

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

A For the 2020 calendar year, or tax year beginning **JUL 1, 2020** and ending **JUN 30, 2021**

| | | |
|---|---|--|
| B Check if applicable: | C Name of organization ALAMEDA COUNTY COMMUNITY FOOD BANK Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 2599 City or town, state or province, country, and ZIP or foreign postal code OAKLAND, CA 94614-0599 | D Employer identification number 94-2960297 |
| <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | E Telephone number (510) 635-3663 | G Gross receipts \$ 141,386,268. |
| | H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions | |
| | F Name and address of principal officer: REGI YOUNG SAME AS C ABOVE | |
| | I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 J Website: WWW.ACCFB.ORG K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other L Year of formation: 1985 M State of legal domicile: CA | |

Part I Summary

| | | | |
|------------|---|----------------------------------|---------------------|
| 1 | Briefly describe the organization's mission or most significant activities: ALAMEDA COUNTY COMMUNITY FOOD BANK PASSIONATELY PURSUES A HUNGER-FREE COMMUNITY. | | |
| 2 | Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. | | |
| 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 17 |
| 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 17 |
| 5 | Total number of individuals employed in calendar year 2020 (Part V, line 2a) | 5 | 166 |
| 6 | Total number of volunteers (estimate if necessary) | 6 | 4886 |
| 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0. |
| b | Net unrelated business taxable income from Form 990-T, Part I, line 11 | 7b | 0. |
| 8 | Contributions and grants (Part VIII, line 1h) | Prior Year | Current Year |
| 9 | Program service revenue (Part VIII, line 2g) | 100,940,547. | 138,559,049. |
| 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 556,622. | 447,514. |
| 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 236,712. | 175,407. |
| 12 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 2,375. | 115,563. |
| 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 101,736,256. | 139,297,533. |
| 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 57,044,374. | 73,976,765. |
| 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 0. | 0. |
| 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 10,740,169. | 13,426,489. |
| b | Total fundraising expenses (Part IX, column (D), line 25) 3,832,343. | 432,493. | 653,677. |
| 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 11,264,308. | 24,745,636. |
| 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 79,481,344. | 112,802,567. |
| 19 | Revenue less expenses. Subtract line 18 from line 12 | 22,254,912. | 26,494,966. |
| 20 | Total assets (Part X, line 16) | Beginning of Current Year | End of Year |
| 21 | Total liabilities (Part X, line 26) | 50,144,777. | 76,838,432. |
| 22 | Net assets or fund balances. Subtract line 21 from line 20 | 3,024,814. | 2,868,044. |
| | | 47,119,963. | 73,970,388. |

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 REGI YOUNG, EXECUTIVE DIRECTOR Type or print name and title | Date |
| Paid Preparer Use Only | Print/Type preparer's name LAUREN A. HAVERLOCK Preparer's signature LAUREN A. HAVERLOCK Date 02/15/22 Check if self-employed <input type="checkbox"/> PTIN P00545829 Firm's name MOSS ADAMS LLP Firm's EIN 91-0189318 Firm's address 21700 OXNARD STREET, SUITE 300 WOODLAND HILLS, CA 91367 Phone no. 310-477-0450 | |

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission:**ALAMEDA COUNTY COMMUNITY FOOD BANK PASSIONATELY PURSUES A HUNGER-FREE COMMUNITY.****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 \$ **98,908,042.** including grants of \$ **72,501,271.**) (Revenue \$ **447,513.**)

FOOD DISTRIBUTION - AS ALAMEDA COUNTY'S CENTRAL CLEARINGHOUSE FOR DONATED, SURPLUS, AND PURCHASED FOOD FOR NONPROFIT AGENCIES, THE FOOD BANK DISTRIBUTED 58 MILLION POUNDS OF FOOD IN THE 2021 FISCAL YEAR (39.5 MILLION POUNDS OF FOOD IN THE 2020 FISCAL YEAR). THE FOOD WAS PROCURED FROM PURCHASED FOOD, DONATIONS, THE GOVERNMENT, AND OUR FOOD RECOVERY PROGRAM. THE FOOD BANK PRIMARILY DISTRIBUTES THIS FOOD THROUGH A NETWORK OF MORE THAN 300 STRATEGICALLY LOCATED MEMBER AGENCIES. THE FOOD DISTRIBUTION PROGRAM ALSO INCLUDES PROGRAMS SUCH AS EMERGENCY FOOD DRIVE THRU DISTRIBUTIONS DUE TO THE ECONOMIC CRISIS RELATED TO THE PANDEMIC AND COLLEGE AND UNIVERSITY PROGRAMS. IN FISCAL YEAR 2021, THE FOOD BANK'S DISTRIBUTED POUNDS INCREASED BY 47% TO MEET CONTINUED HIGH NEED DURING THE PANDEMIC THROUGH DIRECT AND PARTNER DISTRIBUTIONS

4b (Code:) (Expenses \$ **2,203,832.** including grants of \$ **0.**) (Revenue \$ **0.**)

OUTREACH - MULTILINGUAL OUTREACH INCLUDES THE FOOD HELPLINE, FOODNOW.NET, COMIDAAHORA.NET, AND CALFRESH OUTREACH. SINCE 1994, CALLERS TO THE HELPLINE HAVE BEEN ABLE TO RECEIVE A SAME-DAY BAG OF FOOD, OR HOT MEAL AT A LOCATION IN OR NEAR THEIR NEIGHBORHOOD. THE FOOD BANK'S CALFRESH (FORMERLY KNOWN AS FOOD STAMPS AND KNOWN NATIONWIDE AS "SNAP") OUTREACH PROGRAM STAFF GUIDES ELIGIBLE COMMUNITY MEMBERS THROUGH THE APPLICATION PROCESS WORKING THROUGH THE ALAMEDA COUNTY SOCIAL SERVICES AGENCY. THE CALFRESH OUTREACH PROGRAM INCREASED APPLICATIONS IN 2021. APPLICATIONS SUBMITTED EQUALED APPROXIMATELY 8,300 DURING THE YEAR ENDED JUNE 30, 2021 (7,300 IN 2020).

4c (Code:) (Expenses \$ **3,470,183.** including grants of \$ **1,475,494.**) (Revenue \$ **0.**)

AGENCY SERVICES - THE FOOD BANK SUPPORTS ITS MEMBER AGENCIES IN MANAGING GOVERNMENT FOOD PROGRAMS, SECURING GOVERNMENT FUNDING, AND ADHERING TO RELATED CONTRACTS. THE FOOD BANK ASSISTS MEMBER AGENCIES IN FOOD SAFETY, EQUIPMENT AND VEHICLE PROCUREMENT, AND OTHER OPERATIONAL AND CAPACITY BUILDING FUNCTIONS.

NUTRITION PROGRAMS - THE FOOD BANK SUPPORTS ITS MEMBER AGENCIES AND CLIENTS THROUGH NUTRITION EDUCATION SERVICES, WHICH ARE DESIGNED TO HELP MEMBER AGENCIES AND CLIENTS UTILIZE THE WIDE VARIETY OF PRODUCTS, INCLUDING FARM FRESH FRUITS AND VEGETABLES, THAT MAY BE NEW TO CLIENTS. SERVICES INCLUDE EDUCATIONAL CLASSES, NUTRITION MATERIALS, RECIPES, COOKING CLASSES, AND TASTE TESTING DEMOS TO ENCOURAGE AND SUPPORT

4d Other program services (Describe on Schedule O.)(Expenses \$ **1,453,193.** including grants of \$ **0.**) (Revenue \$ **0.**)**4e** Total program service expenses **106,035,250.**Form **990** (2020)

Part IV Checklist of Required Schedules

| | Yes | No |
|---|--------------|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> | 1 X | |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? | 2 X | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | 3 | X |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> | 4 X | |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> | 5 | X |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> | 6 | X |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | 7 | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | 8 | X |
| 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> | 9 | X |
| 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> | 10 | X |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> | 11a X | |
| b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> | 11b | X |
| c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> | 11c | X |
| d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> | 11d | X |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> | 11e | X |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> | 11f X | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> | 12a X | |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> | 12b | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | 13 | X |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | X |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> | 14b | X |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> | 15 | X |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> | 16 | X |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> | 17 X | |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | 18 X | |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | 19 | X |
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | 20a | X |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | |
| 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | 21 X | |

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|---|------------|----|
| 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | 22 | X |
| 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | X |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> | 24a | X |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | |
| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | |
| 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | 25a | X |
| b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> | 25b | X |
| 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> | 26 | X |
| 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | 27 | X |
| 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): | | |
| a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> | 28a | X |
| b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> | 28b | X |
| c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | 29 | X |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | X |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | 31 | X |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | X |
| 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | X |
| 34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> | 34 | X |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | X |
| b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 35b | |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | X |
| 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | 37 | X |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | 38 | X |

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

| | Yes | No |
|---|-----------|----|
| 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 41 |
| b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 0 |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | X |

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

| | Yes | No |
|--|------------|----------|
| 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | | |
| 2a 166 | | |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | X | |
| Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? | | X |
| b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O | | |
| 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)? | | X |
| b If "Yes," enter the name of the foreign country | | |
| See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | |
| 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | X |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | X |
| c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | | |
| 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? | | X |
| b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | |
| 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? | X | |
| b If "Yes," did the organization notify the donor of the value of the goods or services provided? | X | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | X |
| 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? | | X |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | X |
| g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | | |
| h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | | |
| 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? | | |
| 9 Sponsoring organizations maintaining donor advised funds. | | |
| a Did the sponsoring organization make any taxable distributions under section 4966? | | |
| b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | |
| 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 | X |
| b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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 | X |
| 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 | X |
| If "Yes," complete Form 4720, Schedule O. | | |

Form 990 (2020)

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

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

Section A. Governing Body and Management

| | 1a | 1b | Yes | No |
|--|----|----|-----|----|
| 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. | 17 | | | |
| b Enter the number of voting members included on line 1a, above, who are independent | | 17 | | |
| 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | | | 2 | X |
| 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? | | | 3 | X |
| 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | | 4 | X |
| 5 Did the organization become aware during the year of a significant diversion of the organization's assets? | | | 5 | X |
| 6 Did the organization have members or stockholders? | | | 6 | X |
| 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | | | 7a | X |
| b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | | | 7b | X |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | |
| a The governing body? | | | 8a | X |
| b Each committee with authority to act on behalf of the governing body? | | | 8b | X |
| 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O | | | 9 | X |

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

| | Yes | No |
|---|-----|----|
| 10a Did the organization have local chapters, branches, or affiliates? | 10a | X |
| b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | |
| 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X |
| b Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | |
| 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X |
| b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X |
| c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | X |
| 13 Did the organization have a written whistleblower policy? | 13 | X |
| 14 Did the organization have a written document retention and destruction policy? | 14 | X |
| 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | |
| a The organization's CEO, Executive Director, or top management official | 15a | X |
| b Other officers or key employees of the organization | 15b | X |
| If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | |
| 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | X |
| b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | |

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **CA, CO, IL, MA, NJ, NV, NY, OH, OR, WA**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on 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 ►
AMY DONOVAN, CHIEF FINANCIAL OFFICER - (510) 635-3663
7900 EDGEWATER DRIVE, OAKLAND, CA 94621

