MN 55114	41-1412710	501(C)(3)	25,560				CHILDHOOD HUNGER PROGRAMS
ARLINGTON FOOD ASSISTANCE CENTER PO BOX 6261 ARLINGTON, VA 22206	54-1473207	501(C)(3)	25,103				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC COMMUNITY SERVICES OF NORTHERN UTAH 2504 F AVENUE OGDEN, UT 84401	87-0212450	501(C)(3)	25,000				CHILDHOOD HUNGER PROGRAMS
FOODLINK 936 EXCHANGE STREET ROCHESTER, NY 14608	22-2428304	501(C)(3)	25,000				COOKING MATTERS PROGRAMMING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GOOD SHEPHERD FOOD BANK PO BOX 1807 AUBURN, ME 04211	22-2988609	501(C)(3)	25,000				COOKING MATTERS PROGRAMMING
PROVIDENCE MILWAUKIE FOUNDATION 10150 SE 32ND AVENUE MILWAUKIE, OR 97222	94-3079515	501(C)(3)	25,000				COOKING MATTERS PROGRAMMING

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VISITING NURSE ASSOCIATION 12565 WEST CENTER ROAD SUITE 100 OMAHA, NE 68144	47-0690286	501(C)(3)	25,000				COOKING MATTERS PROGRAMMING
THE NORTH EAST INDEPENDENT SCHOOL DISTRICT 1400 JACKSON KELLER SAN ANTONIO, TX 78213	74-6015301	N/A	23,712				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LOUDOUN COUNTY PUBLIC SCHOOL DIST 25450 RIDING CENTER DRIVE SOUTH RIDING, VA 20152	54-6001395	N/A	23,100				SCHOOL BREAKFAST PROGRAM SUPPORT
NATIONAL ASSOCIATION OF ELEMENTARY SCHOOL PRINCIPALS 1615 DUKE STREET ALEXANDRIA, VA 22314	52-0885532	N/A	23,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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REDLANDS UNIFIED SCHOOL DISTRICT 501 E PENNSYLVANIA AVENUE REDLANDS, CA 92374	95-2254572	N/A	22,800				SCHOOL BREAKFAST PROGRAM SUPPORT
RICHLAND COUNTY SCHOOL DISTRICT ONE 2600 WHEAT STREET COLUMBIA, SC 29205	57-6000243	N/A	22,345				SCHOOL BREAKFAST PROGRAM SUPPORT

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MISSOULA FOOD BANK 219 S THIRD STREET WEST MISSOULA, MT 59801	81-0414143	501(C)(3)	22,035				SUMMER MEALS PROGRAM SUPPORT, AFTERSCHOOL MEALS PROGRAM SUPPORT
412 FOOD RESCUE 6022 BROAD STREET PITTSBURGH, PA 15206	47-3476140	501(C)(3)	22,000				COOKING MATTERS PROGRAMMING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PAGE COUNTY PUBLIC SCHOOLS 735 W MAIN STREET LURAY, VA 22835	54-6001493	N/A	21,621				SCHOOL BREAKFAST PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT
OUR HOUSE INC 173 BOULEVARD NE ATLANTA, GA 30312	58-1743333	501(C)(3)	21,553				CHILDHOOD HUNGER PROGRAMS

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UNIVERSITY OF MINNESOTA EXTENSION 1420 ECKLES AVENUE SAINT PAUL, MN 55108	41-6042488	501(C)(3)	21,300				CHILDHOOD HUNGER PROGRAMS
AURORA PROJECT INC 1035 NORTH SUPERIOR STREET TOLEDO, OH 436041960	34-1517827	501(C)(3)	21,058				CHILDHOOD HUNGER PROGRAMS

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LA PROMISE FUND 4920 S WESTERN AVENUE LOS ANGELES, CA 90062	20-4562686	N/A	20,686				SCHOOL BREAKFAST PROGRAM SUPPORT
LITTLE ROCK SCHOOL DISTRICT 13420 DAVID O DODD ROAD LITTLE ROCK, AR 72210	71-6014717	N/A	20,255				SCHOOL BREAKFAST PROGRAM SUPPORT

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TOLEDO DAY NURSERY 2211 JEFFERSON AVENUE TOLEDO, OH 43604	34-4465880	501(C)(3)	20,142				CHILDHOOD HUNGER PROGRAMS
BOX ELDER SCHOOL DISTRICT 120 WEST 500 SOUTH TREMONTON, UT 84337	87-6000480	N/A	20,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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BUENA VISTA CITY PUBLIC SCHOOL DISTRICT 2329 CHESTNUT AVENUE A BUENA VISTA, VA 24416	54-6001180	N/A	20,000				SCHOOL BREAKFAST PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT
EL MONTE CITY SCHOOLS 3540 LEXINGTON AVENUE EL MONTE, CA 91731	95-6001074	N/A	20,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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LOS ANGELES REGIONAL FOODBANK 1734 EAST 41ST STREET LOS ANGELES, CA 900581502	95-3135649	501(C)(3)	20,000				CHILDHOOD HUNGER PROGRAMS
SANTA BARBARA UNIFIED SCHOOL DISTRICT 721 E COTA STREET SANTA BARBARA, CA 93103	30-0690985	N/A	20,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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DECATUR SCHOOL DISTRICT 61 101 W CERRO GORDO STREET DECATUR, IL 62523	37-6003703	N/A	19,861				SCHOOL BREAKFAST PROGRAM SUPPORT
KALISPELL PUBLIC SCHOOLS 233 1ST AVENUE E KALISPELL, MT 59901	81-6000366	N/A	19,750				SUMMER MEALS PROGRAM SUPPORT

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SALEM CITY SCHOOLS 616 SOUTH COLLEGE AVENUE SALEM, VA 24153	54-1147223	N/A	19,360				SCHOOL BREAKFAST PROGRAM SUPPORT
STAUNTON CITY SCHOOLS 1200 N COALTER STREET STAUNTON, VA 24401	54-0720688	N/A	18,586				SCHOOL BREAKFAST PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT

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CINCINNATI PUBLIC SCHOOLS 1350 W NORTH BEND ROAD CINCINNATI, OH 45224	31-6000758	N/A	18,300				SCHOOL BREAKFAST PROGRAM SUPPORT
HEARTLAND HEALTH CENTERS 3048 N WILTON AVENUE 2ND FLOOR CHICAGO, IL 60657	36-3843377	501(C)(3)	18,000				COOKING MATTERS PROGRAMMING

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MARION SCHOOL DISTRICT 235 MILITARY ROAD MARION, AR 72364	71-6020624	N/A	18,000				SCHOOL BREAKFAST PROGRAM SUPPORT
NASHVILLE SCHOOL DISTRICT 1301 MT PLEASANT DRIVE NASHVILLE, AR 71852	71-6021298	N/A	17,899				SCHOOL BREAKFAST PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT

