

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.

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

OMB No. 1545-0047
2020
Open to Public Inspection

A For the **2020** calendar year, or tax year beginning **07-01-2020**, and ending **06-30-2021**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
ARIZONA FOOD BANK NETWORK

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
340 E CORONADO RD STE 400

City or town, state or province, country, and ZIP or foreign postal code
PHOENIX, AZ 850041524

D Employer identification number
86-0507679

E Telephone number
(602) 528-3434

G Gross receipts \$ 10,515,481

F Name and address of principal officer:
ANGELA RODGERS
340 E CORONADO RD STE 400
PHOENIX, AZ 850041524

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: WWW.AZFOODBANKS.ORG

H(c) Group exemption number ▶

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1984

M State of legal domicile: AZ

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
DEVELOP SOLUTIONS TO END HUNGER THROUGH FOOD BANKING, PUBLIC POLICY AND INNOVATION.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	12
6 Total number of volunteers (estimate if necessary)	6	
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 39	7b	

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	4,114,488	9,489,015
9 Program service revenue (Part VIII, line 2g)	316,631	991,358
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	64,245	3,937
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,000	31,171
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,496,364	10,515,481

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,177,394	4,704,477
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	792,994	908,733
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶180,614		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,395,635	3,016,049
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	3,366,023	8,629,259
19 Revenue less expenses. Subtract line 18 from line 12	1,130,341	1,886,222

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	4,012,975	6,149,327
21 Total liabilities (Part X, line 26)	343,515	299,143
22 Net assets or fund balances. Subtract line 21 from line 20	3,669,460	5,850,184

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
Signature of officer: *****
Date: 2022-03-11
ANGELA RODGERS PRESIDENT / CEO
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: FESTER & CHAPMAN PLLC
Preparer's signature: [Signature]
Date: 2022-03-11
Check if self-employed
PTIN: P00450405
Firm's name: FESTER & CHAPMAN PLLC
Firm's EIN: 82-1455657
Firm's address: 9019 E BAHIA DR STE 100
SCOTTSDALE, AZ 85260
Phone no.: (602) 264-3077

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:

DEVELOP SOLUTIONS TO END HUNGER THROUGH FOOD BANKING, PUBLIC POLICY AND INNOVATION.

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 \$ 7,536,314 including grants of \$ 4,469,349) (Revenue \$ 991,358)
See Additional Data

4b (Code:) (Expenses \$ 438,693 including grants of \$ 235,128) (Revenue \$)
See Additional Data

4c (Code:) (Expenses \$ 185,246 including grants of \$) (Revenue \$)
See Additional Data

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

4e Total program service expenses ▶ 8,160,253

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response. Rows include questions 1 through 21, covering various organizational requirements and reporting obligations.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 22 through 38 regarding organizational reporting, compensation, and tax-exempt status.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 12
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 2b Yes
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a No
b If "Yes," enter the name of the foreign country: 4b
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b
7 Organizations that may receive deductible contributions under section 170(c).
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a
b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c
d If "Yes," indicate the number of Forms 8282 filed during the year 7d
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8
9 Sponsoring organizations maintaining donor advised funds.
a Did the sponsoring organization make any taxable distributions under section 4966? 9a
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b
10 Section 501(c)(7) organizations. Enter:
a Initiation fees and capital contributions included on Part VIII, line 12 10a
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b
11 Section 501(c)(12) organizations. Enter:
a Gross income from members or shareholders 11a
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b
13 Section 501(c)(29) qualified nonprofit health insurance issuers.
a Is the organization licensed to issue qualified health plans in more than one state? 13a
Note. See the instructions for additional information the organization must report on Schedule O.
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b
c Enter the amount of reserves on hand 13c
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 No
If "Yes," see instructions and file Form 4720, Schedule N.
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 No
If "Yes," complete Form 4720, Schedule O.

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (13), 1b (13), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

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

Section C. Disclosure

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

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

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ANGELA RODGERS PRESIDENT /	40.00			X				137,596	0	12,375
(2) DON ADAMS DIRECTOR	1.00	X						0	0	0
(3) DAVID ARMSTRONG DIRECTOR	1.00	X						0	0	0
(4) MARK CASEY DIRECTOR	1.00	X						0	0	0
(5) ISABEL GARCIA DIRECTOR	1.00	X						0	0	0
(6) PATRICK HOWLEY DIRECTOR	1.00	X						0	0	0
(7) TOM KERTIS VICE CHAIR	1.00	X		X				0	0	0
(8) KIM LARKIN BOARD CHAIR	1.00	X		X				0	0	0
(9) EDGAR LOPEZ SECRETARY/TR	1.00	X		X				0	0	0
(10) MICHAEL MCDONALD IMMEDIATE PA	1.00	X		X				0	0	0
(11) DAVE RICHINS DIRECTOR	1.00	X						0	0	0
(12) SUE SADECKI DIRECTOR	1.00	X						0	0	0
(13) SHARA WHITEHEAD DIRECTOR	1.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	137,596		12,375

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 1			
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4		No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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

			(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	75,992				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	5,543,910				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,869,113				
	g Noncash contributions included in lines 1a - 1f:\$	1g					
	h Total. Add lines 1a-1f			9,489,015			
	Program Service Revenue	2a FEE FOR SERVICE	Business Code	991,358	991,358		
b							
c							
d							
e							
f All other program service revenue.							
g Total. Add lines 2a-2f.			991,358				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,937	3,937			
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		6b Less: rental expenses					
		6c Rental income or (loss)					
		d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		7b Less: cost or other basis and sales expenses					
		7c Gain or (loss)					
		d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
		b Less: direct expenses	8b				
		c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses		9b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code						
11a OTHER REVENUE		31,171	31,171				
b							
c							
d All other revenue							
e Total. Add lines 11a-11d		31,171					
12 Total revenue. See instructions		10,515,481	1,026,466				