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- 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 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) SUZAN BATESON EXECUTIVE DIRECTOR | 37.50 | | | X | | | | 337,469. | 0. | 38,186. |
| (2) AMY DONOVAN CHIEF FINANCIAL OFFICER | 37.50 | | | X | | | | 199,210. | 0. | 37,572. |
| (3) BARBARA DARROW BLAKE CHIEF DEVELOPMENT OFFICER | 37.50 | | | | X | | | 206,693. | 0. | 22,778. |
| (4) ERICK LOVDAHL DIRECTOR OF OPERATIONS | 37.50 | | | | | X | | 181,034. | 0. | 30,010. |
| (5) BRUCE ELLIOT CHIEF OPERATING OFFICER | 37.50 | | | | X | | | 174,959. | 0. | 27,223. |
| (6) ALLISON PRATT CHIEF OF PARTNERSHIPS AND STRATEGY | 37.50 | | | | X | | | 189,202. | 0. | 11,130. |
| (7) MINDY TRAN DIRECTOR OF FINANCE | 37.50 | | | | | X | | 154,031. | 0. | 36,134. |
| (8) MICHAEL ALTFEST DIRECTOR OF COMMUNITY ENGAGEMENT & M | 37.50 | | | | | X | | 145,000. | 0. | 29,693. |
| (9) SHANNON LEE-RUTHERFORD DIRECTOR OF ANNUAL FUND | 37.50 | | | | | X | | 144,245. | 0. | 26,993. |
| (10) MARK PHAGAN DIRECTOR OF IT | 37.50 | | | | | X | | 138,593. | 0. | 14,441. |
| (11) BETH STRACHAN BOARD CHAIR | 1.40 | X | | X | | | | 0. | 0. | 0. |
| (12) ROBERT ANDERSEN BOARD VICE CHAIR | 1.48 | X | | X | | | | 0. | 0. | 0. |
| (13) SAYED DARWISH BOARD SECRETARY | 0.92 | X | | X | | | | 0. | 0. | 0. |
| (14) ROBIN NEBEL BOARD TREASURER | 1.00 | X | | X | | | | 0. | 0. | 0. |
| (15) SARA WEBBER (THRU 10/5/20) BOARD NETWORK CHAIRPERSON | 0.08 | X | | | | | | 0. | 0. | 0. |
| (16) DAWN WILLOUGBY BOARD PAST CHAIR | 0.64 | X | | | | | | 0. | 0. | 0. |
| (17) CHRIS GAITHER BOARD DIRECTOR | 0.60 | 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 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 | | | |
| (18) CJ BHALLA BOARD DIRECTOR | 0.60 | X | | | | | | 0. | 0. | 0. |
| (19) KRISTA LUCCHESI BOARD DIRECTOR | 0.40 | X | | | | | | 0. | 0. | 0. |
| (20) CHUCK REINHARD BOARD DIRECTOR (THRU 12/31/20) | 0.13 | X | | | | | | 0. | 0. | 0. |
| (21) DANIELLE COLEMAN BOARD DIRECTOR | 0.94 | X | | | | | | 0. | 0. | 0. |
| (22) IAN CASTILLE BOARD DIRECTOR | 0.29 | X | | | | | | 0. | 0. | 0. |
| (23) RUBEN CANEDO BOARD DIRECTOR | 0.88 | X | | | | | | 0. | 0. | 0. |
| (24) TIFFANY BARBOUR BOARD DIRECTOR | 0.37 | X | | | | | | 0. | 0. | 0. |
| (25) ERIC REYNOLDS BOARD DIRECTOR | 0.42 | X | | | | | | 0. | 0. | 0. |
| (26) SHANNON DATCHER BOARD DIRECTOR | 0.56 | X | | | | | | 0. | 0. | 0. |
| 1b Subtotal | | | | | | | | 1,870,436. | 0. | 274,160. |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | 0. | 0. | 0. |
| d Total (add lines 1b and 1c) | | | | | | | | 1,870,436. | 0. | 274,160. |

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

13

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

| | Yes | No |
|---|-----|----|
| 3 | | X |
| 4 | X | |
| 5 | | X |

Section B. Independent Contractors

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

| (A) Name and business address | (B) Description of services | (C) Compensation |
|--|--|---------------------|
| BRAD CECIL & ASSOCIATES INC., 2115 ARLINGTON DOWNS RD, ARLINGTON, TX 76011 | DIRECT MAIL SERVICES | 477,904. |
| HILL & COMPANY COMMUNICATIONS 1290 B STREET, SUITE 201, HAYWARD, CA 94541 | ADVERTISING | 307,153. |
| MARINA SECURITY SERVICES, INC., 465 CALIFORNIA ST., SUITE 609, SAN FRANCISCO, CA 94102 | ON-SITE SECURITY | 207,112. |
| BC NETWORKS, 1735 TECHNOLOGY DR STE 820, SAN JOSE, CA 95110 | IT SERVICES - SUPPORT CENTER | 174,287. |
| PACIFIC TEMPO ELECTRIC P.O. BOX 666, ALAMEDA, CA 94501 | ELECTRICAL SERVICES - INDEPENDENT CONTRA | 133,660. |

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

5

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2020)

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

2020.05070 ALAMEDA COUNTY COMMUNITY 651583 1

Part VIII Statement of RevenueCheck 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 | 1 a Federated campaigns | 1a | | | | | |
| | b Membership dues | 1b | | | | | |
| | c Fundraising events | 1c | 953,535. | | | | |
| | d Related organizations | 1d | | | | | |
| | e Government grants (contributions) | 1e | 35,511,982. | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above ... | 1f | 102,093,532. | | | | |
| | g Noncash contributions included in lines 1a-1f | 1g | \$ 74,384,371. | | | | |
| | h Total. Add lines 1a-1f | | | | | | |
| Program Service Revenue | 2 a FOOD PURCHASE REVENUE | Business Code | 900099 | 632,332. | 632,332. | | |
| | b AGENCY FREE CREDITS | | 900099 | -184,818. | -184,818. | | |
| | c | | | | | | |
| | d | | | | | | |
| | e | | | | | | |
| | f All other program service revenue | | | | | | |
| | g Total. Add lines 2a-2f | | | | 447,514. | | |
| | Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | | 188,575. | | |
| 4 Income from investment of tax-exempt bond proceeds | | | | | | | |
| 5 Royalties | | | | | | | |
| 6 a Gross rents | | 6a | (i) Real (ii) Personal | | | | |
| b Less: rental expenses ... | | 6b | | | | | |
| c Rental income or (loss) | | 6c | | | | | |
| d Net rental income or (loss) | | | | | | | |
| 7 a Gross amount from sales of assets other than inventory | | 7a | (i) Securities (ii) Other | | | | |
| b Less: cost or other basis and sales expenses | | 7b | 1,999,366. 7,469. | | | | |
| c Gain or (loss) | | 7c | -5,699. -7,469. | | | | |
| d Net gain or (loss) | | | | | -13,168. | | -13,168. |
| 8 a Gross income from fundraising events (not including \$ 953,535. of contributions reported on line 1c). See Part IV, line 18 | | 8a | 81,900. | | | | |
| b Less: direct expenses | | 8b | 81,900. | | | | |
| c Net income or (loss) from fundraising events | | | | | 0. | | |
| 9 a Gross income from gaming activities. See Part IV, line 19 | | 9a | | | | | |
| b Less: direct expenses | 9b | | | | | | |
| c Net income or (loss) from gaming activities | | | | | | | |
| 10 a 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 | 11 a MISCELLANEOUS INCOME | Business Code | 900099 | 106,453. | | | 106,453. |
| | b RECYCLING INCOME | | 900099 | 9,110. | | | 9,110. |
| | c | | | | | | |
| | d All other revenue | | | | | | |
| | e Total. Add lines 11a-11d | | | | 115,563. | | |
| | 12 Total revenue. See instructions | | | | 139,297,533. | 447,514. | 0. |

Part IX Statement of Functional Expenses

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

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 | 73,976,765. | 73,976,765. | | |
| 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 | 1,269,365. | 568,728. | 405,749. | 294,888. |
| 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 | 9,096,733. | 6,357,060. | 1,476,050. | 1,263,623. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 358,584. | 253,507. | 53,368. | 51,709. |
| 9 Other employee benefits | 2,103,867. | 1,436,946. | 399,910. | 267,011. |
| 10 Payroll taxes | 597,940. | 399,583. | 108,006. | 90,351. |
| 11 Fees for services (nonemployees): | | | | |
| a Management | | | | |
| b Legal | 6,481. | | 6,481. | |
| c Accounting | 97,008. | | 94,780. | 2,228. |
| d Lobbying | 60,390. | 60,390. | | |
| e Professional fundraising services. See Part IV, line 17 | 653,677. | | | 653,677. |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.) | 800,100. | 563,799. | 82,762. | 153,539. |
| 12 Advertising and promotion | 553,875. | 453,396. | | 100,479. |
| 13 Office expenses | 363,689. | 197,131. | 128,913. | 37,645. |
| 14 Information technology | 606,380. | 285,798. | 86,632. | 233,950. |
| 15 Royalties | | | | |
| 16 Occupancy | 474,715. | 455,563. | 10,224. | 8,928. |
| 17 Travel | 2,690. | 1,319. | 1,346. | 25. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 41,785. | 21,777. | 8,299. | 11,709. |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 755,943. | 685,497. | 36,973. | 33,473. |
| 23 Insurance | 74,472. | 41,217. | 31,017. | 2,238. |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a FOOD HANDLING AND PURCH | 18,553,137. | 18,553,137. | | |
| b VEHICLES | 1,070,069. | 1,070,069. | | |
| c RESOURCE DEVELOPMENT | 566,866. | 21,367. | | 545,499. |
| d EQUIPMENT | 366,938. | 366,938. | | |
| e All other expenses | 351,098. | 265,263. | 4,464. | 81,371. |
| 25 Total functional expenses. Add lines 1 through 24e | 112,802,567. | 106,035,250. | 2,934,974. | 3,832,343. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. | | | | |

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

| | | (A) Beginning of year | | (B) End of year |
|--|--|--------------------------|------------|--------------------|
| Assets | 1 Cash - non-interest-bearing | 22,269,005. | 1 | 1,182,697. |
| | 2 Savings and temporary cash investments | 5,396,057. | 2 | 49,651,409. |
| | 3 Pledges and grants receivable, net | 3,832,023. | 3 | 4,674,154. |
| | 4 Accounts receivable, net | 92,819. | 4 | 94,233. |
| | 5 Loans and other receivables from 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 | 2,090,325. | 8 | 3,603,230. |
| | 9 Prepaid expenses and deferred charges | 290,199. | 9 | 512,305. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 18,090,544. | | |
| | b Less: accumulated depreciation | 10b 7,428,447. | | |
| | 11 Investments - publicly traded securities | 10,296,668. | 10c | 10,662,097. |
| | 12 Investments - other securities. See Part IV, line 11 | 5,877,681. | 11 | 6,458,307. |
| | 13 Investments - program-related. See Part IV, line 11 | | 12 | |
| | 14 Intangible assets | | 13 | |
| | 15 Other assets. See Part IV, line 11 | | 14 | |
| 16 Total assets. Add lines 1 through 15 (must equal line 33) | 50,144,777. | 15 | | |
| Liabilities | 17 Accounts payable and accrued expenses | 1,500,383. | 16 | 76,838,432. |
| | 18 Grants payable | 1,500,383. | 17 | 2,828,037. |
| | 19 Deferred revenue | 57,331. | 18 | |
| | 20 Tax-exempt bond liabilities | | 19 | 40,007. |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 20 | |
| | 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 | | 21 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 22 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | 1,467,100. | 23 | |
| | 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 | | 24 | 0. |
| | 26 Total liabilities. Add lines 17 through 25 | 3,024,814. | 25 | |
| 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. | | 26 | 2,868,044. |
| | 27 Net assets without donor restrictions | 44,677,032. | 27 | 72,634,582. |
| | 28 Net assets with donor restrictions | 2,442,931. | 28 | 1,335,806. |
| | 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 | 47,119,963. | 32 | 73,970,388. |
| | 33 Total liabilities and net assets/fund balances | 50,144,777. | 33 | 76,838,432. |

Form 990 (2020)

Part XI Reconciliation of Net AssetsCheck 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 | 139,297,533. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 112,802,567. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 26,494,966. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 47,119,963. |
| 5 | Net unrealized gains (losses) on investments | 5 | 355,459. |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | 73,970,388. |

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

| | Yes | No |
|---|-----------|----------|
| 1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | |
| 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2a | X |
| 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2b | X |
| 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 on Schedule O. | 2c | X |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____ | 3a | X |
| 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 on Schedule O and describe any steps taken to undergo such audits _____ | 3b | X |

Form 990 (2020)

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

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

Section A. Public Support

| 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.") | 74664042. | 64180423. | 65790541. | 100943197 | 138559049 | 444137252 |
| 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 | 74664042. | 64180423. | 65790541. | 100943197 | 138559049 | 444137252 |
| 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) | | | | | | 127994439 |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 316142813 |

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 | 74664042. | 64180423. | 65790541. | 100943197 | 138559049 | 444137252 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 150,909. | 176,054. | 241,927. | 240,453. | 188,575. | 997,918. |
| 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.) | 12,176. | 9,991. | 5,347. | 2,372. | 115,563. | 145,449. |
| 11 Total support. Add lines 7 through 10 | | | | | | 445280619 |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | 3,101,994. |
| 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 | | | | | | ► <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | |
|---|-----------|---------------------------------------|
| 14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) | 14 | 71.00 % |
| 15 Public support percentage from 2019 Schedule A, Part II, line 14 | 15 | 66.13 % |
| 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 | | ► <input checked="" type="checkbox"/> |
| 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 | | ► <input type="checkbox"/> |
| 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 | | ► <input type="checkbox"/> |
| 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 | | ► <input type="checkbox"/> |
| 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 | | ► <input type="checkbox"/> |

Schedule A (Form 990 or 990-EZ) 2020

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 in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <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? | | |
| 11a | | |
| b A family member of a person described in line 11a above? | | |
| 11b | | |
| c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI . | | |
| 11c | | |

Section B. Type I Supporting Organizations

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

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)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | | |
| 1 | | |

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? | | |
| 1 | | |
| 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | | |
| 2 | | |
| 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. | | |
| 3 | | |

Section E. Type III Functionally Integrated Supporting Organizations

| | Yes | No |
|---|-----|----|
| 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 governmental 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? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | | |
| 2a | | |
| b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in 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. | | |
| 2b | | |
| 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? If "Yes" or "No" provide details in Part VI . | | |
| 3a | | |
| b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | | |
| 3b | | |

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): | | |
| 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 0.85 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). | | |

Schedule A (Form 990 or 990-EZ) 2020

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 (prior IRS approval required - <i>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 3e | | | |
| 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. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result 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 | | | |

Schedule A (Form 990 or 990-EZ) 2020

Supplemental Information.