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LARRY JOE HARLESS COMMUNITY CENTER 202 LARRY JOE HARLESS DRIVE GILBERT, WV 25621	55-0749741	501(C)(3)	17,615				SUMMER MEALS PROGRAM SUPPORT
BROWNSBURG COMMUNITY SCHOOL CORPORATION 340 STADIUM DRIVE BROWNSBURG, IN 46112	00-1894978	N/A	17,525				SCHOOL BREAKFAST PROGRAM SUPPORT

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GREATER CLARK COUNTY SCHOOLS FIRST PIRATE PLACE CHARLESTOWN, IN 47111	35-1151414	N/A	16,550				SCHOOL BREAKFAST PROGRAM SUPPORT
GEORGIA BUDGET & POLICY INSTITUTE 100 EDGEWOOD AVENUE SUITE 950 ATLANTA, GA 303033066	55-0860376	501(C)(3)	16,164				CHILDHOOD HUNGER PROGRAMS

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GEORGIA CITIZENS COALITION ON HUNGER 9 GAMMON AVENUE SW ATLANTA, GA 303152711	23-7422289	501(C)(3)	16,164				CHILDHOOD HUNGER PROGRAMS
HOWARD COUNTY PUBLIC SCHOOL DISTRICT FOOD AND NUTRITION SERVICE OFFICE 10910 ROUTE 108 ELLCOTT CITY, MD 21042	52-6000968	N/A	16,050				SCHOOL BREAKFAST PROGRAM SUPPORT

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BOYS & GIRLS CLUB OF RICHLAND COUNTY PO BOX 416 SIDNEY, MT 59270	11-3694698	501(C)(3)	15,850				SUMMER MEALS PROGRAM SUPPORT
ALL FAITHS FOOD BANK INC 8171 BLAIKIE COURT SARASOTA, FL 34240	65-0115814	501(C)(3)	15,000				COOKING MATTERS PROGRAMMING

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BREAD FOR THE CITY 1525 7TH STREET NW WASHINGTON, DC 20001	52-1138207	501(C)(3)	15,000				CHILDHOOD HUNGER PROGRAMS
CITY HARVEST 575 EIGHTH AVENUE 4TH FLOOR NEW YORK, NY 10018	13-3170676	501(C)(3)	15,000				CHILDHOOD HUNGER PROGRAMS

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DEDHAM PUBLIC SCHOOLS 143 NEEDHAM STREET DEDHAM, MA 02026	04-6001128	N/A	15,000				SCHOOL BREAKFAST PROGRAM SUPPORT
FLORENCE TOWNSHIP SCHOOL DISTRICT 1330 HORNBERGER AVENUE ROEBLING, NJ 08554	21-6000187	N/A	15,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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HEALTH EDUCATION COUNCIL 3950 INDUSTRIAL BOULEVARD SUITE 600 600 WEST SACRAMENTO, CA 95691	68-0249296	501(C)(3)	15,000				SCHOOL BREAKFAST PROGRAM SUPPORT
HEALTH PROMOTION COUNCIL OF SOUTHEASTERN PENNSYLVANIA INC 1500 MARKET STR CENTER SQ EAST 14TH FLOOR PHILADELPHIA, PA 19102	23-2182113	501(C)(3)	15,000				COOKING MATTERS PROGRAMMING

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HUNGER FREE OKLAHOMA A FUND OF THE TULSA COMMUNITY FOUNDATION 907 S DETROIT AVENUE SUITE 600 TULSA, OK 74120	73-1554474	501(C)(3)	15,000				SUMMER MEALS PROGRAM SUPPORT
JACKSON COUNTY SCHOOLS 1660 WINDER HIGHWAY JEFFERSON, GA 30549	58-6000266	N/A	15,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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MORENO VALLEY USD NUTRITION SERVICES 21790 EUCALYPTUS AVENUE MORENO VALLEY, CA 92553	52-1770792	N/A	15,000				SCHOOL BREAKFAST PROGRAM SUPPORT
NATIONAL CONFERENCE OF STATE LEGISLATURES 444 N CAPITOL STREET NW SUITE 515 WASHINGTON, DC 20001	74-2232576	501(C)(3)	15,000				CHILDHOOD HUNGER PROGRAMS

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OREGON FOOD BANK 7900 NE 33RD DRIVE PORTLAND, OR 97211	93-0785786	501(C)(3)	15,000				COOKING MATTERS PROGRAMMING
SOUTH BAY UNION SCHOOL DISTRICT 2001 RIMBEY STREET SAN DIEGO, CA 92154	95-6002975	N/A	15,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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THORNTON TOWNSHIP HIGH SCHOOL DISTRICT 205 465 E 170TH STREET SOUTH HOLLAND, IL 60473	36-6004396	N/A	15,000				SCHOOL BREAKFAST PROGRAM SUPPORT
TUCSON UNIFIED SCHOOL DISTRICT 10520 E CAMINO QUINCE TUCSON, AZ 85748	86-6000551	N/A	15,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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UTAH FOOD BANK 3150 SOUTH 900 WEST SALT LAKE CITY, UT 84119	87-0212453	501(C)(3)	15,000				CHILDHOOD HUNGER PROGRAMS
WYTHE COUNTY SCHOOL BOARD FIRST MAROON WAY WYTHEVILLE, VA 24382	54-6001693	N/A	15,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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AVONDALE ELEMENTARY SCHOOL DISTRICT 44 540 E LA PASADA GOODYEAR, AZ 85338	86-6000500	N/A	14,608				SCHOOL BREAKFAST PROGRAM SUPPORT
SKOKIEMORTON GROVE SCHOOL DISTRICT 69 5100 MADISON STREET SKOKIE, IL 60077	36-6004287	N/A	14,500				SCHOOL BREAKFAST PROGRAM SUPPORT

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WASHOE COUNTY SCHOOL DISTRICT 2450 CANNAN STREET RENO, NV 89512	88-6000919	N/A	14,500				SCHOOL BREAKFAST PROGRAM SUPPORT
SECOND HARVEST FOOD BANK OF METROLINA 500 B SPRATT STREET CHARLOTTE, NC 282062913	56-1352593	501(C)(3)	14,301				CHILDHOOD HUNGER PROGRAMS

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JEFFERSON COUNTY PUBLIC SCHOOLS 3332 NEWBURG ROAD LOUISVILLE, KY 40218	61-6001316	N/A	14,300				SCHOOL BREAKFAST PROGRAM SUPPORT
THOMASVILLE CITY SCHOOLS 750 GATES DRIVE THOMASVILLE, AL 36784	63-0454371	N/A	14,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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HARVESTERS - THE COMMUNITY FOOD NETWORK 3801 TOPPING AVENUE KANSAS CITY, MO 64129	43-1208665	501(C)(3)	13,984				AFTERSCHOOL MEALS PROGRAM SUPPORT
UPLAND UNIFIED SCHOOL DISTRICT 444 E 11TH STREET UPLAND, CA 91786	33-0209386	N/A	13,800				SCHOOL BREAKFAST PROGRAM SUPPORT