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	4,704,477	4,704,477		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	149,971	109,326	27,161	13,484
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	594,701	433,528	107,704	53,469
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	20,631	9,411	8,870	2,350
9 Other employee benefits	86,891	39,636	37,357	9,898
10 Payroll taxes	56,539	25,791	24,308	6,440
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	14,467	13,579	617	271
d Lobbying	18,373	17,246	783	344
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	516,312	484,648	22,007	9,657
12 Advertising and promotion	89,324	74,998	2,666	11,660
13 Office expenses	133,983	58,348	17,266	58,369
14 Information technology				
15 Royalties				
16 Occupancy	47,226	34,552	6,993	5,681
17 Travel	1,337	1,332	5	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	30,053		30,053	
23 Insurance	30,309	25,448	905	3,956
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 FOOD, FREIGHT AND RELATED	1,759,327	1,759,327		
b EQUIPMENT, RENTAL, REPAIR	338,806	337,933	607	266
c OPERATING SERVICES	36,532	30,673	1,090	4,769
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	8,629,259	8,160,253	288,392	180,614
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 type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,381,411	1	3,084,553
	2 Savings and temporary cash investments	161,097	2	225,532
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	308,675	4	1,249,839
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	20,759	9	23,768
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	237,553		
	b Less: accumulated depreciation	137,353		
	11 Investments—publicly traded securities	1,022,388	11	1,461,094
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	4,341	15	4,341
16 Total assets. Add lines 1 through 15 (must equal line 33)	4,012,975	16	6,149,327	
Liabilities	17 Accounts payable and accrued expenses	196,615	17	296,143
	18 Grants payable		18	
	19 Deferred revenue	146,900	19	3,000
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		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		25	
	26 Total liabilities. Add lines 17 through 25	343,515	26	299,143
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	3,072,360	27	4,336,600
	28 Net assets with donor restrictions	597,100	28	1,513,584
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	3,669,460	32	5,850,184	
33 Total liabilities and net assets/fund balances	4,012,975	33	6,149,327	

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	10,515,481
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,629,259
3	Revenue less expenses. Subtract line 2 from line 1	3	1,886,222
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,669,460
5	Net unrealized gains (losses) on investments	5	295,205
6	Donated services and use of facilities	6	
7	Investment expenses	7	710
8	Prior period adjustments	8	-1,413
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	5,850,184

Part XII Financial Statements and Reporting

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

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

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a	Yes	
3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 86-0507679

Name: ARIZONA FOOD BANK NETWORK

Form 990 (2020)

Form 990, Part III, Line 4a:

MEMBER SERVICES: AZFBN HAS ONE CONSISTENT MEMBER SERVICES AND LOGISTICS GOAL: TO GET MORE AND BETTER QUALITY FOOD THROUGH THE FOOD BANK NETWORK AND INTO THE HANDS OF THOSE WHO NEED IT MOST. IN FY 2020-2021 THE AZFBN LOGISTICS TASK FORCE DISTRIBUTED 48,450,269 POUNDS OF FOOD. AZFBN'S THREE DRIVERS TRANSPORTED 638 TOTAL LOADS, MOST OF WHICH WAS PRODUCE THAT SUPPORTED THE AZ FOOD BANK'S PRODUCE INITIATIVE, HELPING THE NETWORK SHARE MORE THAN 71 MILLION POUNDS OF FRESH AND HEALTHY FOOD TO BENEFIT CLIENTS STATEWIDE. IN FY 2020-2021, AZFBN CONTINUED TO SUPPORT OUR FOOD BANKS BY PURCHASING HIGHLY NUTRITIOUS FOOD FOR CLIENTS. AZFBN ALSO AWARDED FUNDS TO AGENCIES STATEWIDE THAT WERE COPING WITH COVID-19 PANDEMIC RESPONSE.

Form 990, Part III, Line 4b:

INNOVATION PROGRAMS: AZFBN WORKS TO ENSURE THAT ESPECIALLY VULNERABLE POPULATIONS DO NOT SUFFER FROM HUNGER, AND ARE GIVEN PATHWAYS TO NOT REGULARLY NEEDING THE EMERGENCY FOOD BANKS NETWORK ACROSS THE STATE. THIS WORK INVOLVES ENSURING SCHOOLS AND DISTRICTS MAKE FREE AND REDUCED PRICE BREAKFAST AND LUNCH AVAILABLE TO AS MANY CHILDREN AS POSSIBLE, EXAMINING THE REASONS THAT ELIGIBLE SENIORS DO NOT ENROLL FOR FOOD ASSISTANCE (SNAP, CACFP) AND ENSURING COLLEGE STUDENTS HAVE ACCESS TO HEALTHY FOOD AND SYSTEMS OF SUPPORT AS THEY WORK TO SECURE AN EDUCATION. AZFBN SUPPORTED SCHOOLS AND FEEDING PARTNERS CONTINUE THEIR SERVICE OF MEALS DISTRIBUTION BY PROVIDING GRANTS. AZFBN ALSO ASSISTED IN RELIEVING INCREASED OPERATIONAL COSTS TO PROVIDE MEALS THROUGH NEW DISTRIBUTION METHODS DUE TO COVID-19

Form 990, Part III, Line 4c:

ADVOCACY AND EDUCATION: AZFBN ADVOCATED FOR AND RECEIVED FUNDS FOR A PROGRAM CALLED "FRIENDS OF THE FARM" WHICH IS A PURCHASING PROGRAM TO ENGAGE ARIZONA'S SMALL FARMS IN GROWING AND DISTRIBUTING FOOD THROUGH THE FOOD BANK NETWORK TO ARIZONANS AT RISK OF HUNGER. ADDITIONALLY, AZFBN WAS A KEY PARTNER AS FEDERAL, STATE AND LOCAL HUNGER RELIEF PROGRAMS (SUCH AS ENHANCED SNAP, THE COVID FOOD ASSISTANCE PROGRAM AND PANDEMIC EBT) WERE ROLLED OUT IN RESPONSE TO THE COVID-19 PANDEMIC. AZFBN STAFF SERVED AS SOUNDING BOARDS AND IDEA GENERATORS, EDUCATING AND ADVOCATING ABOUT THE ROLE OF FOOD BANKS IN ENSURING THAT ARIZONANS IMPACTED BY THE PANDEMIC DID NOT ALSO SUFFER FROM HUNGER.

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2020
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
ARIZONA FOOD BANK NETWORK

Employer identification number
86-0507679

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) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	1,543,677	2,288,138	2,051,530	4,114,488	9,489,015	19,486,848
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	1,543,677	2,288,138	2,051,530	4,114,488	9,489,015	19,486,848
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . .						
6 Public support. Subtract line 5 from line 4.						19,486,848

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4. . .	1,543,677	2,288,138	2,051,530	4,114,488	9,489,015	19,486,848
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	833	23,285	1,405	51,024		76,547
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.). . .	2,160					2,160
11 Total support. Add lines 7 through 10						19,565,555
12 Gross receipts from related activities, etc. (see instructions)					12	1,026,466

13 First 5 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 2020 (line 6, column (f) divided by line 11, column (f))	14	99.600 %
15 Public support percentage for 2019 Schedule A, Part II, line 14	15	88.900 %

- 16a 33 1/3% support test—2020.** 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—2019.** 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—2020.** 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—2019.** 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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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 5 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 2020 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2019 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2020 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2019 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2020. 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—2019. 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 box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 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? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		

Part IV Supporting Organizations (continued)

		Yes	No
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 lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described in 11a above?		
c	A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the officers, 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 line 2 above, 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 lines 2a and 2b 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>	Yes	No
b	Did the activities described in line 2a 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 lines 3a and 3b 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>If "Yes" or "No" 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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035	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	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (<i>prior IRS approval required - provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8	
9 Distributable amount for 2020 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required-- <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015.			
b From 2016.			
c From 2017.			
d From 2018.			
e From 2019.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016.			
b Excess from 2017.			
c Excess from 2018.			
d Excess from 2019.			
e Excess from 2020.			

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
PART II, LINE 10	2,160

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

OMB No. 1545-0047
2020
Open to Public Inspection

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 ARIZONA FOOD BANK NETWORK	Employer identification number 86-0507679
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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)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount. Enter the amount from the following table in both columns.

18,373	
18,373	
8,141,880	
8,160,253	
558,013	

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)
- h** Subtract line 1g from line 1a. If zero or less, enter -0-
- i** Subtract line 1f from line 1c. If zero or less, enter -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?

139,503	

Yes 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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount	234,511	291,263	302,764	558,013	1,386,551
b Lobbying ceiling amount (150% of line 2a, column(e))					2,079,827
c Total lobbying expenditures	18,373	18,373	18,373	18,373	73,492
d Grassroots nontaxable amount	58,628	72,816	75,691	139,503	346,638
e Grassroots ceiling amount (150% of line 2d, column (e))					519,957
f Grassroots lobbying expenditures					

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

OMB No. 1545-0047
2020
Open to Public Inspection

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization
ARIZONA FOOD BANK NETWORK

Employer identification number
86-0507679

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? Yes 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? Yes 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 7/25/06, 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 FASB 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 FASB 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 FASB 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:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f 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.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 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 100.000 %
c Term 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:
(i) Unrelated organizations
(ii) Related organizations
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?
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.

Table with 5 columns: Description of property, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

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 _____		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
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)		
(10)		
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)	
(10)	
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	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	

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	10,851,637
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	295,205
b	Donated services and use of facilities	2b	41,661
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	336,866
3	Subtract line 2e from line 1	3	10,514,771
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	710
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	710
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	10,515,481

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	8,670,920
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	41,661
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	41,661
3	Subtract line 2e from line 1	3	8,629,259
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	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	8,629,259

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: 86-0507679

Name: ARIZONA FOOD BANK NETWORK

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PAGE 2, PART V, LINE 4	AFTER THE TERMS OF THE ENDOWMENT AGREEMENT ARE SATISFIED, THE PROCEEDS MAY BE USED FOR OPERATIONAL COST OR REINVESTED.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

OMB No. 1545-0047

2020

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.

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

Name of the organization ARIZONA FOOD BANK NETWORK

Employer identification number

86-0507679

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
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.