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

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

- Attach to Form 990, Form 990-EZ, or Form 990-PF.
► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

Employer identification number

ALAMEDA COUNTY COMMUNITY FOOD BANK

94-2960297

Organization type (check one):

Filers of:**Section:**

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

ALAMEDA COUNTY COMMUNITY FOOD BANK**94-2960297****Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|-----------------------------------|----------------------------|---|
| <u>1</u> | | \$ <u>32,531,863.</u> | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| <u>2</u> | | \$ <u>6,509,557.</u> | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| <u>3</u> | | \$ <u>5,958,602.</u> | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| | | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

ALAMEDA COUNTY COMMUNITY FOOD BANK

94-2960297

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
|------------------------------|--|---|----------------------|
| 1 | FOOD DONATIONS | \$ 32,531,863. | 06/30/21 |
| 2 | FOOD DONATIONS | \$ 6,509,557. | 06/30/21 |
| 3 | FOOD DONATIONS | \$ 5,958,602. | 06/30/21 |
| | | \$ | |
| | | \$ | |
| | | \$ | |

Name of organization

Employer identification number

ALAMEDA COUNTY COMMUNITY FOOD BANK**94-2960297****Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ► \$ _____

Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------------|---|-----------------|--|
| | | | |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |

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 organization

ALAMEDA COUNTY COMMUNITY FOOD BANK

Employer identification number

94-2960297

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ▶ \$

3 Volunteer hours for political campaign activities

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-. |
|----------|-------------|---------|---|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

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 (grassroots lobbying) | | 2,979. | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) | | 61,993. | |
| c Total lobbying expenditures (add lines 1a and 1b) | | 64,972. | |
| d Other exempt purpose expenditures | | 109839592. | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | 109904564. | |
| f Lobbying nontaxable amount. Enter the amount from the following table in both columns. | | 1,000,000. | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | |
| Not over \$500,000 | 20% of the amount on line 1e. | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | | |
| Over \$17,000,000 | \$1,000,000. | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | 250,000. | |
| h Subtract line 1g from line 1a. If zero or less, enter -0- | | 0. | |
| i Subtract line 1f from line 1c. If zero or less, enter -0- | | 0. | |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

4-Year Averaging Period Under Section 501(h)

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

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

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|---|------------|------------|------------|------------|------------|
| Calendar year (or fiscal year beginning in) | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) Total |
| 2a Lobbying nontaxable amount | 1,000,000. | 1,000,000. | 1,000,000. | 1,000,000. | 4,000,000. |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 6,000,000. |
| c Total lobbying expenditures | 54,852. | 51,291. | 57,473. | 64,972. | 228,588. |
| d Grassroots nontaxable amount | 250,000. | 250,000. | 250,000. | 250,000. | 1,000,000. |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,500,000. |
| f Grassroots lobbying expenditures | 9,724. | 5,649. | 11,419. | 2,979. | 29,771. |

Schedule C (Form 990 or 990-EZ) 2020

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ **Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**▶ **Attach to Form 990.**▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020**Open to Public
Inspection****Name of the organization**

ALAMEDA COUNTY COMMUNITY FOOD BANK

Employer identification number

94-2960297

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a 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 Tax 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

▶ \$

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

Schedule D (Form 990) 2020

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 make significant use of its collection items (check all that apply):

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

| | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |

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 on Part XIII ☐

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☐ _____ %

b Permanent endowment ☐ _____ %

c 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 line 3a(ii), are the related organizations listed as required on Schedule R? ☐

| | Yes | No |
|--------|-----|----|
| 3a(i) | | |
| 3a(ii) | | |
| 3b | | |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | 2,540,575. | | 2,540,575. |
| b Buildings | | 11,659,540. | 5,111,862. | 6,547,678. |
| c Leasehold improvements | | | | |
| d Equipment | | 1,944,019. | 1,376,893. | 567,126. |
| e Other | | 1,946,410. | 939,692. | 1,006,718. |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) | | | | 10,662,097. |

Schedule D (Form 990) 2020

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

| 1. (a) Description of liability | (b) Book value |
|---|----------------|
| (1) Federal income taxes | |
| (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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☒

Schedule D (Form 990) 2020

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 | 139,797,573. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains (losses) on investments | 2a | 355,459. |
| b | Donated services and use of facilities | 2b | |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIII.) | 2d | 144,582. |
| e | Add lines 2a through 2d | 2e | 500,041. |
| 3 | Subtract line 2e from line 1 | 3 | 139,297,532. |
| 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 | |
| b | Other (Describe in Part XIII.) | 4b | |
| c | Add lines 4a and 4b | 4c | 0. |
| 5 | Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.) | 5 | 139,297,532. |

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 | 112,947,148. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | 2a | |
| b | Prior year adjustments | 2b | |
| c | Other losses | 2c | |
| d | Other (Describe in Part XIII.) | 2d | 144,582. |
| e | Add lines 2a through 2d | 2e | 144,582. |
| 3 | Subtract line 2e from line 1 | 3 | 112,802,566. |
| 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 | 0. |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.) | 5 | 112,802,566. |

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.

PART X, LINE 2:

THE FOOD BANK IS A QUALIFIED ORGANIZATION EXEMPT FROM FEDERAL INCOME TAXES AND STATE FRANCHISE TAXES UNDER 501(C)(3) OF THE INTERNAL REVENUE CODE ("IRC") AND 23701D OF THE CALIFORNIA REVENUE AND TAXATION CODE, RESPECTIVELY.

U.S. GAAP REQUIRES THE FOOD BANK MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE FOOD BANK AND RECOGNIZE A TAX LIABILITY (OR ASSET), IF THE FOOD BANK HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY INTERNAL REVENUE SERVICE.

THE FOOD BANK IS NOT AWARE OF ANY UNCERTAIN TAX POSITIONS AS OF JUNE 30,

Part XIII Supplemental Information *(continued)*

2021 AND 2020.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

| | |
|---------------------------------------|----------|
| FUNDRAISING EVENTS DIRECT EXPENSES | 81,900. |
| IN-KIND SERVICES | 62,682. |
| TOTAL TO SCHEDULE D, PART XI, LINE 2D | 144,582. |

PART XII, LINE 2D - OTHER ADJUSTMENTS:

| | |
|--|----------|
| FUNDRAISING EVENTS DIRECT EXPENSES | 81,900. |
| IN-KIND SERVICES | 62,682. |
| TOTAL TO SCHEDULE D, PART XII, LINE 2D | 144,582. |

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

| | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events (add col. (a) through col. (c)) |
|-----------------|---|----------------------------------|--------------|------------------------|--|
| | | SAVOR THE SEASON (event type) | (event type) | NONE (total number) | |
| Revenue | 1 Gross receipts | 1,035,435. | | | 1,035,435. |
| | 2 Less: Contributions | 953,535. | | | 953,535. |
| | 3 Gross income (line 1 minus line 2) | 81,900. | | | 81,900. |
| Direct Expenses | 4 Cash prizes | | | | |
| | 5 Noncash prizes | | | | |
| | 6 Rent/facility costs | | | | |
| | 7 Food and beverages | | | | |
| | 8 Entertainment | 5,000. | | | 5,000. |
| | 9 Other direct expenses | 76,900. | | | 76,900. |
| | 10 Direct expense summary. Add lines 4 through 9 in column (d) | | | | 81,900. |
| | 11 Net income summary. Subtract line 10 from line 3, column (d) | | | | 0. |

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

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

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

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

Name ► _____

Address ► _____

- 16** Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer☐ Employee☐ Independent contractor

- 17** Mandatory distributions:

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

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

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

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: BRAD CECIL & ASSOCIATES INC.

(I) ADDRESS OF FUNDRAISER: 2115 ARLINGTON DOWNS RD, ARLINGTON, TX 76001

(I) NAME OF FUNDRAISER: CHRISTINA SUNLEY

(I) ADDRESS OF FUNDRAISER: 254 RIDGEWAY AVE, OAKLAND, CA 94611

(I) NAME OF FUNDRAISER: GATEWAY COMMUNICATIONS

Part IV Supplemental Information *(continued)*

(I) ADDRESS OF FUNDRAISER: 16805 NE MASON COURT, PORTLAND, OR 97230

Blank lines for supplemental information.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization

ALAMEDA COUNTY COMMUNITY FOOD BANK

Employer identification number

94-2960297

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|---|----------------|--|---------------------------------|--|--|--|--|
| AIDS PROJECT OF THE EAST BAY 8400 ENTERPRISE WAY OAKLAND, CA 94621 | 94-3061583 | 501(C)(3) | 0. | 33,071. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ALAMEDA FOOD BANK 1900 THAU WAY ALAMEDA, CA 94501 | 94-2878910 | 501(C)(3) | 0. | 3,627,852. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ALLEN TEMPLE BAPTIST CHURCH 1350 86TH AVE. OAKLAND, CA 94621 | 94-1747125 | 501(C)(3) | 0. | 201,165. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ALLEN TEMPLE BAPTIST CHURCH - USDA 8500 A ST. OAKLAND, CA 94621 | 94-1747125 | 501(C)(3) | 0. | 22,414. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ARIEL OUTREACH MISSION 2549 RITCHIE ST. OAKLAND, CA 94605 | 31-1687353 | 501(C)(3) | 0. | 6,113. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BAY AREA AMERICAN INDIAN COUNCIL 581 BEVERLY AVE. SAN LEANDRO, CA 94577 | 94-3248408 | 501(C)(3) | 0. | 6,111. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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

220.

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

0.