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COMMUNITY ACTION PARTNERSHIP OF STRAFFORD COUNTY PO BOX 160 DOVER, NH 038210160	02-0268636	501(C)(3)	13,756				CHILDHOOD HUNGER PROGRAMS
SOUTHERN NEW HAMPSHIRE SERVICES 40 PINE STREET MANCHESTER, NH 03103	02-0268285	501(C)(3)	13,756				CHILDHOOD HUNGER PROGRAMS

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TOLEDO BOTANICAL GARDEN 5403 ELMER DRIVE TOLEDO, OH 436152803	34-1350559	501(C)(3)	13,733				CHILDHOOD HUNGER PROGRAMS
PARKROSE SCHOOL DISTRICT 11400 NE SACRAMENTO STREET PORTLAND, OR 97220	93-6000833	N/A	13,200				SCHOOL BREAKFAST PROGRAM SUPPORT

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ALABAMA FOOD BANK ASSOCIATION PO BOX 18607 HUNTSVILLE, AL 35804	27-1591801	501(C)(3)	13,000				SUMMER MEALS PROGRAM SUPPORT
MSD PIKE TOWNSHIP 6450 RODEBAUGH ROAD INDIANAPOLIS, IN 46268	35-6006872	N/A	13,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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PLAINFIELD COMMUNITY SCHOOL CORP ONE RED PRIDE DRIVE PLAINFIELD, IN 46168	35-1073669	N/A	12,690				SCHOOL BREAKFAST PROGRAM SUPPORT
LEBANON SPECIAL SCHOOL DISTRICT 1213 LEEVILLE PIKE LEBANON, TN 37090	62-6000335	N/A	12,600				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAPITAL AREA FOOD BANK 6833 HILL PARK DRIVE LORTON, VA 22079	52-1167581	501(C)(3)	12,500				CHILDHOOD HUNGER PROGRAMS
FEEDING AMERICA SOUTHWEST VIRGINIA 21452 GRAVEL LAKE ROAD ABINGDON, VA 24212	54-1939556	501(C)(3)	12,500				AFTERSCHOOL MEALS PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DETROIT PUBLIC SCHOOLS COMMUNITY DISTRICT 1500 SCOTTEN STREET DETROIT, MI 48209	38-6019629	N/A	12,000				SCHOOL BREAKFAST PROGRAM SUPPORT
FOOD BANK OF SOUTH JERSEY 1501 JOHN TIPTON BOULEVARD PENNSAUKEN, NJ 081102303	22-2623089	501(C)(3)	12,000				SUMMER MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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IDAHO HUNGER RELIEF TASK FORCE 125 E 50TH STREET GARDEN CITY, ID 83714	81-3084559	501(C)(3)	12,000				SCHOOL BREAKFAST PROGRAM SUPPORT
OSU EXTENSION - COLUMBUS 1480 W LANE AVENUE SUITE 210 COLUMBUS, OH 43221	31-1145986	N/A	12,000				COOKING MATTERS PROGRAMMING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BLOOMINGTON PUBLIC SCHOOLS DISTRICT #87 602 W JACKSON STREET BLOOMINGTON, IL 61701	37-6004024	N/A	11,539				SCHOOL BREAKFAST PROGRAM SUPPORT
HAMPTON CITY SCHOOL DISTRICT FIRST FRANKLIN STREET FLOOR 2 HAMPTON, VA 23669	54-6001338	N/A	11,303				AFTERSCHOOL MEALS PROGRAM SUPPORT, SCHOOL BREAKFAST PROGRAM SUPPORT

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HELENA SCHOOL DISTRICT #1 1300 BILLINGS AVENUE HELENA, MT 59601	81-6005570	N/A	11,000				SUMMER MEALS PROGRAM SUPPORT, SCHOOL BREAKFAST PROGRAM SUPPORT
NEWPORT NEWS PUBLIC SCHOOLS 561 MCLAWHORNE DRIVE NEWPORT NEWS, VA 23601	54-1398784	N/A	10,869				SCHOOL BREAKFAST PROGRAM SUPPORT

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FREDERICK CO PUBLIC SCH DIST 191 S EAST STREET FREDERICK, MD 21701	52-6000941	N/A	10,800				SCHOOL BREAKFAST PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT
BENTONVILLE PUBLIC SCHOOL DISTRICT #6 5303 SW BRIGHT ROAD BENTONVILLE, AR 72712	71-6020503	N/A	10,500				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GRAND RAPIDS PUBLIC SCHOOL DISTRICT 1800 TREMONT BLVD NW GRAND RAPIDS, MI 49504	38-6002019	N/A	10,500				SCHOOL BREAKFAST PROGRAM SUPPORT, CHILDHOOD HUNGER PROGRAMS
GWINNETT COUNTY PUBLIC SCHOOLS 6155 ATLANTIC BOULEVARD NORCROSS, GA 30071	58-6000254	N/A	10,424				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BIGFORK PUBLIC SCHOOL DISTRICT #38 600 COMMERCE STREET BIGFORK, MT 59911	81-6000557	N/A	10,371				SCHOOL BREAKFAST PROGRAM SUPPORT
52ND STREET ELEMENTARY 816 W 51ST STREET LOS ANGELES, CA 90037	47-3476140	N/A	10,000				CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CARROLLTON EXEMPTED VILLAGE SCHOOLS 3117 AURORA ROAD NE CARROLLTON, OH 44615	34-6000522	N/A	10,000				SCHOOL BREAKFAST PROGRAM SUPPORT
CHICAGO PSD-NETWORK OII 42 W MADISON STREET CHICAGO, IL 60602	36-6005821	N/A	10,000				SUMMER MEALS PROGRAM SUPPORT

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COUNCIL BLUFFS COMMUNITY SCHOOL DISTRICT 801 SOUTH 16TH STREET COUNCIL BLUFFS, IA 51501	42-6001281	N/A	10,000				SUMMER MEALS PROGRAM SUPPORT
EBLEN CHARITIES 50 WESTGATE PARKWAY ASHEVILLE, NC 28806	56-1758077	501(C)(3)	10,000				SUMMER MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ERIE FAMILY HEALTH CENTER INC 1701 WEST SUPERIOR 3RD FLOOR CHICAGO, IL 60622	36-3088628	501(C)(3)	10,000				COOKING MATTERS PROGRAMMING
FOOD BANK OF IOWA OPPORTUNITY 2220 E 17TH STREET DES MOINES, IA 50316	42-1177880	501(C)(3)	10,000				SUMMER MEALS PROGRAM SUPPORT