Table with 8 columns: (a) Name and address of organization, (b) EIN, (c) IRC section, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

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

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
SCHEDULE I, PAGE 1, PART I, LINE 2	PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS AZFBN AWARDED FUNDS TO AGENCIES STATEWIDE THAT WERE COPING WITH COVID-19 PANDEMIC RESPONSE. AGENCIES NEEDED AND USED THESE DOLLARS TO CONVERT DISTRIBUTION METHODS TO TOUCHLESS AND DRIVE-UP, TO SECURE PERSONAL PROTECTIVE EQUIPMENT (MASKS, GLOVES, FACE SHIELDS) FOR STAFF AND VOLUNTEERS, AND TO PURCHASE FOOD FOR DISTRIBUTION DURING SUPPLY CHAIN INTERRUPTIONS. REPORTING REQUIREMENTS FOR GRANTEEES INCLUDED: TWO GRANT REPORTS (PROGRESS AND FINAL). THE GRANT REPORTS REFLECTED THE IMPACT OF FUNDING ON THE AGENCY AND THEIR CONSTITUENTS.

Additional Data

Software ID:
Software Version:
EIN: 86-0507679
Name: ARIZONA FOOD BANK NETWORK

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
A NEW LEAF INC 868 E UNIVERSITY DR MESA, AZ 85203	86-0256667	501C3	10,000				SUPPLIES FOR DINNER
AGUA FRIA FOOD & CLOTHING BANK PO BOX 845 AVONDALE, AZ 85323	56-2515365	501C3	100,000				FACILITY IMPROVEMENT

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
AGUILA ELEMENTARY SCHOOL DISTRICT PO BOX 218 AGUILA, AZ 85320	86-6000507	GOV	15,000				SUMMER FEEDING SCHOO
AJO CENTER FOR SUSTAINABLE AGRICULT PO BOX 833 AJO, AZ 85321	38-3909062	501C3	10,000				PURCHASING BULK FOOD

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
ALCOHOLISM & ADDICTION ASSISTANCE A 4430 N 23RD AVE PHOENIX, AZ 85015	86-0267826	501C3	25,000				OPERATIONAL SUPPORT
ALL FAITH COMMUNITY SERVICES 214 S 5TH ST BUCKEYE, AZ 85326	54-2160931	501C3	100,000				OPERATIONAL 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
ANDRE HOUSE PO BOX 2014 PHOENIX, AZ 85001	86-0717841	501C3	14,000				FOOD & SUPPLIES FOR
ANTELOPE UNION HIGH SCHOOL 9168 S AVENUE 36E WELLTON, AZ 85356	51-0637391	GOV	16,150				SUMMER FEEDING SCHOO

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
APACHE JUCTION REACH OUT INC 575 N IDAHO RD STE 701 APACHE JUNCTION, AZ 85119	86-0454767	501C3	100,000				FREEZER & REFRIGERAT
ARIZONA BAPTIST CHILDREN'S SERVICES 2632 W AUGUSTA AVE PHOENIX, AZ 85051	86-6053028	501C3	25,000				FACILITY IMPROVEMENT

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
ASTER AGING INC 45 W UNIVERSITY DRIVE MESA, AZ 85201	94-2596075	501C3	10,000				FOOD, SUPPLIES & OPE
AZCEND PO BOX 591 CHANDLER, AZ 85244	86-0428780	501C3	50,000				PROGRAM EXPENSES AND

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
BANNER OLIVE BRANCH SENIOR CENTER 2901 N CENTRAL AVE STE 160 PHOENIX, AZ 85012	94-2545356	501C3	50,090				FREEZER AND REFRIGER
BLACK FAMILY AND CHILD SERVICES 1522 E SOUTHERN AVE PHOENIX, AZ 85040	86-0480412	501C3	25,000				EQUIPMENT, STORAGE A

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

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CAMERON ASSEMBLY OF GOD FOOD AID CE PO BOX 579 CAMERON, AZ 860200579	86-0441521	501C3	10,000				EQUIPMENT & FACILITY
CASA DE AMORARIZONA BAPTIST CHILDR 819 S MACDONALD MESA, AZ 85210	86-6053028	501C3	50,000				PALLET JACK AND WALK

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

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CASA GRANDE ELEMENTARY SCHOOL DISTR 220 W KORTSEN RD CASA GRANDE, AZ 85122	86-0942071	GOV	15,000				SUMMER FEEDING SCHOO
CENTER FOR ACADEMIC SUCCESS INC 900 CARMELITA DRIVE SIERRA VISTA, AZ 85635	86-0910328	501C3	15,000				SUMMER FEEDING SCHOO

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

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CHANDLER CARE CENTER 777 E GALVESTON ST CHANDLER AZ 852 CHANDLER, AZ 85225	81-5402137	501C3	25,000				SUPPLIES AND OPERATI
CHICANOS POR LA CAUSA - HEALTHY AGI 1617 NORTH 45TH AVE PHOENIX, AZ 85035	86-0227210	501C3	27,500				OPERATIONAL SUPPORT

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

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CHRIST THE KING HOPE MINISTRY 1551 E DANA AVE MESA, AZ 85204	30-0513890	501C3	50,000				SHELVING, OPERATIONA
CHURCH FOR THE NATIONS 6225 NORTH CENTRAL AVE PHOENIX, AZ 85012	75-3114849	501C3	25,000				EQUIPMENT & OPERATIO

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
CIVITAN FOUNDATION INC 12635 N 42ND ST PHOENIX, AZ 85032	23-7036797	501C3	10,000				FOOD AND OPERATIONAL
COLORADO RIVER UNION HSD PO BOX 21479 BULLHEAD CITY, AZ 86439	86-1027632	501C3	7,564				SUMMER FEEDING SCHOOL

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

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COMMUNITY FOOD BANK OF SOUTHERN ARI 3003 S COUNTRY CLUB RD TUCSON, AZ 85713	51-0192519	501C3	350,000				AGREEMENT BETWEEN CF
COMMUNITY PRESBYTERIAN CHURCH DEACO 800 W MAIN ST PAYSON, AZ 85541	86-0441745	501C3	10,000				FOOD & OPERATIONAL S