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

Schedule I (Form 990) 2020

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

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

| (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| BERKELEY FOOD PANTRY 1600 SACRAMENTO ST. BERKELEY, CA 94702 | 94-6003752 | 501(C)(3) | 0. | 776,502. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BOSS 711 HARRISON ST. BERKELEY, CA 94710 | 51-0173390 | 501(C)(3) | 0. | 63,782. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BOSS- HAYWARD 258 WEST A ST. HAYWARD, CA 94541 | 51-0173390 | 501(C)(3) | 0. | 39,478. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BROOKINS AME CHURCH - PANTRY 2201 73RD AVE. OAKLAND, CA 94605 | 53-0204696 | 501(C)(3) | 0. | 193,263. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CENTER OF HOPE 8425 MACARTHUR BLVD. OAKLAND, CA 94605 | 24-7426174 | 501(C)(3) | 0. | 53,375. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CENTRO DE SERVICIOS RESOURCE CENTER - 33750 6TH ST. - UNION CITY, CA 94587 | 94-2489691 | 501(C)(3) | 0. | 642,261. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CHRYSALIS C/O HORIZON SVCS. 3845 TELEGRAPH AVE. OAKLAND, CA 94609 | 94-2365021 | 501(C)(3) | 0. | 7,920. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CITY TEAM MINISTRIES-SK 722 WASHINGTON ST. OAKLAND, CA 94607 | 94-1501265 | 501(C)(3) | 0. | 214,594. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CITY TEAM MINISTRIES - SK 722 WASHINGTON ST. OAKLAND, CA 94607 | 94-1501265 | 501(C)(3) | 0. | 24,791. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

| (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|---|
| CITY TEAM MINISTRIES- TURNING POINT - 6112 HILTON ST. - OAKLAND, CA 94605 | 94-1501265 | 501(C)(3) | 0. | 25,805. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CITY TEAM MINISTRIES - BERKELEY 2407 DANA ST. BERKELEY, CA 94704 | 94-1501265 | 501(C)(3) | 0. | 18,151. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CITY TEAM MINISTRIES - HAYWARD 98 SCHUYLKILL AVE. HAYWARD, CA 94544 | 94-1501265 | 501(C)(3) | 0. | 20,797. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CITY TEAM MINISTRIES - SAN LEANDRO 14634 BANCROFT AVE. SAN LEANDRO, CA 94578 | 94-1501265 | 501(C)(3) | 0. | 12,620. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| COMMUNITY REFORMED CHURCH 457 CAPISTRANO DR. OAKLAND, CA 94603 | 94-2941595 | 501(C)(3) | 0. | 18,104. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CORNERSTONE BAPTIST CHURCH 3535 38TH AVE. OAKLAND, CA 94619 | 94-2692374 | 501(C)(3) | 0. | 162,795. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CRONIN HOUSE 2595 DEPORT ROAD HAYWARD, CA 94545 | 94-2365021 | 501(C)(3) | 0. | 17,625. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CURA, INC. CONFIDENTIAL FREMONT, CA 94536 | 23-7226897 | 501(C)(3) | 0. | 153,765. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| DAVIS STREET COMMUNITY CENTER 3081 TEAGARDEN ST. SAN LEANDRO, CA 94577 | 94-3121699 | 501(C)(3) | 0. | 518,344. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

| (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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| DOROTHY DAY HOUSE P.O. BOX 12701 BERKELEY, CA 94712 | 94-3158511 | 501(C)(3) | 0. | 103,542. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| DOWNS MEMORIAL UNITED METHODIST CHURCH - 6026 IDAHO ST. - OAKLAND, CA 94608 | 91-2016331 | 501(C)(3) | 0. | 72,473. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EAST BAY ASIAN YOUTH CENTER 2025 E. 12TH ST. OAKLAND, CA 94606 | 94-2925799 | 501(C)(3) | 0. | 147,589. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EAST BAY ASIAN YOUTH CENTER - ROOSEVELT - 1926 E 19TH ST. - OAKLAND, CA 94606 | 94-2925799 | 501(C)(3) | 0. | 29,619. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EBCRP-PROJECT PRIDE, A LIFELONG MEDICAL GROUP - 2545 SAN PABLO AVE. - OAKLAND, CA 94612 | 94-2502308 | 501(C)(3) | 0. | 20,671. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CIVICORPS 101 MYRTLE ST. OAKLAND, CA 94607 | 94-2941068 | 501(C)(3) | 0. | 25,292. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EAST BAY FOOD NOT BOMBS 2700 DWIGHT WAY BERKELEY, CA 94704 | 27-3466777 | 501(C)(3) | 0. | 40,158. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BRIGHTER BEGINNINGS 2595 INTERNATIONAL BLVD. OAKLAND, CA 94601 | 94-2949749 | 501(C)(3) | 0. | 6,734. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EAST BAY TEEN CHALLENGE 2221 90TH AVE. OAKLAND, CA 94603 | 77-0123596 | 501(C)(3) | 0. | 38,995. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

| (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| EAST OAKLAND BOXING ASSOCIATION 816 98TH AVE. OAKLAND, CA 94603 | 94-2967981 | 501(C)(3) | 0. | 146,295. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EAST OAKLAND COMMUNITY PROJECT 7515 INTERNATIONAL BLVD. OAKLAND, CA 94621 | 94-3078181 | 501(C)(3) | 0. | 65,955. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EAST OAKLAND MULTI-PURPOSE SENIOR CENTER - 9255 EDES AVE. - OAKLAND, CA 94603 | 94-3092404 | 501(C)(3) | 0. | 1,346,885. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EAST OAKLAND SWITCHBOARD 1909 - 73RD AVE. OAKLAND, CA 94621 | 94-1716346 | 501(C)(3) | 0. | 6,607. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SAN LORENZO FAMILY HELP CENTER 100 HACIENDA AVE. SAN LORENZO, CA 94580 | 30-0554038 | 501(C)(3) | 0. | 1,237,338. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| COMMUNITY OF GRACE/ ELMHURST BAPTIST CHURCH - 380 ELMHURST ST. - HAYWARD, CA 94544 | 94-1384655 | 501(C)(3) | 0. | 38,791. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| PROJECT OPEN HAND FOOD BANK 1921 SAN PABLO AVE. OAKLAND, CA 94612 | 94-3023551 | 501(C)(3) | 0. | 65,673. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| PROJECT OUTREACH 1360 107TH AVE. OAKLAND, CA 94603 | 94-3048904 | 501(C)(3) | 0. | 197,351. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| REFUGEE COMMUNITY FOOD PANTRY 2001 73RD AVE. OAKLAND, CA 94621 | 95-4242822 | 501(C)(3) | 0. | 35,020. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

| (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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| RESOURCE ENVIRONMENT FOR UNDERPRIVILEGED GE, THE - 4321 TOMPKINS AVE. - OAKLAND, CA 94619 | 94-3357670 | 501(C)(3) | 0. | 5,297. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SALVATION ARMY 601 WEBSTER ST. OAKLAND, CA 94607 | 94-1156347 | 501(C)(3) | 0. | 17,361. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SALVATION ARMY-HAYWARD 430 A ST. HAYWARD, CA 94541 | 94-1156347 | 501(C)(3) | 0. | 168,074. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SALVATION ARMY-TRI CITIES 36700 NEWARK BLVD. NEWARK, CA 94560 | 94-1156347 | 501(C)(3) | 0. | 171,916. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SALVATION ARMY-GARDEN ST -S 2794 GARDEN ST. OAKLAND, CA 94619 | 94-1156347 | 501(C)(3) | 0. | 252,494. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SALVATION ARMY-GARDEN ST -P 2794 GARDEN ST. OAKLAND, CA 94619 | 94-1156347 | 501(C)(3) | 0. | 13,548. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SEVENTH STEP FOUNDATION 475 MEDFORD AVE. HAYWARD, CA 94541 | 94-1696338 | 501(C)(3) | 0. | 35,984. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ROBERT ALLEN MERCY HOUSE NCCN 3300 SCHOOL ST. OAKLAND, CA 94602 | 94-6123474 | 501(C)(3) | 0. | 1,863,461. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SOLIDARITY FELLOWSHIP 34401 BLACKSTONE WAY FREMONT, CA 94555 | 94-3002415 | 501(C)(3) | 0. | 18,844. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| SOUTH BERKELEY COMMUNITY CHURCH 1802 FAIRVIEW ST. BERKELEY, CA 94703 | 94-6109091 | 501(C)(3) | 0. | 10,149. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SOUTH HAYWARD PARISH 27287 PATRICK AVE. HAYWARD, CA 94544 | 94-2250549 | 501(C)(3) | 0. | 1,969,094. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ELMHURST PRESBYTERIAN CHURCH 1332 98TH AVE. OAKLAND, CA 94603 | 23-6393770 | 501(C)(3) | 0. | 107,211. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ECAP 3610 SAN PABLO AVE. EMERYVILLE, CA 94608 | 46-1492603 | 501(C)(3) | 0. | 3,579,167. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LA FAMILIA - EL CHANTE 425 VERNON ST OAKLAND, CA 94610 | 94-2297155 | 501(C)(3) | 0. | 36,250. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. ANNE CHURCH 32223 CABELLO STREET UNION CITY, CA 94587 | 94-1156493 | 501(C)(3) | 0. | 109,332. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. BERNARD CATHOLIC CHURCH 1620 62ND AVE. OAKLAND, CA 94621 | 53-0196617 | 501(C)(3) | 0. | 429,521. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. JAMES EPISCOPAL CHURCH 1540 12TH AVE. OAKLAND, CA 94606 | 94-1156840 | 501(C)(3) | 0. | 9,933. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. MARKS EPISCOPAL CHURCH 2300 BANCROFT WAY BERKELEY, CA 94704 | 94-1156837 | 501(C)(3) | 0. | 24,278. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

| (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| ST. MARY'S CENTER 925 BROCKHURST ST. OAKLAND, CA 94608 | 68-0172229 | 501(C)(3) | 0. | 31,119. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. PAUL AME CHURCH 2024 ASHBY AVE. BERKELEY, CA 94703 | 94-3088329 | 501(C)(3) | 0. | 31,142. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. VINCENT'S DAY HOME, INC 1086 8TH ST. OAKLAND, CA 94607 | 94-2195766 | 501(C)(3) | 0. | 54,418. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. VINCENT DE PAUL 675 23RD ST. OAKLAND, CA 94612 | 94-1156493 | 501(C)(3) | 0. | 425,251. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| TABERNACLE MISSIONARY BAPTIST CHURCH - 10115 EDES AVE. - OAKLAND, CA 94603 | 94-2733380 | 501(C)(3) | 0. | 72,992. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| TELEGRAPH COMMUNITY CENTER 5316 TELEGRAPH AVE. OAKLAND, CA 94609 | 94-1347058 | 501(C)(3) | 0. | 526,263. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| TRI-CITY VOLUNTEERS 37350 JOSEPH ST. FREMONT, CA 94536 | 94-2217681 | 501(C)(3) | 0. | 2,819,567. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| TRI-VALLEY HAVEN FOOD PANTRY 418 JUNCTION AVE. LIVERMORE, CA 94550 | 94-2462357 | 501(C)(3) | 0. | 578,241. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| UNITY OUTREACH MINISTRIES 1909 100TH AVE. OAKLAND, CA 94603 | 47-0942044 | 501(C)(3) | 0. | 34,310. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