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FORT SMITH PUBLIC SCHOOLS 2301 NORTH B STREET FORT SMITH, AR 72901	71-6020978	N/A	10,000				SCHOOL BREAKFAST PROGRAM SUPPORT
HALE COUNTY BOARD OF EDUCATION 537 ALABAMA AVENUE MOUNDVILLE, AL 35474	63-6000912	N/A	10,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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HALE EMPOWERMENT AND REVITALIZATION ORGANIZATION PO BOX 318 GREENSBORO, AL 36744	63-1124351	501(C)(3)	10,000				COOKING MATTERS PROGRAMMING
HARRISONBURG CITY SCHOOL DISTRICT 1 COURT SQUARE HARRISONBURG, VA 22801	54-0885804	N/A	10,000				SUMMER MEALS PROGRAM SUPPORT

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IMPACT HOUSTON CHURCH OF CHRIST 1704 WEBER STREET HOUSTON, TX 77007	76-0223834	501(C)(3)	10,000				DISASTER/EMERGENCY RELIEF
MARY'S CENTER MATERNAL AND CHILD CARE 2333 ONTARIO ROAD NW WASHINGTON, DC 20009	52-1594116	501(C)(3)	10,000				CHILDHOOD HUNGER PROGRAMS

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NATIONAL EDUCATION ASSOCIATION FOUNDATION 1201 16TH STREET NW SUITE 416 WASHINGTON, DC 20036	53-0115260	501(C)(3)	10,000				CHILDHOOD HUNGER PROGRAMS
NORTHERN ILLINOIS FOOD BANK 2500 CARLYLE AVENUE BELLEVILLE, IL 62221	36-3203648	501(C)(3)	10,000				SUMMER MEALS PROGRAM SUPPORT

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PULASKI CO SCHOOL DISTRICT 202 N WASHINGTON AVENUE PULASKI, VA 24301	54-6001542	N/A	10,000				SCHOOL BREAKFAST PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT, AFTERSCHOOL MEALS PROGRAM SUPPORT
WARREN COUNTY PUBLIC SCHOOLS 522 HERITAGE DRIVE FRONT ROYAL, VA 22630	54-6001663	N/A	10,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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WYOMING DEPARTMENT OF EDUCATION 2300 CAPITOL AVENUE CHEYENNE, WY 82001	83-0208667	N/A	10,000				SCHOOL BREAKFAST PROGRAM SUPPORT
GREATER MINNEAPOLIS COUNCIL OF CHURCHES 1001 E LAKE STREET MINNEAPOLIS, MN 554071616	41-0693933	501(C)(3)	9,940				CHILDHOOD HUNGER PROGRAMS

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SOUTH SAINT PAUL PUBLIC SCHOOLS 5TH AVENUE SOUTH SOUTH SAINT PAUL, MN 55075	41-6000790	N/A	9,900				SCHOOL BREAKFAST PROGRAM SUPPORT, AFTERSCHOOL MEALS PROGRAM SUPPORT
FAUQUIER COUNTY PUBLIC SCHOOLS 11138 MARSH ROAD BEALETON, VA 22712	54-6001276	N/A	9,790				SCHOOL BREAKFAST PROGRAM SUPPORT

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SOMERS LAKESIDE SCHOOL DISTRICT 29 315 SCHOOL ADDITION ROAD SOMERS, MT 59932	81-6000388	N/A	9,777				SCHOOL BREAKFAST PROGRAM SUPPORT
LAKE HAMILTON SCHOOL DISTRICT 120 WOLF STREET PERCY, AR 71964	71-0475990	N/A	9,750				SCHOOL BREAKFAST PROGRAM SUPPORT

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NEW HAMPSHIRE FOOD BANK 62 WEST BROOK STREET MANCHESTER, NH 03101	02-0222163	501(C)(3)	9,727				CHILDHOOD HUNGER PROGRAMS
DICKENSON COUNTY SCHOOL DISTRICT PO BOX 1127 309 VOLUNTEER AVENUE CLINTWOOD, VA 24228	54-6000125	N/A	9,527				SCHOOL BREAKFAST PROGRAM SUPPORT

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CECIL COUNTY PUBLIC SCHOOLS 910 N EAST ROAD NORTH EAST, MD 21901	52-6000923	N/A	9,500				SCHOOL BREAKFAST PROGRAM SUPPORT
MINNEAPOLIS PUBLIC SCHOOLS 1250 W BROADWAY AVENUE MINNEAPOLIS, MN 55411	41-0851980	N/A	9,500				SCHOOL BREAKFAST PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT

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LYONS ELEM SCHOOL DIST 103 4100 JOLIET AVENUE LYONS, IL 60534	36-6004324	N/A	9,350				SCHOOL BREAKFAST PROGRAM SUPPORT
RUTHERFORD COUNTY SCHOOLS 201 DAVIDS WAY LA VERGNE, TN 37086	62-6000820	N/A	9,200				SCHOOL BREAKFAST PROGRAM SUPPORT

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TOLEDO NORTHWESTERN OHIO FOOD BANK 24 EAST WOODRUFF AVENUE TOLEDO, OH 436045263	34-1441016	501(C)(3)	9,156				CHILDHOOD HUNGER PROGRAMS
LITTLETON PUBLIC SCHOOLS 5776 S CROCKER STREET LITTLETON, CO 80120	84-6000862	N/A	9,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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MSD WARREN 975 N POST ROAD INDIANAPOLIS, IN 46219	35-6006000	N/A	9,000				SCHOOL BREAKFAST PROGRAM SUPPORT, AFTERSCHOOL MEALS PROGRAM SUPPORT
PIKEVILLE INDEPENDENT SCHOOLS 120 CHAMPIONSHIP DRIVE PIKEVILLE, KY 41501	61-6001430	N/A	9,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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NH HUNGER SOLUTIONS 18 LOUDON ROAD SUITE 3477 CONCORD, NH 03302	22-2936618	501(C)(3)	8,959				CHILDHOOD HUNGER PROGRAMS, SUMMER MEAL PROGRAM SUPPORT
RICHMOND COUNTY SCHOOL SYSTEM 1002 PATRIOTS WAY AUGUSTA, GA 30907	58-6000310	N/A	8,957				SCHOOL BREAKFAST PROGRAM SUPPORT

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MONTGOMERY COUNTY PUBLIC SCHOOLS 16644 CRABBS BRANCH WAY ROCKVILLE, MD 20855	52-6000989	N/A	8,800				SCHOOL BREAKFAST PROGRAM SUPPORT
COMMUNITY CULINARY SCHOOL OF CHARLOTTE 2401- A DISTRIBUTION STREET CHARLOTTE, NC 282035025	56-2051086	501(C)(3)	8,580				CHILDHOOD HUNGER PROGRAMS

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LAUREL SCHOOL DISTRICT 725 WASHINGTON AVENUE LAUREL, MT 59044	81-6001091	N/A	8,551				SUMMER MEALS PROGRAM SUPPORT, SCHOOL BREAKFAST PROGRAM SUPPORT
BUTTE SCHOOL DISTRICT #1 401 S WYOMING STREET BUTTE, MT 59701	81-6000956	N/A	8,545				SCHOOL BREAKFAST PROGRAM SUPPORT