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

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COTTONWOOD-OAK CREEK SCHOOL DISTRICT 1 N WILLARD ST COTTONWOOD, AZ 86326	86-6000563	GOV	5,396				SUMMER FEEDING SCHOOL
COVE CHAPTER PO BOX 378 RED VALLEY, AZ 86544	86-0838859	501C3	8,000				FOOD & EQUIPMENT (UP

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

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CREIGHTON COMMUNITY FOUNDATION INC 3219 E CAMELBACK RD 376 PHOENIX, AZ 85016	46-2275877	501C3	25,000				FUND FAMILY FOOD BOX
DAMION GOSA MEMORIAL FOUNDATION 2102 E ALTA VISTA RD PHOENIX, AZ 85042	45-5441868	501C3	10,000				FOOD, AND DELIVERY

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

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DESERT MISSION FOOD BANK 9229 N 4TH ST PHOENIX, AZ 85020	86-0096941	501C3	213,184				FOOD, EQUIPMENT, PAY
DOUGLAS ARC PO BOX 252 DOUGLAS, AZ 85608	86-0147485	501C3	10,000				FOOD & OPERATIONAL S

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

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DUNCAN FOOD BANK PO BOX 247 DUNCAN, AZ 85534	55-0890595	501C3	10,000				FOOD & OPERATIONALS
EPWORTH UNITED METHODIST CHURCH 4802 N 59TH AVE PHOENIX, AZ 85033	86-6007719	501C3	15,200				FOOD & SUPPLIES

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

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EZRAS CHOLIM OF ARIZONA 7118 N 7TH ST PHOENIX, AZ 85020	47-5645369	501C3	15,000				FOOD & OPERATIONAL S
FBC STANFIELD FOOD PANTRY POB 250 STANFIELD, AZ 85172	82-5336682	501C3	25,000				WALK-IN FREEZER AND

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

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FIRST CHURCH OF THE NAZARENE PHOENI 19201 N 7TH AVE PHOENIX, AZ 85027	86-0214745	501C3	24,000				FOOD, STORAGE & OPER
FOOD BANK OF TOMBSTONE PO BOX 1102 TOMBSTONE, AZ 85638	30-0393505	501C3	6,500				FOOD & SUPPLIES

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

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FOOTHILLS FOOD BANK 6038 E HIDDEN VALLEY DR CAVE CREEK, AZ 85331	86-0619725	501C3	95,640				FACILITY UPGRADES FO
FOUNTAIN OF LIFEMISSION KITCHEN 6056 E BASELINE RD STE 137 MESA, AZ 85206	76-0718924	501C3	10,000				ELECTRICITY, EQUIPME

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

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FRIENDS FOR YUCCAYUCCA COMUNITY FO PO BOX 445 YUCCA, AZ 86438	27-2938171	501C3	10,000				AGENCY SUSTAINABILIT
FRIENDS OF ROBLES RANCH (FORR) PMB 136 10390 S SIERRITA MOUNTAIN TUCSON, AZ 85736	86-0846107	501C3	8,136				FOOD & SUPPLIES

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

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FRIENDS OF THE FOOD BANK QUARTZITE PO BOX 4051 QUARTZSITE, AZ 85359	47-3013722	501C3	10,000				FOOD & EQUIPMENT
GAP MINISTRIES 2861 FLOWING WELLS RD 161 TUCSON, AZ 85705	86-0999503	501C3	40,000				SUMMER FEEDING SCHOOL

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

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GATEWAY BIBLE CHURCH 1621 N PASADENA MESA, AZ 85201	86-0623192	501C3	25,000				EQUIPMENT & OPERATIO
GENERATION CHURCH ARIZONA 1010 S ELLSWORTH RD MESA, AZ 85208	86-0633920	501C3	62,500				VEHICLE MAINTENANCE,

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

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GILA COMMUNITY FOOD BANK P O BOX 1410 GLOBE, AZ 85502	86-0340833	501C3	8,800				HEATING & COOLING UN
GLOBE UNIFIED SCHOOL DISTRICT 460 N WILLOW ST GLOBE, AZ 85501	86-6000447	GOV	11,750				SUMMER FEEDING SCHOO

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

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GOSPEL RESCUE MISSION 4550 S PALO VERDE RD TUCSON, AZ 85714	86-6054088	501C3	10,000				EQUIPMENT (TILT SKIL
GRACE ST PAUL'S EPISCOPAL CHURCH 2331 E ADAMS ST TUCSON, AZ 85719	86-0677399	501C3	10,000				FOOD & SUPPLIES

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

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GRAND CANYON FOOD PANTRY INC PO BOX 1478 GRAND CANYON, AZ 86023	83-4318397	501C3	10,054				FACILITY SUPPORT & I
GUADALUPE COMMUNITY ACTION PROGRAM 9241 S AVENIDA DEL YAQUI GUADALUPE, AZ 85283	86-0297728	501C3	25,000				FOOD, SUPPLIES & EQU

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

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HARVEST COMPASSION CENTER EAST VALL 1120 SOUTH GILBERT ROAD GILBERT, AZ 85296	47-3437813	501C3	10,000				FREEZERS
HEBER OVERGAARD COMMUNITY FOOD BANK PO BOX 3058 OVERGAARD, AZ 85933	86-0674184	501C3	8,000				EQUIPMENT, FOOD, SUP