| (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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|---|
| COMMUNITY OUTREACH PANTRY FOR EMERGENCIES (COPE) - 2735 MACARTHUR BLVD. - OAKLAND, CA 94602 | 23-6393377 | 501(C)(3) | 0. | 44,361. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| TURN ON TO AMERICA 80 HAMILTON PL. OAKLAND, CA 94612 | 23-7110313 | 501(C)(3) | 0. | 24,280. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| VICTORY OUTREACH-MEN'S HOME 621 SCHAFER ROAD HAYWARD, CA 94544 | 95-2788459 | 501(C)(3) | 0. | 17,269. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| VICTORY OUTREACH-WOMEN'S HOME 16051 VIA TOLEDO SAN LORENZO, CA 94580 | 95-2788489 | 501(C)(3) | 0. | 6,796. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| GRACE BAPTIST CHURCH OAKLAND 705 98TH AVE. OAKLAND, CA 94621 | 47-3650356 | 501(C)(3) | 0. | 772,181. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| GREATER ST. PAUL CHURCH 1827 MARTIN LUTHER KING JR. WY OAKLAND, CA 94612 | 94-3234348 | 501(C)(3) | 0. | 22,781. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| HALCYON BAPTIST CHURCH 2860 HALCYON DR. SAN LEANDRO, CA 94578 | 94-1347058 | 501(C)(3) | 0. | 570,075. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| HARBOR HOUSE 1811 11TH AVE. OAKLAND, CA 94606 | 23-7133986 | 501(C)(3) | 0. | 119,646. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| HAYWARD SEVENTH DAY ADVENTIST CHURCH - 26400 GADING RD. - HAYWARD, CA 94544 | 52-0643036 | 501(C)(3) | 0. | 53,445. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|---|
| HIV EDUCATION AND PREVENTION PROJECT, THE -SK - 5323 FOOTHILL BLVD. - OAKLAND, CA 94601 | 94-3205535 | 501(C)(3) | 0. | 50,997. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| HIV EDUCATION AND PREVENTION PROJECT - SK - 5323 FOOTHILL BLVD. - OAKLAND, CA 94601 | 94-3205535 | 501(C)(3) | 0. | 15,158. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| VIOLA BLYTHE COMMUNITY SERVICE CENTER - 37365 ASH ST. - NEWARK, CA 94560 | 94-3122617 | 501(C)(3) | 0. | 479,830. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| WINGS OF LOVE MARANATHA MINISTRIES 7007 MACARTHUR BLVD. OAKLAND, CA 94605 | 68-0171700 | 501(C)(3) | 0. | 39,864. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| WOMEN ON THE WAY RECOVERY CENTER HOME - 20424 HAVILAND AVE. - HAYWARD, CA 94541 | 94-3296354 | 501(C)(3) | 0. | 6,840. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| WOMEN'S DAYTIME DROP IN CENTER 2218 ACTON ST. BERKELEY, CA 94702 | 94-3123986 | 501(C)(3) | 0. | 52,979. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| INTERFAITH SHARING INC. 678 ENOS WAY LIVERMORE, CA 94551 | 94-3195165 | 501(C)(3) | 0. | 215,470. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BAY COMMUNITY FELLOWSHIP - AKA -WORLD IMPACT INC - 1015 CAMPBELL ST. - OAKLAND, CA 94607 | 94-1399289 | 501(C)(3) | 0. | 159,096. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| YOUTH LEARNING AND CULTURAL INSTITUTE - 1642 FRUITVALE AVE. - OAKLAND, CA 94601 | 94-3251258 | 501(C)(3) | 0. | 21,295. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|---|
| ZION'S TABERNACLE CHURCH OF GOD IN CHRIST - 2147 E. 15TH AVE. - OAKLAND, CA 94606 | 56-3626908 | 501(C)(3) | 0. | 576,388. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LAKE MERRITT UNITED METHODIST CHURCH - 1330 LAKESHORE AVE. - OAKLAND, CA 94606 | 94-1156847 | 501(C)(3) | 0. | 135,035. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LIBERTY HILL BAPTIST CHURCH 997 UNIVERSITY AVE. BERKELEY, CA 94710 | 94-6108675 | 501(C)(3) | 0. | 97,178. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LOS ROBLES APARTMENTS 32300 ALMADEN BLVD. UNION CITY, CA 94587 | 68-0371125 | 501(C)(3) | 0. | 59,242. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LOVE TEMPLE MISSIONARY BAPTIST CHURCH - 8401 BIRCH ST. - OAKLAND, CA 94621 | 94-3129755 | 501(C)(3) | 0. | 9,621. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| M.A. CENTER MOTHER'S KITCHEN 1802 FAIRVIEW ST. BERKELEY, CA 94703 | 94-3044871 | 501(C)(3) | 0. | 21,303. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| MCGEE AVENUE BAPTIST CHURCH 1640 STUART ST. BERKELEY, CA 94703 | 13-5563018 | 501(C)(3) | 0. | 11,442. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| MERCY BROWN BAG PROGRAM 3431 FOOTHILL BLVD. OAKLAND, CA 94601 | 94-1156579 | 501(C)(3) | 0. | 3,091,145. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| MT. ZION MISSIONARY BAPTIST CHURCH 1203 WILLOW ST. OAKLAND, CA 94607 | 95-0162894 | 501(C)(3) | 0. | 75,770. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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| OAKLAND CATHOLIC WORKER - SK 4848 INTERNATIONAL BLVD. OAKLAND, CA 94601 | 94-3088087 | 501(C)(3) | 0. | 358,164. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| OAKLAND CATHOLIC WORKER - SK 4848 INTERNATIONAL BLVD. OAKLAND, CA 94601 | 94-3088087 | 501(C)(3) | 0. | 833,184. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| OAKLAND CATHOLIC WORKER-GH 56TH 1460 56TH AVE. OAKLAND, CA 94621 | 94-3088087 | 501(C)(3) | 0. | 10,888. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| OPERATION DIGNITY, INC. - DIGNITY COMMONS - 2350 RAINBOW CT. - ALAMEDA, CA 94501 | 94-3176007 | 501(C)(3) | 0. | 20,584. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| OPERATION DIGNITY INC. - HOUSE OF DIGNITY - 585 8TH ST - OAKLAND, CA 94607 | 94-3176007 | 501(C)(3) | 0. | 22,084. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| TRI-CITIES COMMUNITY DEVELOPMENT CENTER - 37620 FILBERT ST. - NEWARK, CA 94560 | 94-3218156 | 501(C)(3) | 0. | 150,562. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| OPEN HEART KITCHEN OF LIVERMORE 5150 CASE AVE. PLEASANTON, CA 94558 | 94-3396038 | 501(C)(3) | 0. | 146,064. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| PRESCOTT JOSEPH CENTER 920 PERALTA ST. OAKLAND, CA 94607 | 94-3248535 | 501(C)(3) | 0. | 3,221,032. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| FAITH LUTHERAN CHURCH OF CASTRO VALLEY - 20080 REDWOOD RD. - CASTRO VALLEY, CA 94552 | 41-1568278 | 501(C)(3) | 0. | 131,819. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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| HAYWARD SPANISH SDA CHURCH 22117 MEEKLAND AVE. HAYWARD, CA 94541 | 52-0643036 | 501(C)(3) | 0. | 1,600,161. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| MARYLIN AVE. SCHOOL / 18 REASONS 800 MARYLIN AVE. LIVERMORE, CA 94550 | 45-3059509 | 501(C)(3) | 0. | 286,456. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| RESTORATION CHURCH OF GOD 2101 47TH AVE. OAKLAND, CA 94601 | 62-0484177 | 501(C)(3) | 0. | 142,800. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| MULTICULTURAL INSTITUTE INC 1920 7TH ST. BERKELEY, CA 94710 | 91-1823468 | 501(C)(3) | 0. | 64,384. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| HOPE 4 THE HEART 22035 MEEKLAND AVE. HAYWARD, CA 94541 | 26-3857074 | 501(C)(3) | 0. | 4,359,883. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| MERCY HOUSING-EDEN HOUSE APARTMENTS - 1601 165TH AVE. #115 - SAN LEANDRO, CA 94578 | 68-0117340 | 501(C)(3) | 0. | 24,106. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| REDWOOD GARDENS 2951 DERBY ST. BERKELEY, CA 94705 | 94-2892231 | 501(C)(3) | 0. | 25,499. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| GREATER NEW LIFE COMMUNITY CHURCH 1124 72ND AVE. OAKLAND, CA 94621 | 94-3023512 | 501(C)(3) | 0. | 16,557. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ACTS FULL GOSPEL 1034 66TH AVE. OAKLAND, CA 94621 | 94-2936983 | 501(C)(3) | 0. | 101,031. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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| SECOND CHANCE, INC. - CENTRAL 6519 CENTRAL AVE. NEWARK, CA 94560 | 94-2152575 | 501(C)(3) | 0. | 15,608. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| UNION CITY APOSTOLIC CHURCH 33700 ALVARADO NILES RD UNION, CA 94587 | 95-6087955 | 501(C)(3) | 0. | 43,150. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| B.A.C.C/IMBC 2043 E 21ST ST. OAKLAND, CA 94606 | 94-3292168 | 501(C)(3) | 0. | 9,530. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| HORIZON SERVICES 2035 FAIRMONT DR. SAN LEANDRO, CA 94578 | 94-2365021 | 501(C)(3) | 0. | 62,656. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ALL SAINTS EPISCOPAL CHURCH 911 DOWLING BLVD SAN LEANDRO, CA 94577 | 94-1156840 | 501(C)(3) | 0. | 272,234. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| MATILDA CLEVELAND HOUSING PRO (WITH EOCP) - 8314 MACARTHUR BLVD. - OAKLAND, CA 94605 | 94-3078181 | 501(C)(3) | 0. | 13,045. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| OAKLAND YOUTH ASPIRE 1651 ADELINE ST. OAKLAND, CA 94607 | 26-2314554 | 501(C)(3) | 0. | 30,743. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LUTHERAN CHURCH OF THE CROSS-SK 1744 UNIVERSITY AVE. BERKELEY, CA 94703 | 41-1568278 | 501(C)(3) | 0. | 16,217. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LUTHERAN CHURCH OF THE CROSS 1744 UNIVERSITY AVE BERKELEY, CA 94703 | 41-1568278 | 501(C)(3) | 0. | 11,830. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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| REDWOOD CHAPEL COMMUNITY CHURCH 19300 REDWOOD RD. CASTRO VALLEY, CA 94546 | 94-1375798 | 501(C)(3) | 0. | 28,611. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. ELIZABETH FOOD PANTRY 1500 34TH AVE. OAKLAND, CA 94601 | 94-2986482 | 501(C)(3) | 0. | 103,019. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| STREET LEVEL HEALTH PROJECT 3125 EAST 15TH ST. OAKLAND, CA 94601 | 56-2324355 | 501(C)(3) | 0. | 85,561. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SAFE PASSAGES-UNITED FOR SUCCESS 2101 35TH AVE. OAKLAND, CA 94601 | 20-4535835 | 501(C)(3) | 0. | 106,711. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SAFE PASSAGES-COLISEUM COLLEGE PREPARATORY ACADEMY - 1390 66TH AVE. - OAKLAND, CA 94621 | 20-4535835 | 501(C)(3) | 0. | 69,760. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SAFE PASSAGES-GREENLEAF ELEMENTARY 1240 18TH ST. OAKLAND, CA 94607 | 20-4535835 | 501(C)(3) | 0. | 25,056. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SAFE PASSAGES -BRIDGE ACADEMY 750 INTERNATIONAL BLVD OAKLAND, CA 94606 | 20-4535835 | 501(C)(3) | 0. | 30,227. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SAFE PASSAGES-BABY LEARNING 250 FRANK H OGAWA PLAZA OAKLAND, CA 94612 | 20-4535835 | 501(C)(3) | 0. | 271,000. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SAFE PASSAGES -AMERICORPS-VISTA 250 FRANK H OGAWA PLAZA OAKLAND, CA 94612 | 20-4535835 | 501(C)(3) | 0. | 57,168. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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| SAFE PASSAGES - LAUREL ELEMENTARY 250 FRANK H OGAWA PLAZA OAKLAND, CA 94612 | 20-4535835 | 501(C)(3) | 0. | 54,767. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| FOOD 2 GO CASTRO VALLEY UNITED METHODIST - 19806 WISTERIA ST. - CASTRO VALLEY, CA 94645 | 94-6050062 | 501(C)(3) | 0. | 247,809. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ARSOLA'S HOUSE 7801 EDGEWATER DR. OAKLAND, CA 94621 | 38-3783546 | 501(C)(3) | 0. | 680,135. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SOLID ROCK COGIC 5970 THORNTON AVE. NEWARK, CA 94560 | 82-1208801 | 501(C)(3) | 0. | 313,586. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| THE WELL COMMUNITY OUTREACH 2333 NISSEN DR. LIVERMORE, CA 94551 | 76-0722001 | 501(C)(3) | 0. | 714,965. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| KINGDOM BUILDERS DREAM CENTER OAKLAND - 7901 OAKPORT ST. - OAKLAND, CA 94621 | 94-3388342 | 501(C)(3) | 0. | 121,252. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| THE OAKLAND FOOD PANTRY 1666 7TH ST. OAKLAND, CA 94607 | 80-0708680 | 501(C)(3) | 0. | 10,899. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CHRISTIAN TABERNACLE CHURCH 9330 WALNUT ST. OAKLAND, CA 94603 | 94-2964929 | 501(C)(3) | 0. | 105,318. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| INTERTRIBAL FRIENDSHIP HOUSE 523 INTERNATIONAL BLVD. OAKLAND, CA 94606 | 94-3255070 | 501(C)(3) | 0. | 24,975. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