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UTAHNS AGAINST HUNGER 455 EAST 400 SOUTH SUITE 407 SALT LAKE CITY, UT 84111	87-0343164	501(C)(3)	8,500				NO KID HUNGRY STATE PARTNER GRANT
CATHOLIC CHARITIES FOOD BANK OF THE SOUTHERN TIER 388 UPPER OAKWOOD AVENUE ELMIRA, NY 14903	20-8808059	501(C)(3)	8,130				CHILDHOOD HUNGER PROGRAMS

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CENTER FOR TRANSFORMATIVE ACTION THE YOUTH FARM PROJECT 1013 W STATE STREET ITHACA, NY 14850	16-0990318	501(C)(3)	8,130				CHILDHOOD HUNGER PROGRAMS
FOOTPRINTS FOOD PANTRY PO BOX 246 KITTERY, ME 039040246	22-3149937	501(C)(3)	8,092				CHILDHOOD HUNGER PROGRAMS

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FEEDING SOUTH DAKOTA 4701 N WESTPORT AVENUE SIOUX FALLS, SD 57107	36-3293534	501(C)(3)	8,000				CHILDHOOD HUNGER PROGRAMS
HARRISBURG CMTY UNIT SD 3 40 S MAIN STREET HARRISBURG, IL 62946	37-6053448	N/A	8,000				SUMMER MEALS PROGRAM SUPPORT

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LIVEWELL COLORADO 1490 LAFAYETTE STREET SUITE 404 DENVER, CO 80218	26-2464764	501(C)(3)	8,000				CHILDHOOD HUNGER PROGRAMS
UNIVERSITY OF FLORIDA BOARD OF TRUSTEES 219 GRINTER HALL PO BOX 115500 GAINESVILLE, FL 326115500	59-6002052	501(C)(3)	8,000				COOKING MATTERS PROGRAMMING

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VIRGINIA PENINSULA FOODBANK 2401 ALUMINUM AVENUE HAMPTON, VA 23661	54-1422298	501(C)(3)	8,000				SUMMER MEALS PROGRAM SUPPORT
WATSON CHAPEL SCHOOL DISTRICT 4000 CAMDEN ROAD PINE BLUFF, AR 71603	71-6025843	N/A	8,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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WEST GEAUGA LOCAL SCHOOL DISTRICT 8611 CEDAR ROAD CHESTERLAND, OH 44026	34-6000595	N/A	8,000				SCHOOL BREAKFAST PROGRAM SUPPORT
WOLF POINT SCHOOL DISTRICT 710 4TH AVENUE NORTH WOLF POINT, MT 59201	81-6000891	N/A	7,970				SCHOOL BREAKFAST PROGRAM SUPPORT

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HOUSING AUTHORITY OF JEFFERSON PARRISH 1718 BETTY STREET MARRERO, LA 70072	72-6015472	N/A	7,911				SUMMER MEALS PROGRAM SUPPORT
ROME CITY SCHOOLS BOARD OF EDUCATION 8 SOUTH ELM STREET ROME, GA 30165	58-0871809	N/A	7,850				SCHOOL BREAKFAST PROGRAM SUPPORT

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GUSTINE UNIFIED SCHOOL DISTRICT 1500 MEREDITH AVENUE GUSTINE, CA 95322	77-0572125	N/A	7,800				AFTERSCHOOL MEALS PROGRAM SUPPORT
CORNELL COOPERATIVE EXTENSION IN TOMPKINS 250 BURNS ROAD ITHACA, NY 14850	16-6072897	501(C)(3)	7,652				CHILDHOOD HUNGER PROGRAMS