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

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HEDRICK HOUSE INC 1632 E HEDRICK DR TUCSON, AZ 85719	86-0328872	501C3	10,000				FOOD (SPECIFICALLY M
HOPE LIVES - VIVE LA ESPERANZA 1551 W VAN BUREN ST PHOENIX, AZ 85007	45-2300190	501C3	9,000				FOOD AND EQUIPMENT

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

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HOUSE OF REFUGE 6935 E WILLIAMS FIELD RD MESA, AZ 85212	86-0662244	501C3	25,000				FOOD & SUPPLIES FOR
IGLESIA DE CRISTO SIONZION CHURCH 12232 N 112TH AVE YOUNGTOWN, AZ 85379	86-0862426	501C3	20,000				EQUIPMENT & OPERATIO

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

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JOHN VOLKEN ACADEMY 26601 S VAL VISTA DR GILBERT, AZ 85298	91-2061674	501C3	15,000				FOOD & SUPPLIES
KINGMAN AREA FOOD BANK 2930 EAST BUTLER AVENUE PHOENIX, AZ 85020	86-0503686	501C3	10,000				FOOD & OPERATIONAL S

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LEND A HAND SENIOR ASSISTANCE PO BOX 41323 TUCSON, AZ 857171323	20-3851170	501C3	7,500				FOOD & SUPPLIES FRES
LOCAL FIRST ARIZONA FOUNDATION (GRA 407 E ROSEVELT ST PHOENIX, AZ 85004	26-1657951	501C3	12,000				REFRIGERATION AND ST

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

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LUTHERAN SOCIAL SERVICES OF THE SW 2502 E UNIVERSITY DR SUITE 125 PHOENIX, AZ 85034	86-0252302	501C3	30,000				VEHICLE PURCHASE, FO
MARICOPA COMMUNITY COLLEGES FOUNDAT 2419 W 14TH ST TEMPE, AZ 85281	86-0327449	501C3	10,000				FOOD & SUPPLIES

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

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MARICOPA PANTRY INC 4660 N HIDDEN VALLEY RD MARICOPA, AZ 85139	81-3081927	501C3	25,000				TRAILER, PALLET JACK
MATTHEW'S CROSSING FOOD BANK 1368 ARIZONA AVENUE SUITE 12 CHANDLER, AZ 85225	55-0896414	501C3	100,000				FOOD, FREEZER AND PA

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

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MERCY HILL CHURCH 745 W FILLMORE ST PHOENIX, AZ 85007	47-1579225	501C3	104,964				FOOD, SUPPLIES, OPER
MERCY HOUSING SOUTHWEST 3002 EAST CACTUS ROAD PHOENIX, AZ 85032	86-0743192	501C3	10,000				OPERATIONAL SUPPORT

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

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MITCHELL SWABACK CHARITIES INCHA 4744 E THUNDERBIRD ROAD STE 9 PHOENIX, AZ 85032	27-0250769	501C3	20,000				FOOD & SUPPLIES
MOBILE ELEMENTARY SCHOOL DISTRICT 42798 S 99TH AVE MARICOPA, AZ 85139	86-6000519	GOV	11,280				SUMMER FEEDING SCHOO

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

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MOHAWK VALLEY SCHOOL 5151 S AVE 39E ROLL, AZ 85347	38-3665381	GOV	5,216				SUMMER FEEDING SCHOOL
MURPHY SCHOOL DISTRICT 21 2615 W BUCKEYE ROAD PHOENIX, AZ 85009	86-6000491	GOV	24,800				FOOD & SUPPLIES FOR

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

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NACO ELEMENTARY SCHOOL DISTRICT 23 PO BOX 397 NACO, AZ 85620	86-0720043	GOV	14,114				SUMMER FEEDING SCHOOL
NALWOODI DENZHONE STRENGTH & BEAUTY PO BOX 758 GLOBE, AZ 85502	47-3741425	501C3	10,000				EQUIPMENT AND ELECTR

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

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NATIVE AMERICAN ADVANCEMENT FOUNDAT PO BOX 64877 TUCSON, AZ 857284877	45-2725155	501C3	10,644				SUMMER FEEDING SCHOO
NATIVE HEALTH 4041 NORTH CENTRAL AVENUE BUILDING PHOENIX, AZ 85012	94-2540194	501C3	25,000				FOOD & EQUIPMENT

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

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NEIGHBORHOOD MINISTRIES 1918 W VAN BUREN ST PHOENIX, AZ 85009	86-0809052	501C3	105,000				WALK-IN COOLER & FOO
NEW BEGINNINGS ASSEMBLY OF GOD 5121 W OCOTILLO RD GLENDALE, AZ 85301	44-0577787	501C3	25,000				FOOD, FREEZER & STOR

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

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NEW DIMENSIONS IN RECOVERY 530 E MCDOWELL RD PHOENIX, AZ 85004	27-2167017	501C3	21,000				FOOD AND RELIABLE TR
NEW HOPE COMMUNITY CENTER 7335 E BROADWAY RD MESA, AZ 85208	94-2598831	501C3	20,000				WALK-IN FREEZER & CO

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

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NORTHLAND FAMILY HELP CENTER 2535 N 4TH ST 506 FLAGSTAFF, AZ 86004	86-0351566	501C3	10,000				FOOD & OPERATIONAL S
NOURISH PHOENIX PO BOX 2225 PHOENIX, AZ 85002	86-0401223	501C3	175,000				FOOD AND DELIVERY VE

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

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OASIS FOOD BANK 208 SOUTH MCLANE RD PAYSON, AZ 85541	47-3689168	501C3	10,000				WALK IN COOLER
OASIS MINISTRIES 8485 E MCDONALD DR 214 SCOTTSDALE, AZ 85250	82-1166657	501C3	25,000				OPERATIONAL SUPPORT,