| (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| PARADISE BAPTIST CHURCH 9670 EMPIRE ROAD OAKLAND, CA 94603 | 13-5563018 | 501(C)(3) | 0. | 96,263. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| GOD'S RESTING PLACE 1651 ADELINE ST & 18TH ST. PARKING OAKLAND, CA 94607 | 73-1675990 | 501(C)(3) | 0. | 208,312. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| FAITH VISIONARY SERVICES 2680 64TH AVE. OAKLAND, CA 94605 | 94-3399880 | 501(C)(3) | 0. | 624,302. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BROTHERS AND SISTERS IN CHRIST (BASIC) - 1221 PACIFIC AVE - SAN LEANDRO, CA 94577 | 74-3126475 | 501(C)(3) | 0. | 71,489. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| FAMILY BRIDGES 270 13TH ST. OAKLAND, CA 94612 | 94-1725018 | 501(C)(3) | 0. | 141,972. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EDEN UNITED CHURCH OF CHRIST - FOOD FOR CHERRYLAND - 21455 BIRCH ST. - HAYWARD, CA 94541 | 94-6109091 | 501(C)(3) | 0. | 222,216. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. LAWRENCE O'TOOLE 3725 HIGH ST. OAKLAND, CA 94619 | 53-0196617 | 501(C)(3) | 0. | 24,364. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| GOOD SHEPHERD EPISCOPAL CHURCH -SK 1823 9TH ST. BERKELEY, CA 94710 | 94-1156840 | 501(C)(3) | 0. | 103,594. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| GOOD SHEPHERD EPISCOPAL CHURCH 1823 9TH ST. BERKELEY, CA 94710 | 94-1156840 | 501(C)(3) | 0. | 23,563. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| FOOD OF GOD 4 PEOPLE OF GOD 424 MONTE VISTA AVE. OAKLAND, CA 94611 | 27-5348142 | 501(C)(3) | 0. | 114,462. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| VIETNAMESE AMERICAN COMMUNITY CENTER - EAST BAY - 655 INTERNATIONAL BLVD. - OAKLAND, CA 94606 | 20-5358946 | 501(C)(3) | 0. | 25,436. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CAA-AGNES MEMORIAL 2372 INTERNATIONAL BLVD. OAKLAND, CA 94601 | 94-2575541 | 501(C)(3) | 0. | 56,767. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| THE CHURCH BY THE SIDE OF THE ROAD 2108 RUSSELL ST. BERKELEY, CA 94705 | 94-6089524 | 501(C)(3) | 0. | 8,864. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SAN LEANDRO COMMUNITY FOOD PANTRY 14235 BANCROFT AVE SAN LEANDRO, CA 94578 | 23-6393377 | 501(C)(3) | 0. | 683,080. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| FACES OF THE EAST BAY 4130 TELEGRAPH AVE. OAKLAND, CA 94609 | 94-3311246 | 501(C)(3) | 0. | 78,342. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| 13TH AVENUE CHURCH OF CHRIST 1300 E. 24TH ST. OAKLAND, CA 94606 | 94-3057533 | 501(C)(3) | 0. | 52,481. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. AUGUSTINE'S EPISCOPAL CHURCH 525 29TH ST. OAKLAND, CA 94609 | 94-1156840 | 501(C)(3) | 0. | 11,868. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. PAUL'S EPISCOPAL CHURCH 114 MONTECITO AVE. OAKLAND, CA 94610 | 94-1156840 | 501(C)(3) | 0. | 28,085. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|---|
| PROPHETIC TEACHER INTERCESSORY CHURCH - 16490 KENT AVE. - SAN LORENZO, CA 94580 | 45-2912840 | 501(C)(3) | 0. | 141,686. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EAST BAY KOREAN AMERICAN SENIOR SERVICES CENTER - 1723 TELEGRAPH AVE. - OAKLAND, CA 94612 | 94-2813695 | 501(C)(3) | 0. | 34,444. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| MISSION FOR THE HOMELESS, INC. 4700 LINCOLN AVE. OAKLAND, CA 94602 | 46-0674496 | 501(C)(3) | 0. | 87,636. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| HAVENSCOURT COMMUNITY CHURCH 1444 HAVENSCOURT BLVD. OAKLAND, CA 94621 | 94-1422475 | 501(C)(3) | 0. | 54,995. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| FAME-RAINBOW RECREATION CENTER 5800 INTERNATIONAL BLVD. OAKLAND, CA 94621 | 23-7010426 | 501(C)(3) | 0. | 677,859. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| FAME-FIRST AME 530 37TH ST. OAKLAND, CA 94609 | 94-2751052 | 501(C)(3) | 0. | 141,400. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| UNITED SMITH MEMORIAL CME CHURCH 28105 MISSION BLVD. HAYWARD, CA 94544 | 58-1381196 | 501(C)(3) | 0. | 48,103. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CHURCH OF THE LIVING GOD PG&T 819 37TH ST. OAKLAND, CA 94608 | 23-7017127 | 501(C)(3) | 0. | 16,643. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CROSSSTREETS NEIGHBORHOOD SERVICES - P - 20600 JOHN DR. - CASTRO VALLEY, CA 94546 | 94-2221906 | 501(C)(3) | 0. | 318,341. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|---|
| Y.A. FLUNDER FOUNDATION/WORD OF MOUTH FEEDING PRGM - 8400 ENTERPRISE WAY, BOX #125 - OAKLAND, CA 94621 | 32-0095516 | 501(C)(3) | 0. | 137,220. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LAST PHASE LOAVES AND FISH FOOD PROGRAM - 1060 32ND ST. - OAKLAND, CA 94608 | 30-0367748 | 501(C)(3) | 0. | 2,029,642. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| PHILLIPS TEMPLE CME CHURCH 3332 ADELINE ST. BERKELEY, CA 94703 | 58-1381196 | 501(C)(3) | 0. | 156,544. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BERKELEY FOOD NETWORK 1925 9TH ST. BERKELEY, CA 94710 | 81-4942342 | 501(C)(3) | 0. | 1,568,588. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BACS-HEDCO WELLNESS CENTER 590 B ST. HAYWARD, CA 94541 | 94-1708069 | 501(C)(3) | 0. | 5,214. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BACS-SOUTH COUNTY WELLNESS CENTER 40963 GRIMMER BLVD FREMONT, CA 94538 | 94-1708069 | 501(C)(3) | 0. | 30,471. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CHRISTIAN CHURCH HOMES - HARRISON ST. SR. HOUSING - 1633 HARRISON ST. - OAKLAND, CA 94612 | 94-6077407 | 501(C)(3) | 0. | 37,862. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CHRISTIAN CHURCH HOMES - SOUTHLAKE TOWER - 1501 ALICE STREET - OAKLAND, CA 94612 | 94-6077407 | 501(C)(3) | 0. | 7,060. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CHRISTIAN CHURCH HOMES - JL TERRACE - 250 EAST 12TH AVE - OAKLAND, CA 94606 | 94-6077407 | 501(C)(3) | 0. | 35,707. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| BUDDHIST TZU CHI FOUNDATION-SK 620 INTERNATIONAL BLVD. OAKLAND, CA 94606 | 94-2952782 | 501(C)(3) | 0. | 14,504. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| RESURRECTION GREEK ORTHODOX CHURCH 20104 CENTER STREET CASTRO VALLEY, CA 94546 | 13-1632516 | 501(C)(3) | 0. | 89,043. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CHURCH OF THE TRUE LIVING GOD 24150 HESPERIAN BLVD. HAYWARD, CA 94545 | 46-3160413 | 501(C)(3) | 0. | 27,106. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| PROJECT ACCESS INC - KELLER PLAZA 5321 TELEGRAPH AVE. OAKLAND, CA 94609 | 33-0834635 | 501(C)(3) | 0. | 9,265. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| PROJECT ACCESS INC - AVE VISTA 460 GRAND AVE OAKLAND, CA 94610 | 33-0834635 | 501(C)(3) | 0. | 11,376. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| PROJECT ACCESS INC - TASSAFARONGA 930 84TH AVE OAKLAND, CA 94621 | 33-0834635 | 501(C)(3) | 0. | 10,687. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| PROJECT ACCESS INC - GLENVIEW APARTMENTS - 4400 CENTRAL AVE. - FREMONT, CA 94536 | 33-0834635 | 501(C)(3) | 0. | 6,067. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| PRAY 4 U EVANGELISTIC PRAYER OUTREACH MINISTRIES - 2672 FRUITVALE AVE. - OAKLAND, CA 94601 | 41-2149728 | 501(C)(3) | 0. | 87,413. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LIFELONG MEDICAL CARE EAST OAKLAND 10700 MACARTHUR BLVD., STE. 14A OAKLAND, CA 94605 | 94-2502308 | 501(C)(3) | 0. | 28,857. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| THE NEW BRIDGE FOUNDATION INC. 1820 SCENIC AVE. BERKELEY, CA 94709 | 23-7131209 | 501(C)(3) | 0. | 31,021. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| SVDP - MISSION SAN JOSE FREMONT 43148 MISSION BLVD. FREMONT, CA 94539 | 94-1156493 | 501(C)(3) | 0. | 30,028. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LIFELONG TRUST HEALTH CLINIC 386 14TH STREET OAKLAND, CA 94612 | 94-2502308 | 501(C)(3) | 0. | 39,467. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| W.O.R.L.D. 389 30TH ST. OAKLAND, CA 94609 | 94-3177103 | 501(C)(3) | 0. | 24,111. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| OAKLAND HOUSING AUTHORITY FOUNDATION-UNION - 935 UNION ST. - OAKLAND, CA 94607 | 94-2950836 | 501(C)(3) | 0. | 6,756. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| OAKLAND HOUSING AUTHORITY FOUNDATION-65TH - 1327 65TH AVE - OAKLAND, CA 94621 | 94-2950836 | 501(C)(3) | 0. | 12,404. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| OAKLAND HOUSING AUTHORITY FOUNDATION - FOOTHILL - 6946 FOORHILL BLC - OAKLAND, CA 94605 | 94-2950836 | 501(C)(3) | 0. | 26,558. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| OAKLAND HOUSING AUTHORITY FOUNDATION - CAMPBELL - 1670 8TH ST - OAKLAND, CA 94607 | 94-2950836 | 501(C)(3) | 0. | 31,323. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LAO FAMILY COMMUNITY DEVELOPMENT INC. - 2325 E. 12TH ST. - OAKLAND, CA 94601 | 94-3115164 | 501(C)(3) | 0. | 54,344. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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| EAST OAKLAND BURRITO ROLL 9925 INTERNATIONAL BLVD. OAKLAND, CA 94603 | 46-1323531 | 501(C)(3) | 0. | 55,800. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. RAYMOND CHURCH 11555 SHANNON AVE. DUBLIN, CA 94568 | 53-0196617 | 501(C)(3) | 0. | 93,458. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| DESTINY ARTS CENTER 970 GRACE AVE. OAKLAND, CA 94608 | 94-3176726 | 501(C)(3) | 0. | 5,298. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| GOD'S HOUSE MINISTRY 7801 EDGEWATER DR. OAKLAND, CA 94621 | 47-1966742 | 501(C)(3) | 0. | 192,631. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| REACH ASHLAND YOUTH CENTER 16335 EAST 14TH STREET SAN LEANDRO, CA 94578 | 94-6000501 | 501(C)(3) | 0. | 113,510. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BAY AREA STREET PANTRY 4805 FOOTHILL BLVD. OAKLAND, CA 94601 | 82-3839049 | 501(C)(3) | 0. | 87,051. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| LIFELONG ADELINE ST. RECUPERATIVE CARE - 2730 ADELINE ST. - OAKLAND, CA 94607 | 94-2502308 | 501(C)(3) | 0. | 40,452. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| HILLSIDE ALLIANCE CHURCH 944 CENTRAL BLVD HAYWARD, CA 94542 | 23-7180948 | 501(C)(3) | 0. | 40,870. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| MUSLIM COMMUNITY CENTER-EAST BAY 5724 WEST LAS POSITAS BLVD., #300 PLEASANTON, CA 94558 | 20-8085421 | 501(C)(3) | 0. | 198,535. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| LIFE CHANGE BAPTIST CHURCH 13067 AURORA DR. SAN LEANDRO, CA 94577 | 94-1347058 | 501(C)(3) | 0. | 21,101. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ARISE HIGH SCHOOL 330 E 12TH ST #205 OAKLAND, CA 94601 | 20-8887944 | 501(C)(3) | 0. | 18,960. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| BAY AREA ERITREAN TASKFORCE PANTRY 780 54TH ST. OAKLAND, CA 94609 | 68-0361470 | 501(C)(3) | 0. | 50,536. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| HOMIES EMPOWERMENT 7631 MACARTHUR BLVD OAKLAND, CA 94605 | 46-1323531 | 501(C)(3) | 0. | 293,612. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| UNITY COUNCIL 330 E 12TH ST. SUITE 201 OAKLAND, CA 94601 | 94-1670490 | 501(C)(3) | 0. | 28,440. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| EAST OAKLAND COLLECTIVE 7800 MACARTHUR BLVD OAKLAND, CA 94605 | 94-3078181 | 501(C)(3) | 0. | 64,096. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| ST. MICHAEL CATHOLIC CHURCH 458 MAPLE ST. LIVERMORE, CA 94550 | 94-1156733 | 501(C)(3) | 0. | 118,906. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| YOUTH UPRISING (YU)- PANTRY 8711 MACARTHUR BLVD. OAKLAND, CA 94605 | 20-3321544 | 501(C)(3) | 0. | 5,235. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| PROCTOR ELEMENTARY PARENT TEACHER ASSOCIATION PTA - 17520 REDWOOD RD - CASTRO VALLEY, CA 94546 | 94-3076135 | 501(C)(3) | 0. | 32,629. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |