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ACADEMY FOR COLLEGE PREPARATION AND CAREER EXPLORATIONDISTR 911 FLATBUSH AVENUE BROOKLYN, NY 11226	69-0210637	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT
ADAMS 12 FIVE STAR SCHOOLS 1500 E 128TH AVENUE THORNTON, CO 80241	84-6000822	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUSTIN INDEPENDENT SCHOOL DISTRICT 10100 S MARY MOORE SEARIGHT DRIVE AUSTIN, TX 78748	74-6000064	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT
BOYS & GIRLS CLUB OF GREATER WESTFIELD 28 WEST SILVER STREET PO BOX 128 WESTFIELD, MA 01086	04-2464259	501(C)(3)	7,500				SUMMER MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF GREATER CINCINNATI 600 DALTON AVENUE CINCINNATI, OH 45203	31-0536965	501(C)(3)	7,500				CHILDHOOD HUNGER PROGRAMS
CARTERET BOARD OF EDUCATION 199 WASHINGTON AVENUE CARTERET, NJ 07008	22-6001708	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CRETE-MONEE SCHOOL DISTRICT 201U 435 NORTH STREET CRETE, IL 60417	36-6005687	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT
FOOD FINDERS FOOD BANK 50 OLYMPIA COURT LAFAYETTE, IN 47909	31-1020198	501(C)(3)	7,500				SUMMER MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INSTITUTO HEALTH SCIENCES CAREER ACADEMY SCHOOL DISTRICT 2520 S WESTERN AVENUE CHICAGO, IL 60608	27-1488618	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT
KENT SCHOOL DISTRICT 11010 SE 232ND STREET KENT, WA 98031	91-6001646	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILWAUKEE COLLEGIATE ACADEMY SCHOOL DISTRICT 4030 N 29TH STREET MILWAUKEE, WI 53216	30-0322248	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT
ORANGE COUNTY PUBLIC SCHOOLS 701 W LIVINGSTON STREET ORLANDO, FL 32805	59-6000771	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PATTERSON JOINT UNIFIED SCHOOL DISTRICT 200 NORTH 7TH STREET PATTERSON, CA 95363	94-6002388	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT
REDWOOD EMPIRE FOOD BANK 3990 BRICKAWAY BOULEVARD SANTA ROSA, CA 95403	68-0121855	501(C)(3)	7,500				DISASTER/EMERGENCY RELIEF, CHILDHOOD HUNGER PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAVANNAH CHATHAM COUNTY PUBLIC SCHOOL SYSTEM 1909 CYNTHIA STREET SAVANNAH, GA 31415	58-6000206	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT
SHAKOPEE PUBLIC SCHOOLS - EAGLE CREEK ELEMENTARY 6855 WOODWARD AVENUE SHAKOPEE, MN 55379	41-6003781	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPARTANBURG SCHOOL DISTRICT 1 10 WEST MILLER STREET INMAN, SC 29349	57-0687554	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT
THE GRAHAM SCHOOL 3950 INDIANOLA AVENUE COLUMBUS, OH 43214	31-1713840	N/A	7,500				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YES CHARTER ACADEMY 9841 TEXAS HILL ROAD OREGON HOUSE, CA 95962	42-1742420	N/A	7,500				SUMMER MEALS PROGRAM SUPPORT
CARLISLE AREA SCHOOL DISTRICT 623 W PENN STREET CARLISLE, PA 17013	23-9005321	N/A	7,488				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DEMOCRACY PREP CONGRESS HEIGHTS PCS DISTRICT 3100 MARTIN LUTHER KING JR AVENUE SE WASHINGTON, DC 20032	46-3584994	N/A	7,485				SCHOOL BREAKFAST PROGRAM SUPPORT
TRENTON PUBLIC SCHOOL DISTRICT 301 GLADSTONE AVENUE TRENTON, NJ 08629	02-1052100	N/A	7,400				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SPOTSYLVANIA SCHOOL DISTRICT 8020 RIVER STONE DRIVE FREDERICKSBURG, VA 22407	54-6001624	N/A	7,350				SCHOOL BREAKFAST PROGRAM SUPPORT
PITTSBURGH PUBLIC SCHOOL DISTRICT 1550 BREINING STREET PITTSBURGH, PA 15226	25-1157808	N/A	7,285				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GALENA PARK ISD 14705 WOODFOREST BOULEVARD HOUSTON, TX 77015	74-6000895	N/A	7,272				DISASTER/EMERGENCY RELIEF
WOODHAVEN-BROWNSTOWN SCHOOL DISTRICT 24787 VAN HORN ROAD BROWNSTOWN, MI 48134	38-1872437	N/A	7,250				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PATHFINDER CHARTER SCHOOL FOUNDATION 3535 W DUNLAP PHOENIX, AZ 85051	20-4926729	N/A	7,130				SCHOOL BREAKFAST PROGRAM SUPPORT
KENNEWICK SCHOOL DISTRICT #17 500 SOUTH DAYTON STREET KENNEWICK, WA 99336	91-6001557	N/A	7,050				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THORNTON FRACTNL TWP HSD 215 1605 WENTWORTH AVENUE CALUMET CITY, IL 60409	36-6004406	N/A	7,050				SCHOOL BREAKFAST PROGRAM SUPPORT
EDISON TOWNSHIP SCHOOL DISTRICT 50 BLOSSOM STREET EDISON, NJ 08817	54-2067893	N/A	7,000				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MADISON METROPOLITAN SCHOOL DISTRICT 4711 PFLAUM ROAD MADISON, WI 53718	39-6003202	N/A	7,000				SCHOOL BREAKFAST PROGRAM SUPPORT
POLAND LOCAL SCHOOLS 3199 DOBBINS ROAD POLAND, OH 44514	64-6002233	N/A	7,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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PROSPECT HEIGHTS DISTRICT 23 700 N SCHOENBECK ROAD PROSPECT HEIGHTS, IL 60070	36-6000016	N/A	7,000				SCHOOL BREAKFAST PROGRAM SUPPORT
SHAWNEE MISSION SCHOOL DISTRICT 10917 W 67TH STREET SHAWNEE, KS 66203	48-0764907	N/A	7,000				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SOUTHERN LOCAL SCHOOLS (MEIGS COUNTY) 920 ELM STREET RACINE, OH 45771	31-6400984	N/A	7,000				SCHOOL BREAKFAST PROGRAM SUPPORT
VALLEY VIEW SCHOOL DISTRICT 801 N NORMANTOWN ROAD ROMEONVILLE, IL 60446	36-2740550	N/A	7,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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CLEVELAND METRO SCHOOL DISTRICT 1111 SUPERIOR AVENUE E SUITE 1800 CLEVELAND, OH 44114	34-6000662	N/A	6,900				SCHOOL BREAKFAST PROGRAM SUPPORT
ELGIN SCHOOL DISTRICT U-46 949 VAN STREET ELGIN, IL 60123	36-6004736	N/A	6,800				SCHOOL BREAKFAST PROGRAM SUPPORT

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GILES CO SCHOOL DISTRICT 1 GREEN WAVE LANE NARROWS, IN 24124	54-6001307	N/A	6,650				SCHOOL BREAKFAST PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT
HAZLETON AREA SCHOOL DISTRICT 15 KELAYRES ROAD MCADOO, PA 18237	23-1667968	N/A	6,650				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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AT THE CORE 4903 E PEONE PINES DRIVE MEAD, WA 99201	46-2937061	501(C)(3)	6,500				CHILDHOOD HUNGER PROGRAMS
SECOND HARVEST FOOD BANK OF THE INLAND NORTHWEST 1234 EAST FRONT AVENUE SPOKANE, WA 99202	23-7173826	501(C)(3)	6,500				CHILDHOOD HUNGER PROGRAMS

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WARRENSVILLE HEIGHTS CITY SCHOOL DISTRICT 24301 EMERY ROAD WARRENSVILLE, OH 44128	34-6002991	N/A	6,500				SCHOOL BREAKFAST PROGRAM SUPPORT
COMMUNITY HEALTH NETWORK OF CT FOUNDATION 4 FAIRFIELD BOULEVARD WALLINGFORD, CT 06492	20-0395748	501(C)(3)	6,352				CHILDHOOD HUNGER PROGRAMS

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NEW HAVEN PUBLIC SCHOOLS 480 SHERMAN PARKWAY NEW HAVEN, CT 06511	06-6001876	N/A	6,265				SCHOOL BREAKFAST PROGRAM SUPPORT
BEDFORD COUNTY PUBLIC SCHOOLS 1 CAVALIER CIRCLE FOREST, VA 24551	54-6001143	N/A	6,200				SCHOOL BREAKFAST PROGRAM SUPPORT

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BUCHANAN COUNTY PUBLIC SCHOOLS 1300 GOLDEN WAVE DRIVE GRUNDY, VA 24614	56-6001174	N/A	6,000				SCHOOL BREAKFAST PROGRAM SUPPORT
CARDINAL LOCAL SCHOOLS 16175 ALMEDA DRIVE MIDDLEFIELD, OH 44062	34-6004291	N/A	6,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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FOOD BANK OF NORTH CENTRAL ARKANSAS 14215 HIGHWAY 5 SOUTH NORFOLK, AR 72658	58-1881897	501(C)(3)	6,000				SUMMER MEALS PROGRAM SUPPORT, AFTERSCHOOL MEALS PROGRAM SUPPORT
INDY HUNGER NETWORK 1121 SOUTHEASTERN AVENUE INDIANA, IN 46202	45-4833492	501(C)(3)	6,000				COOKING MATTERS PROGRAMMING

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MONTICELLO SCHOOL DISTRICT 1037 SCOGIN DRIVE MONTICELLO, AR 71655	71-6020606	N/A	6,000				SCHOOL BREAKFAST PROGRAM SUPPORT
SCRANTON SCHOOL DISTRICT 355 MAPLE STREET SCRANTON, PA 18503	23-1354443	N/A	6,000				SCHOOL BREAKFAST PROGRAM SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROSEMOUNT-APPLE VALLEY-EAGAN PUBLIC SCHOOLS DISTRICT 196 14100 COUNTY ROAD 11 BURNSVILLE, MN 55337	41-6007792	N/A	6,000				SCHOOL BREAKFAST PROGRAM SUPPORT
CYPRESS-FAIRBANKS ISD 7939 JACKRABBIT ROAD HOUSTON, TX 77095	74-6000654	N/A	5,750				SCHOOL BREAKFAST PROGRAM SUPPORT