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

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OLD CONCHO COMMUNITY ASSISTANCE CEN PO BOX 50 CONCHO, AZ 85924	86-0907044	501C3	10,000				EQUIPMENT: FORKLIFT,
OLIVE BRANCH COMMUNITY OF HOPE 3546 E THOMAS ROAD PHOENIX, AZ 85018	81-2687081	501C3	24,000				FOOD, STORAGE & OPER

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

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OPEN HANDS OUTREACH PROGRAM 356 WEST COOLIDGE AVENUE COOLIDGE, AZ 85128	46-0948519	501C3	6,135				FOOD & SUPPLIES
PAZ DE CRISTO COMMUNITY CENTER 424 W BROADWAY RD MESA, AZ 85210	26-1669496	501C3	50,000				FOOD & OPERATIONAL S

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
PHOENIX RESCUE MISSION PO BOX 6708 PHOENIX, AZ 85005	86-6057771	501C3	125,000				MARICOPA COUNTY GRAN
PILGRIM REST FOUNDATION INC 1401 EAST JEFFERSON STREET PHOENIX, AZ 85034	86-0885862	501C3	25,000				FOOD & SUPPLIES

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
PIO DECIMO CENTER 848 S 7TH AVENUE TUCSON, AZ 85701	86-0100880	501C3	7,176				OPERATIONAL SUPPORT
PPEP INC 802 EAST 46TH STREET TUCSON, AZ 85713	84-3032948	501C3	10,000				FOOD, EQUIPMENT & OP

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PRESCOTT USD 926 HINMAN STREET PRESCOTT, AZ 86305	86-6000562	GOV	7,800				SUMMER FEEDING SCHOOL
PURE HEART CHURCH FOOD PANTRY 14240 N 43RD AVE GLENDALE, AZ 85306	86-0543988	501C3	50,000				FOOD, EQUIPMENT & OP

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RESOURCES VAIL FOOD BANK 13105 E COLOSSAL CAVE RD VAIL, AZ 85641	81-2592049	501C3	10,000				EQUIPMENT
RESURRECTION STREET MINISTRY INCOR 1135 E MAIN ST MESA, AZ 85203	55-0799053	501C3	15,000				FORKLIFT, FREEZER, R

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RIO VISTA CENTER INC 1431 E SOUTHERN AVE PHOENIX, AZ 85040	86-6053028	501C3	45,000				DELIVERY VEHICLE, EQ
SADDLE MOUNTAIN USD 38201 W INDIAN SCHOOL RD TONOPAH, AZ 85354	86-6000521	GOV	7,350				SUMMER FEEDING SCHOOL

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

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SAGUARO JANES CORPORATION POBOX 151 WITTMANN, AZ 85361	86-0476466	501C3	50,000				ROOF REPAIR AND OTHE
SALVATION ARMY GLENDALE CORPS 2707 E VAN BUREN ST PHOENIX, AZ 85008	94-1156347	501C3	25,000				EQUIPMENT, SUPPLIES

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

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SALVATION ARMY METRO PHOENIX HOLIDAY 2707 E VAN BUREN STREET PHOENIX, AZ 85008	94-1156347	501C3	25,000				FOOD & SUPPLIES HOLIDAY
SANTA CRUZ LUTHERAN CHURCH 6809 SOUTH CARDINAL AVENUE TUCSON, AZ 85746	86-0516606	501C3	7,500				SECURE STORAGE, CABI

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

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SANTO NINO CATHOLIC COMMUNITY 3206 W MELVIN STREET PHOENIX, AZ 85009	47-1795408	501C3	17,500				FREEZER, FOOD & SUPP
SHOW LOW UNIFIED SCHOOL DISTRICT 500 W OLD LINDEN RD SHOW LOW, AZ 85901	86-6005170	GOV	13,000				SUMMER FEEDING SCHOO

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

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SOCIETY OF ST VINCENT DE PAUL PO BOX 13600 PHOENIX, AZ 850023600	86-0096789	501C3	122,550				COMMERCIAL REFRIGERA
SOJOURNER CENTER PO BOX 20156 PHOENIX, AZ 85036	94-2465081	501C3	25,000				FOOD & SUPPLIES

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SOUTHERN ARIZONA AIDS FOUNDATION (S 375 S EUCLID AVE TUCSON, AZ 85719	86-0864100	501C3	10,000				FOOD & SUPPLIES
SOUTHSIDE PRESBYTERIAN CHURCH PO BOX 27640 TUCSON, AZ 85726	23-6393377	501C3	6,000				FOOD & SUPPLIES

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ST ANTHONY OF PADUA CATHOLIC SCHOO 501 E 2ND ST CASE GRANDE, AZ 85122	86-0134461	GOV	8,500				SUMMER FEEDING SCHOO
ST FRANCIS SHELTER PO BOX 65752 TUCSON, AZ 85728	83-2427128	501C3	10,000				OPERATIONAL SUPPORT

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

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ST MARY'S FOOD BANK ALLIANCE 3131 W THOMAS RD PHOENIX, AZ 85017		501C3	283,279				WALK-IN REFRIGERATOR
STAR - STAND TOGETHER AND RECOVER C 3003 N CENTRAL AVE SUITE 675 PHOENIX, AZ 85012	86-0586210	501C3	25,000				FOOD & SUPPLIES

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

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STREETS OF JOY 451 EAST 4TH PLACE MESA, AZ 85203	86-0820405	501C3	15,000				FREEZER & REFRIGERAT
SVDP ST JOSEPH CONFERENCE MAYER 16231 INDIAN BEND CORDES LAKES, AZ 86333	86-0096789	501C3	10,000				FOOD, FREEZER AND FA