Schedule I (Form 990)

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|---|
| GREATER GRACE COMMUNITY SERVICES 10701 INTERNATIONAL BLVD OAKLAND, CA 94603 | 84-2285338 | 501(C)(3) | 0. | 31,058. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CHAVEZ - PERALTA HACIENDA 2465 34TH AVE. OAKLAND, CA 94601 | 94-3317442 | 501(C)(3) | 0. | 56,287. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| WORD ASSEMBLY 1445 23RD AVE OAKLAND, CA 94606 | 27-4648021 | 501(C)(3) | 0. | 11,376. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT |
| CONTRA COSTA COUNTY FOOD BANK P.O. BOX 271966 CONCORD, CA 94527 | 94-2418054 | 501(C)(3) | 0. | 21,043. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | TRANSFERRED FOOD TO OTHER FOOD BANK TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER |
| REDWOOD EMPIRE FOOD BANK 3990 BRICKWAY BLVD SANTA ROSA, CA 95403 | 68-0121855 | 501(C)(3) | 0. | 56,254. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | TRANSFERRED FOOD TO OTHER FOOD BANK TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER |
| SECOND HARVEST OF SILICON VALLEY FOOD BANK - 750 CURTNER AVE - SAN JOSE, CA 95125 | 94-2614101 | 501(C)(3) | 0. | 72,635. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | TRANSFERRED FOOD TO OTHER FOOD BANK TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER |
| COMMUNITY FOOD BANK OF SAN BENITO COUNTY - 1133 SAN FELIPE RD - HOLISTER, CA 95023 | 77-0306871 | 501(C)(3) | 0. | 18,725. | FEEDING AMERICA-FMV | FOOD & EQUIPMENT | TRANSFERRED FOOD TO OTHER FOOD BANK TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER |
| | | | | | | | |
| | | | | | | | |

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 non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|---------------------------------------|
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Part IV

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

PART I, LINE 2:

FOOD SAFETY TRAINING IS MANDATED AND PROVIDED ANNUALLY. COMPLIANCE IS
TRACKED ELECTRONICALLY.

EVERY MEMBER AGENCY RECEIVES AN ON-SITE MONITORING VISIT AT LEAST ONCE
EVERY TWO YEARS THAT INCLUDES THE ASSESSMENT/TRAINING OF SAFE FOOD HANDLING
PRACTICES, PROGRAM COMPLIANCE, NONDISCRIMINATION AND ETHICAL TREATMENT OF
CLIENTS, RECEIPTS FOR FOOD RECEIVED, AND DISTRIBUTION RECORDS.

Part IV Supplemental Information

ALL AGENCIES ARE SCREENED AND MONITORED WHEN JOINING THE FOOD BANK VIA AN AGENCY APPLICATION, SIGNING AN AGENCY AGREEMENT, PROVIDING 501(C)(3) STATUS DOCUMENTATION, SAFE FOOD HANDLING TRAINING, AND AN ON-SITE MONITORING VISIT.

FOR AGENCIES RECEIVING GOVERNMENT GRANTS, WE REQUIRE ADDITIONAL CLIENT SERVED REPORTS ON A SPECIFIED BASIS AS WELL AS SPECIFIC MONITORING REQUIREMENTS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: AIDS PROJECT OF THE EAST BAY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ALAMEDA FOOD BANK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ALLEN TEMPLE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ALLEN TEMPLE BAPTIST CHURCH - USDA

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ARIEL OUTREACH MISSION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: BAY AREA AMERICAN INDIAN COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BERKELEY FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BOSS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BOSS- HAYWARD

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BROOKINS AME CHURCH - PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CENTER OF HOPE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CENTRO DE SERVICIOS RESOURCE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: CHRYSALIS C/O HORIZON SVCS.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CITY TEAM MINISTRIES-SK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CITY TEAM MINISTRIES - SK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CITY TEAM MINISTRIES- TURNING POINT

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CITY TEAM MINISTRIES - BERKELEY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CITY TEAM MINISTRIES - HAYWARD

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CITY TEAM MINISTRIES - SAN LEANDRO

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY REFORMED CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CORNERSTONE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CRONIN HOUSE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CURA, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: DAVIS STREET COMMUNITY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: DOROTHY DAY HOUSE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

DOWNS MEMORIAL UNITED METHODIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

Part IV Supplemental Information

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: EAST BAY ASIAN YOUTH CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

EAST BAY ASIAN YOUTH CENTER - ROOSEVELT

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

EBCRP-PROJECT PRIDE, A LIFELONG MEDICAL GROUP

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CIVICORPS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: EAST BAY FOOD NOT BOMBS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BRIGHTER BEGINNINGS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: EAST BAY TEEN CHALLENGE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: EAST OAKLAND BOXING ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: EAST OAKLAND COMMUNITY PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

EAST OAKLAND MULTI-PURPOSE SENIOR CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: EAST OAKLAND SWITCHBOARD

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SAN LORENZO FAMILY HELP CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY OF GRACE/ ELMHURST BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

Part IV Supplemental Information

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: PROJECT OPEN HAND FOOD BANK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: PROJECT OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: REFUGE COMMUNITY FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

RESOURCE ENVIRONMENT FOR UNDERPRIVILEGED GE, THE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY-HAYWARD

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY-TRI CITIES

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY-GARDEN ST -S

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY-GARDEN ST -P

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SEVENTH STEP FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ROBERT ALLEN MERCY HOUSE NCCN

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SOLIDARITY FELLOWSHIP

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SOUTH BERKELEY COMMUNITY CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SOUTH HAYWARD PARISH

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ELMHURST PRESBYTERIAN CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ECAP

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LA FAMILIA - EL CHANTE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. ANNE CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. BERNARD CATHOLIC CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. JAMES EPISCOPAL CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. MARKS EPISCOPAL CHURCH

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. MARY'S CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. PAUL AME CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. VINCENT'S DAY HOME, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. VINCENT DE PAUL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: TABERNACLE MISSIONARY BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: TELEGRAPH COMMUNITY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: TRI-CITY VOLUNTEERS

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: TRI-VALLEY HAVEN FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: UNITY OUTREACH MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

COMMUNITY OUTREACH PANTRY FOR EMERGENCIES (COPE)

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: TURN ON TO AMERICA

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: VICTORY OUTREACH-MEN'S HOME

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: VICTORY OUTREACH-WOMEN'S HOME

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: GRACE BAPTIST CHURCH OAKLAND

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: GREATER ST. PAUL CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: HALCYON BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: HARBOR HOUSE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: HAYWARD SEVENTH DAY ADVENTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

HIV EDUCATION AND PREVENTION PROJECT, THE -SK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

HIV EDUCATION AND PREVENTION PROJECT - SK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

Part IV Supplemental Information

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: VIOLA BLYTHE COMMUNITY SERVICE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: WINGS OF LOVE MARANATHA MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: WOMEN ON THE WAY RECOVERY CENTER HOME

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: WOMEN'S DAYTIME DROP IN CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: INTERFAITH SHARING INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

BAY COMMUNITY FELLOWSHIP - AKA -WORLD IMPACT INC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: YOUTH LEARNING AND CULTURAL INSTITUTE

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(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

ZION'S TABERNACLE CHURCH OF GOD IN CHRIST

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LAKE MERRITT UNITED METHODIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LIBERTY HILL BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LOS ROBLES APARTMENTS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LOVE TEMPLE MISSIONARY BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: M.A. CENTER MOTHER'S KITCHEN

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

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NAME OF ORGANIZATION OR GOVERNMENT: MCGEE AVENUE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: MERCY BROWN BAG PROGRAM

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: MT. ZION MISSIONARY BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: OAKLAND CATHOLIC WORKER - SK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: OAKLAND CATHOLIC WORKER - SK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: OAKLAND CATHOLIC WORKER-GH 56TH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

OPERATION DIGNITY, INC. - DIGNITY COMMONS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

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NAME OF ORGANIZATION OR GOVERNMENT:

OPERATION DIGNITY INC. - HOUSE OF DIGNITY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

TRI-CITIES COMMUNITY DEVELOPMENT CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: OPEN HEART KITCHEN OF LIVERMORE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: PRESCOTT JOSEPH CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

FAITH LUTHERAN CHURCH OF CASTRO VALLEY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: HAYWARD SPANISH SDA CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

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NAME OF ORGANIZATION OR GOVERNMENT: MARYLIN AVE. SCHOOL / 18 REASONS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: RESTORATION CHURCH OF GOD

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: MULTICULTURAL INSTITUTE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: HOPE 4 THE HEART

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: MERCY HOUSING-EDEN HOUSE APARTMENTS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: REDWOOD GARDENS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: GREATER NEW LIFE COMMUNITY CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

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NAME OF ORGANIZATION OR GOVERNMENT: ACTS FULL GOSPEL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SECOND CHANCE, INC. - CENTRAL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: UNION CITY APOSTOLIC CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: B.A.C.C/IMBC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: HORIZON SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ALL SAINTS EPISCOPAL CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

MATILDA CLEVELAND HOUSING PRO (WITH EOCP)

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

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NAME OF ORGANIZATION OR GOVERNMENT: OAKLAND YOUTH ASPIRE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LUTHERAN CHURCH OF THE CROSS-SK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LUTHERAN CHURCH OF THE CROSS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: REDWOOD CHAPEL COMMUNITY CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. ELIZABETH FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: STREET LEVEL HEALTH PROJECT

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SAFE PASSAGES-UNITED FOR SUCCESS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

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NAME OF ORGANIZATION OR GOVERNMENT:

SAFE PASSAGES-COLISEUM COLLEGE PREPARATORY ACADEMY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SAFE PASSAGES-GREENLEAF ELEMENTARY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SAFE PASSAGES -BRIDGE ACADEMY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SAFE PASSAGES-BABY LEARNING

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SAFE PASSAGES -AMERICORPS-VISTA

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SAFE PASSAGES - LAUREL ELEMENTARY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

FOOD 2 GO CASTRO VALLEY UNITED METHODIST

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(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ARSOLA'S HOUSE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SOLID ROCK COGIC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: THE WELL COMMUNITY OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: KINGDOM BUILDERS DREAM CENTER OAKLAND

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: THE OAKLAND FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIAN TABERNACLE CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: INTERTRIBAL FRIENDSHIP HOUSE

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(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: PARADISE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: GOD'S RESTING PLACE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: FAITH VISIONARY SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

BROTHERS AND SISTERS IN CHRIST (BASIC)

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: FAMILY BRIDGES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

EDEN UNITED CHURCH OF CHRIST - FOOD FOR CHERRYLAND

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

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NAME OF ORGANIZATION OR GOVERNMENT: ST. LAWRENCE O'TOOLE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: GOOD SHEPHERD EPISCOPAL CHURCH -SK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: GOOD SHEPHERD EPISCOPAL CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: FOOD OF GOD 4 PEOPLE OF GOD

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

VIETNAMESE AMERICAN COMMUNITY CENTER - EAST BAY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CAA-AGNES MEMORIAL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: THE CHURCH BY THE SIDE OF THE ROAD

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

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AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SAN LEANDRO COMMUNITY FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: FACES OF THE EAST BAY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: 13TH AVENUE CHURCH OF CHRIST

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. AUGUSTINE'S EPISCOPAL CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. PAUL'S EPISCOPAL CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: PROPHETIC TEACHER INTERCESSORY CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

EAST BAY KOREAN AMERICAN SENIOR SERVICES CENTER

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(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: MISSION FOR THE HOMELESS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: HAVENSCOURT COMMUNITY CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: FAME-RAINBOW RECREATION CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: FAME-FIRST AME