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ROCKBRIDGE COUNTY SCHOOL DISTRICT 2893 COLLIERSTOWN ROAD LEXINGTON, VA 24450	54-6001580	N/A	5,750				SCHOOL BREAKFAST PROGRAM SUPPORT
COMSTOCK PUBLIC SCHOOLS 6171 EAST MN AVENUE KALAMAZOO, MI 49048	38-6001926	N/A	5,728				SCHOOL BREAKFAST PROGRAM SUPPORT

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BURBANK DISTRICT 111 7644 S CENTRAL BURBANK, IL 60459	36-6004332	N/A	5,500				SCHOOL BREAKFAST PROGRAM SUPPORT
CATHOLIC CHARITIES OF THE ARCHDIOCESE OF CHICAGO 721 N LASALLE STREET CHICAGO, IL 60654	36-2170821	501(C)(3)	5,500				SUMMER MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DANVILLE CONSOLIDATED SCHOOL DISTRICT 118 202 E FAIRCHILD STREET DANVILLE, IL 61832	37-6004781	N/A	5,500				SCHOOL BREAKFAST PROGRAM SUPPORT
EAST AURORA SCHOOL DISTRICT 131 954 E BENTON STREET AURORA, IL 60505	36-6004752	N/A	5,500				SCHOOL BREAKFAST PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LANCASTER CO SCHOOL DISTRICT PO BOX 2000 KILMARNOCK, VA 22482	54-6001383	N/A	5,500				AFTERSCHOOL MEALS PROGRAM SUPPORT
OHIO ASSOCIATION FOOD BANKS 101 E TOWN STREET COLUMBUS, OH 43215	34-1677838	501(C)(3)	5,493				CHILDHOOD HUNGER PROGRAMS

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END HUNGER CONNECTICUT 65 HUNGERFORD STREET HARTFORD, CT 06106	06-1545835	501(C)(3)	5,444				CHILDHOOD HUNGER PROGRAMS
TALBOT COUNTY SCHOOL DISTRICT PO BOX 1029 EASTON, MD 21601	52-6001031	N/A	5,350				AFTERSCHOOL MEALS PROGRAM SUPPORT, SUMMER MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BROCKTON PUBLIC SCHOOLS 700 BELMONT STREET BROCKTON, MA 02301	04-6001382	N/A	5,325				AFTERSCHOOL MEALS PROGRAM SUPPORT
FRANKLIN CO SCHOOL DISTRICT 375 MIDDLE SCHOOL ROAD ROCKY MOUNT, VA 24151	54-6001288	N/A	5,250				AFTERSCHOOL MEALS PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WAUKEGAN COMMUNITY UNIFIED SCHOOL DISTRICT 60 520 HELMHOLZ AVENUE WAUKEGAN, IL 60085	36-2703832	N/A	5,150				SCHOOL BREAKFAST PROGRAM SUPPORT
BUCKINGHAM COUNTY PUBLIC SCHOOLS 1184 HIGH SCHOOL ROAD BUCKINGHAM, VA 23921	54-6001178	N/A	5,120				SCHOOL BREAKFAST PROGRAM SUPPORT

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COLUMBUS PUBLIC SCHOOLS 433 N THIRD STREET COLUMBUS, MT 59019	81-6000963	N/A	5,120				SCHOOL BREAKFAST PROGRAM SUPPORT

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
SHARE OUR STRENGTH

Employer identification number
52-1367538

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input checked="" type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input checked="" type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use	<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use									
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b Yes									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2 Yes									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	4a	No								
	4b	Yes								
	4c	No								
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III</p>	5a	Yes								
	5b	No								
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III</p>	6a	Yes								
	6b	No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	No								
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	No								
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A	BEGINNING IN JANUARY 2018, A HOUSING ALLOWANCE OF \$3,000 PER MONTH IS PROVIDED TO WILLIAM H. SHORE, FOUNDER, EXECUTIVE CHAIRMAN, AND BOARD DIRECTOR.
PART I, LINE 4B	THOMAS NELSON, PRESIDENT, RECEIVED A CONTRIBUTION OF \$57,000 TO HIS 457(F) RETIREMENT PLAN.
PART I, LINE 5	STAFF ARE ELIGIBLE FOR PERCENTAGE BONUSES BASED ON SEVERAL METRICS SUCH AS UNRESTRICTED REVENUE GROWTH, ADDITIONS TO NET ASSETS, AS WELL AS PROGRAM-RELATED TARGETS.
PART I, LINE 6	STAFF ARE ELIGIBLE FOR PERCENTAGE BONUSES BASED ON SEVERAL METRICS SUCH AS UNRESTRICTED REVENUE GROWTH, ADDITIONS TO NET ASSETS, AS WELL AS PROGRAM-RELATED TARGETS.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
SHARE OUR STRENGTH

Employer identification number
52-1367538

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	28	423,671	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	55	735,750	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

	29	
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		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
b If "Yes," describe in Part II			
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II Supplemental Information.

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

Return Reference	Explanation
PART I, COLUMN (B)	THE TOTAL REPRESENTED IN PART I, COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS THAT WERE RECEIVED FOR THE YEAR ENDED JUNE 30, 2018

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

▶ Attach to Form 990 or 990-EZ.

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

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SHARE OUR STRENGTH

Employer identification number

52-1367538

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	WALLY DOOLIN, BOARD DIRECTOR, IS MARRIED TO JONI DOOLIN, WHO IS ALSO A BOARD DIRECTOR WIL LIAM H SHORE, FOUNDER, EXECUTIVE CHAIRMAN AND BOARD DIRECTOR, IS THE BROTHER OF DEBBIE SH ORE, CO-FOUNDER