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

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TEMPE COMMUNITY ACTION AGENCY 2146 E APACHE BLVD TEMPE, AZ 85281	86-0254820	501C3	50,000				PALLET JACK, FOOD &
TEPEYAC INC 5025 S CENTRAL AVENUE PHOENIX, AZ 85040	86-0906980	501C3	25,000				REFRIGERATED VEHICLE

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

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THE BRIDGE CHURCH 9339 S 183RD DR GOODYEAR, AZ 85338	44-0577787	501C3	6,000				FOOD & SUPPLIES
THE PAIDEIA ACADEMIES 7777 S 15TH TERRACE PHOENIX, AZ 85042	80-0728374	501C3	7,000				EQUIPMENT

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

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THE SALVATION ARMY - MESA CITADEL 241 EAST 6TH STREET MESA, AZ 85201	94-1156347	501C3	100,000				FOOD AND REFRIGERATO
THE SALVATION ARMY- APACHE JUNCTION PO BOX 5100 APACHE JUNCTION, AZ 85119	94-1156347	501C3	25,000				FOOD, OPERATIONAL SU

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

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TOPOCK ELEMENTARY SCHOOL DISTRICT 5083 TULE DR TOPOCK, AZ 86436	46-0474291	GOV	7,300				SUMMER FEEDING SCHOO
TSE SI ANI (LUPTON) CHAPTER PO BOX 403 LUPTON, AZ 86508	86-0809465	501C3	10,000				EQUIPMENT, SUPPLIES,

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

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UMOM NEW DAY CENTERS INC 3333 E VAN BUREN ST PHOENIX, AZ 85008	86-0521062	501C3	25,000				WALK-IN FREEZER AND
UNITED FOOD BANK 245 S NINA DR MESA, AZ 85210	86-0505273	501C3	200,000				NEW VEHICLES & FACIL

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

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VALLEY VIEW COMMUNITY FOOD ASSISTAN 10771 W PEORIA AVE SUN CITY, AZ 85351	77-0696933	501C3	20,000				FOOD & SUPPLIES
VESTED INTEREST COMMUNITY SERVICES 1900 W CHANDLER BLVD STE15-318 CHANDLER, AZ 85224	86-0833455	501C3	25,000				STORAGE AND OPERATIO

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

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VINEYARD GILBERT 601 S COOPER RD GILBERT, AZ 85233	86-0607313	501C3	7,000				FOOD AND EQUIPMENT.
WASTE NOT 1700 N GRANITE REEF RD SCOTTSDALE, AZ 85257	86-0650514	501C3	100,000				PALLET JACK, OPERATI

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

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WAY OF LIFE CHURCH 5802 S 15TH AVE PHOENIX, AZ 85041	86-0655205	501C3	25,000				FACILITY IMPROVEMENT
WESTCARE ARIZONA I INC 720 HANCOCK RD BULLHEAD CITY, AZ 86442	86-0968493	501C3	7,500				FOOD & OPERATIONAL S

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

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WORLD MINISTRIES 2004 E IRVINGTON ROAD 187 TUCSON, AZ 85714	86-0879832	501C3	6,000				FOOD, EQUIPMENT & OP
YUMA COMMUNITY FOOD BANK 2404 E 24TH ST YUMA, AZ 85365	86-0457836	501C3	42,340				WIOA PAYROLL REIMBUR

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

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YUMA ELEMENTARY SCHOOL DISTRICT 450 WEST 6TH ST YUMA, AZ 85364	01-0920614	GOV	14,700				SUMMER FEEDING SCHOOL

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

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020**Open to Public Inspection**

Department of the Treasury

Name of the organization

ARIZONA FOOD BANK NETWORK

Employer identification number

86-0507679

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 6	MEMBERS ARE FOOD BANKS IN ARIZONA THAT ARE MEMBERS IN GOOD STANDING WITH FEEDING AMERICA, OR AGENCIES OF FEEDING AMERICA MEMBERS IN THE STATE, AND MEET THE MEMBERSHIP CRITERIA STATED IN THE CURRENT BYLAWS OF THE ARIZONA FOOD BANK NETWORK.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 7A	ALL MEMBERS HAVE REPRESENTATION ON THE BOARD OF DIRECTORS AND HAVE THE AUTHORITY TO ELECT OTHER BOARD DIRECTORS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 7B	ALL BOARD DIRECTORS HAVE REPRESENTATION ON THE BOARD AND HAVE THE AUTHORITY TO BE PART OF THE DECISION MAKING PROCESS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	THE EXECUTIVE COMMITTEE REVIEWS THE FORM 990 AND THEN REPORTS THE SUBSTANCE OF THE 990 TO THE BOARD OF DIRECTORS. ALL BOARD MEMBERS THEN REVIEW THE FORM 990 PRIOR TO FINALIZING AND FILING WITH THE IRS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	A NEW CONFLICT OF INTEREST POLICY IS SIGNED ANNUALLY BY ALL MEMBERS OF THE BOARD AND REVIEWED BY THE BOARD OF DIRECTORS FOR CONFLICTS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	THE BOARD OF DIRECTORS COMPARES COMPENSATION FOR TOP MANAGEMENT TO SIMILAR ORGANIZATIONS. THE BOARD OF DIRECTORS ULTIMATELY APPROVES COMPENSATION LEVELS OF TOP MANAGEMENT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION DISCLOSES DOCUMENTS ON ITS WEBSITE AND UPON REQUEST.