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE DRAFT FEDERAL FORM 990 IS REVIEWED IN DETAIL AND APPROVED BY THE AUDIT COMMITTEE AND DISTRIBUTED TO THE FULL BOARD OF DIRECTORS BEFORE FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	SHARE OUR STRENGTH HAS A CONFLICT OF INTEREST POLICY THAT APPLIES TO OFFICERS, DIRECTORS AND EMPLOYEES THE POLICY REQUIRES THAT ALL TRANSACTIONS THAT MAY PRESENT AN ACTUAL OR APPEARANCE OF A CONFLICT OF INTEREST BE DISCLOSED TO THE PRESIDENT & CEO, THE CHIEF FINANCIAL OFFICER, OR THE APPROPRIATE BOARD OF DIRECTORS MEMBER AS SOON AS THE PERSON BECOMES AWARE OF THE CONFLICT PERSONS WHO MAY HAVE A CONFLICT OF INTEREST ARE PROHIBITED FROM TAKING ACTION WITH RESPECT TO ANY DECISION REGARDING THE TRANSACTION OR MATTER THE CONFLICT OF INTEREST POLICY IS INCLUDED IN THE EMPLOYEE HANDBOOK FURTHER, EACH MEMBER OF THE BOARD OF DIRECTORS AND THE EXECUTIVE TEAM COMPLETES AND SIGNS A CONFLICT OF INTEREST DISCLOSURE FORM EVERY YEAR, ACKNOWLEDGING THAT THE RECIPIENT HAS READ AND REVIEWED AND IS IN COMPLIANCE WITH THE POLICY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE PROCESS FOR DETERMINING THE COMPENSATION OF THE ORGANIZATION'S TOP EXECUTIVE, OFFICERS AND KEY EMPLOYEES IS REVIEWED AND APPROVED BY A COMPENSATION COMMITTEE, WHICH IS COMPRISED SOLELY OF INDEPENDENT DIRECTORS USING AN OUTSIDE CONSULTANT, THE COMPENSATION COMMITTEE CONDUCTS AN IN-DEPTH MARKET SURVEY EVERY THREE YEARS TO PRODUCE COMPARABILITY DATA, WITH THE MOST RECENT STUDY IN APRIL 2017 THE COMPENSATION COMMITTEE, IN ADDITION TO THE ORGANIZATION'S PRESIDENT & CEO, CHIEF FINANCIAL OFFICER AND CHIEF PEOPLE OFFICER, ALSO REVIEWS MARKET DATA ANNUALLY FOR CHANGES IN THE MARKETPLACE AND SPECIFIC JOB FUNCTIONS THE COMPENSATION COMMITTEE RECOMMENDS THE COMPENSATION OF THE EXECUTIVE CHAIRMAN TO THE FULL BOARD OF DIRECTORS FOR APPROVAL THE BOARD'S DECISION IS SUBSTANTIATED IN THE MINUTES THE COMPENSATION COMMITTEE ALSO REVIEWS AND APPROVES THE COMPENSATION RECOMMENDATIONS FOR THE NEXT FOUR HIGHEST COMPENSATED OFFICERS AND KEY EMPLOYEES AND IS INFORMED OF THE COMPENSATION DETERMINATIONS FOR REMAINING OFFICERS, KEY EMPLOYEES AND/OR MEMBERS OF THE EXECUTIVE TEAM OF THE ORGANIZATION ALL OF THESE COMPENSATION DETERMINATIONS ARE DEVELOPED USING THE SAME MARKET DATA USED TO EVALUATE THE EXECUTIVE CHAIRMAN

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	SHARE OUR STRENGTH MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC VIA EMAIL OR US MAIL

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX	<p>SHARE OUR STRENGTH IS A CO-BENEFICIARY ALONG WITH THE FOOD BANK FOR NEW YORK CITY OF THE NET PROCEEDS RAISED BY THE NEW YORK CITY WINE & FOOD FESTIVAL (NYCWFF) THIS IS A FOUR DAY EVENT HELD IN OCTOBER EACH YEAR AND IS DIRECTED BY SOUTHERN GLAZER'S WINE AND SPIRITS, LLC</p> <p>SHARE OUR STRENGTH'S ROLE IS TO PROVIDE CONTRACT REVIEW, FINANCIAL REPORTING AND ACCOUNTING SUPPORT THE ORGANIZATION CONSOLIDATES THE FESTIVAL'S ENTIRE FINANCIALS WITHIN SHARE OUR STRENGTH THE PRESENTATION OF SHARE OUR STRENGTH'S FUNCTIONAL EXPENSE ALLOCATION AND BUSINESS MODEL IS MOST ACCURATELY REFLECTED WITH NYCWFF COSTS EXCLUDED</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 26	<p>SHARE OUR STRENGTH IS COMMITTED TO EFFICIENCY AND TRANSPARENCY IN APPLYING THE ACCOUNTING STANDARDS FROM THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) AND THE INTERNAL REVENUE SERVICE (IRS) RELATED TO JOINT COSTS OF INFORMATIONAL MATERIALS AND ACTIVITIES THAT INCLUDE A FUNDRAISING APPEAL, SHARE OUR STRENGTH IDENTIFIED ACTIVITIES AS PROGRAM, MANAGEMENT AND GENERAL, AND FUNDRAISING IN THE FOLLOWING CATEGORIES A) EDUCATION AND AWARENESS ABOUT HUNGER AND FOOD INSECURITY AND B) VOLUNTEER RECRUITMENT, MOBILIZATION AND MANAGEMENT TASTE OF THE NATION, NO KID HUNGRY DINNERS, CHEFS CYCLE, AND THE LIKE AS WELL AS DIRECT MAIL/EMAIL COMMUNICATIONS ARE PLATFORMS OR VEHICLES USED TO ACCOMPLISH ONE OR MORE OF THE GOALS DEFINED ABOVE (EDUCATION AND AWARENESS, VOLUNTEERS) AS SUCH, THE ACTIVITIES PERFORMED FOR EACH PLATFORM OR VEHICLE MAY BE PROGRAM SPECIFIC, FUNDRAISING, MANAGEMENT AND GENERAL, OR JOINT (I E , A COMBINATION OF FUNDRAISING AND PROGRAM) THESE EFFORTS HELP ADVANCE OUR MISSION TO END HUNGER AND POVERTY IN THE U S AND ABROAD AS A NONPROFIT ORGANIZATION THAT IS EXEMPT FROM FEDERAL TAXATION, WE ENSURE OUR DONORS' MONEY IS SPENT AS EFFICIENTLY AND EFFECTIVELY AS POSSIBLE</p>

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2017

**Open to Public
Inspection**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
SHARE OUR STRENGTH

Employer identification number

52-1367538

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) SHARE OUR STRENGTH ENTERPRISES LLC 1730 M STREET NW SUITE 700 WASHINGTON, DC 20036 51-0597759	NON-OPERATING HOLDING COMPANY	DE			SHARE OUR STRENGTH
(2) SHARE OUR STRENGTH HOLDINGS LLC 1730 M STREET NW SUITE 700 WASHINGTON, DC 20036	NON-OPERATING HOLDING COMPANY	DE			SHARE OUR STRENGTH

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) COMMUNITY WEALTH PARTNERS INC 1825 K STREET NW SUITE 1000 WASHINGTON, DC 20006 52-2025260	CONSULTING	DC	SHARE OUR STRENGTH	C		2,177,689	100 000 %	Yes	

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a Yes	
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d Yes	
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q Yes	
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) COMMUNITY WEALTH PARTNERS INC	A	3,238	CASH
(2) COMMUNITY WEALTH PARTNERS INC	D	200,000	CASH
(3) COMMUNITY WEALTH PARTNERS INC	M	309,778	CASH
(4) COMMUNITY WEALTH PARTNERS INC	Q	362,285	CASH

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

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