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: UNITED SMITH MEMORIAL CME CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CHURCH OF THE LIVING GOD PG&T

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

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CROSSSTREETS NEIGHBORHOOD SERVICES - P

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

Y.A. FLUNDER FOUNDATION/WORD OF MOUTH FEEDING PRGM

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

LAST PHASE LOAVES AND FISH FOOD PROGRAM

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: PHILLIPS TEMPLE CME CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BERKELEY FOOD NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BACS-HEDCO WELLNESS CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BACS-SOUTH COUNTY WELLNESS CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

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AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

CHRISTIAN CHURCH HOMES - HARRISON ST. SR. HOUSING

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

CHRISTIAN CHURCH HOMES - SOUTHLAKE TOWER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIAN CHURCH HOMES - JL TERRACE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BUDDHIST TZU CHI FOUNDATION-SK

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: RESURRECTION GREEK ORTHODOX CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CHURCH OF THE TRUE LIVING GOD

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

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NAME OF ORGANIZATION OR GOVERNMENT: PROJECT ACCESS INC - KELLER PLAZA

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: PROJECT ACCESS INC - AVE VISTA

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: PROJECT ACCESS INC - TASSAFARONGA

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

PROJECT ACCESS INC - GLENVIEW APARTMENTS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

PRAY 4 U EVANGELISTIC PRAYER OUTREACH MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LIFELONG MEDICAL CARE EAST OAKLAND

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: THE NEW BRIDGE FOUNDATION INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

Part IV Supplemental Information

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: SVDP - MISSION SAN JOSE FREMONT

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LIFELONG TRUST HEALTH CLINIC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: W.O.R.L.D.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

OAKLAND HOUSING AUTHORITY FOUNDATION-UNION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

OAKLAND HOUSING AUTHORITY FOUNDATION-65TH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

OAKLAND HOUSING AUTHORITY FOUNDATION - FOOTHILL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT:

OAKLAND HOUSING AUTHORITY FOUNDATION - CAMPBELL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LAO FAMILY COMMUNITY DEVELOPMENT INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: EAST OAKLAND BURRITO ROLL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. RAYMOND CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: DESTINY ARTS CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: GOD'S HOUSE MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: REACH ASHLAND YOUTH CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

Part IV Supplemental Information

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BAY AREA STREET PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

LIFELONG ADELINE ST. RECUPERATIVE CARE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: HILLSIDE ALLIANCE CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: MUSLIM COMMUNITY CENTER-EAST BAY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: LIFE CHANGE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ARISE HIGH SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: BAY AREA ERITREAN TASKFORCE PANTRY

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: HOMIES EMPOWERMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: UNITY COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: EAST OAKLAND COLLECTIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: ST. MICHAEL CATHOLIC CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: YOUTH UPRISING (YU)- PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT:

PROCTOR ELEMENTARY PARENT TEACHER ASSOCIATION PTA

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO
AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: GREATER GRACE COMMUNITY SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: CHAVEZ - PERALTA HACIENDA

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

NAME OF ORGANIZATION OR GOVERNMENT: WORD ASSEMBLY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPLEMENT FOOD & EQUIPMENT TO

AGENCIES TO HELP MEET DEMANDS OF COMMUNITY AND PREVENT HUNGER

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

- For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
- ▶ **Attach to Form 990.**
- ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

ALAMEDA COUNTY COMMUNITY FOOD BANK

Employer identification number

94-2960297

Part I Questions Regarding Compensation

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

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

Schedule J (Form 990) 2020

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
|---|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| (1) SUZAN BATESON EXECUTIVE DIRECTOR | (i) | 333,425. | 2,000. | 2,044. | 16,848. | 21,338. | 375,655. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (2) AMY DONOVAN CHIEF FINANCIAL OFFICER | (i) | 189,649. | 2,000. | 7,561. | 10,299. | 27,273. | 236,782. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (3) BARBARA DARROW BLAKE CHIEF DEVELOPMENT OFFICER | (i) | 203,337. | 2,000. | 1,356. | 10,840. | 11,938. | 229,471. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (4) ERICK LOVDAHL DIRECTOR OF OPERATIONS | (i) | 166,313. | 2,000. | 12,721. | 9,430. | 20,580. | 211,044. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (5) BRUCE ELLIOT CHIEF OPERATING OFFICER | (i) | 172,595. | 2,000. | 364. | 0. | 27,223. | 202,182. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (6) ALLISON PRATT CHIEF OF PARTNERSHIPS AND STRATEGY | (i) | 187,021. | 2,000. | 181. | 9,885. | 1,245. | 200,332. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (7) MINDY TRAN DIRECTOR OF FINANCE | (i) | 141,233. | 2,000. | 10,798. | 8,258. | 27,876. | 190,165. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (8) MICHAEL ALTFEST DIRECTOR OF COMMUNITY ENGAGEMENT & M | (i) | 140,437. | 2,000. | 2,563. | 7,883. | 21,810. | 174,693. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (9) SHANNON LEE-RUTHERFORD DIRECTOR OF ANNUAL FUND | (i) | 135,898. | 2,000. | 6,347. | 7,184. | 19,809. | 171,238. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (10) MARK PHAGAN DIRECTOR OF IT | (i) | 136,099. | 2,000. | 494. | 4,827. | 9,614. | 153,034. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |

Part III Supplemental Information

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

SCHEDULE J, PART II, COLUMN B(II):

BONUS AND INCENTIVES OF UP TO \$2,000 PER EMPLOYEE WERE GIVEN TO ALL
EMPLOYEES OF THE ORGANIZATION BASED ON HIRE DATE. BONUSES WERE FOR
ADDITIONAL RECOGNITION DURING THE PANDEMIC.

SCHEDULE J, PART II, COLUMN B(III):

OTHER COMPENSATION INCLUDES 1) TAXABLE LIFE AND LONG TERM DISABILITY
INSURANCE PREMIUMS PAID BY THE ORGANIZATION. AND 2) ACCRUED VACATION
LEAVE CASHED OUT. LIFE AND LONG TERM DISABILITY PREMIUMS ARE PAID BY
THE ORGANIZATION FOR EVERY ELIGIBLE EMPLOYEE. VACATION LEAVE CASH OUTS
WERE VOLUNTARY AND OFFERED TO EVERY ELIGIBLE EMPLOYEE IN 2020 BASED ON
AVAILABLE HOURS ACCRUED. VACATION CASH OUTS WERE IN RECOGNITION THAT IT
MAY HAVE BEEN MORE DIFFICULT TO TAKE TIME OFF DURING THE EARLY DAYS OF
THE PANDEMIC.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2020

Open to Public
Inspection

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization

ALAMEDA COUNTY COMMUNITY FOOD BANK

Employer identification number

94-2960297

Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|---|-------------------------------|---|--|--|
| 1 Art - Works of art | | | | |
| 2 Art - Historical treasures | | | | |
| 3 Art - Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities - Publicly traded | X | 127 | 1,076,235. | FMV |
| 10 Securities - Closely held stock | | | | |
| 11 Securities - Partnership, LLC, or trust interests | | | | |
| 12 Securities - Miscellaneous | | | | |
| 13 Qualified conservation contribution - Historic structures | | | | |
| 14 Qualified conservation contribution - Other ... | | | | |
| 15 Real estate - Residential | | | | |
| 16 Real estate - Commercial | | | | |
| 17 Real estate - Other | | | | |
| 18 Collectibles | | | | |
| 19 Food inventory | X | 350 | 73,239,289. | FEEDING AMERICA |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other ▶ (<u>MISC SUPPLIES</u>) | X | 19 | 43,547. | FMV |
| 26 Other ▶ (<u>EVENTS</u>) | X | 6 | 25,300. | FMV |
| 27 Other ▶ () | | | | |
| 28 Other ▶ () | | | | |

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

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

| | Yes | No |
|-----|-----|----|
| 30a | | X |
| 31 | X | |
| 32a | X | |
| 33 | | |

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

Schedule M (Form 990) 2020

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

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER OF FOOD CONTRIBUTIONS REPRESENTS THE NUMBER OF DONORS OF FOOD. THE NUMBER OF ALL OTHER NONCASH CONTRIBUTIONS REPRESENTS THE NUMBER OF ITEMS CONTRIBUTED.

SCHEDULE M, LINE 32B:

AUTOS ARE DONATED TO CHARITABLE ADULT RIDES & SERVICES (CARS) VEHICLE PROGRAM, WHICH IS AN UNRELATED 501(C)(3) PUBLIC CHARITY. CARS HANDLES ALL OF THE NECESSARY IRS PAPERWORK ON FOOD BANK'S BEHALF AND ISSUES THE 1098C FORMS TO DONORS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

ALAMEDA COUNTY COMMUNITY FOOD BANK

Employer identification number

94-2960297

FORM 990, PART I, LINE 12 AND 18 SUPPLEMENTAL INFORMATION:

TOTAL REVENUE INCREASED \$37 MILLION FROM PRIOR YEAR WHICH INCLUDED \$13
MILLION IN GOVERNMENT CASH GRANTS, \$7 MILLION IN GOVERNMENT
COMMODITIES, \$10 MILLION IN OTHER IN-KIND FOOD, AND \$6 MILLION IN
PRIVATE CASH DONATIONS. THESE INCREASES WERE DUE TO THE ADDITIONAL
SUPPORT DURING THE PANDEMIC. TOTAL EXPENSE INCREASED \$33 MILLION FROM
PRIOR YEAR AND INCLUDED AN INCREASE OF IN-KIND DONATED AND GOVERNMENT
FOOD OF \$16 MILLION AND INCREASE OF CASH EXPENSE OF \$17 MILLION ALSO
RELATED TO THE PANDEMIC RESPONSE.

FORM 990, PART I, LINE 19 AND 22 SUPPLEMENTAL INFORMATION:

THE \$27 MILLION INCREASE IN NET ASSETS FROM PRIOR YEAR ARE, LIKE
REVENUE, DUE TO SUPPORT DURING THE ONGOING COVID-19 PANDEMIC. DURING
THIS TIME, ACCFB ALSO EXPERIENCED CONTINUED DEMAND FOR SERVICES AS WELL
AS OTHER CHALLENGES SUCH AS SAFETY-RELATED CLOSURES OF DISTRIBUTION
PARTNERS. SPENDING OF FINANCIAL RESOURCES, INCLUDING FOOD PURCHASING
AND TEMPORARY STAFFING TO ASSIST WITH EMERGENCY RESPONSE, INCREASED
FY21 TOTAL EXPENSES BY \$16 MILLION FROM PRIOR YEAR DUE MOSTLY TO
COVID-RELIEF EFFORTS. LOOKING AHEAD, THE BOARD HAS DESIGNATED NET
ASSETS OF \$25 MILLION TO CONTINUE TO COVER EMERGENCY OPERATIONS DURING
THE ON-GOING PANDEMIC. IN ADDITION, NET ASSETS INCLUDE \$4 MILLION FOR
ON-GOING CONSTRUCTION TO INCREASE CAPACITY OF OUR WAREHOUSE AND \$5
MILLION TO INCREASE CAPACITY OF DISTRIBUTION PARTNERS, IN ORDER TO MEET
ELEVATED NEED BASELINES. WE ARE PREPARING FOR THE LIKELIHOOD OF A
BUDGET DEFICIT IN COMING YEARS AS GIVING DECLINES WHILE SPENDING WILL
NEED TO REMAIN AT SIMILAR LEVELS DUE TO THE ECONOMIC IMPACT OF THE

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

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization

ALAMEDA COUNTY COMMUNITY FOOD BANK

Employer identification number

94-2960297

PANDEMIC. AN ADDITIONAL \$22 MILLION OF NET ASSETS IS BOARD DESIGNATED REPRESENTS OPERATING RESERVE NEEDS TO SUPPORT THE COMMUNITY DURING UNANTICIPATED ECONOMIC SLOW-DOWNS, NATURAL DISASTERS, OR OTHER EMERGENCIES.

FORM 990, PART VIII, LINE 1 AND 2 SUPPLEMENTAL INFORMATION:

SUPPORT - THE FOOD BANKS MAJOR SOURCES OF FINANCIAL AND IN-KIND SUPPORT CONSISTE OF FEDERAL FUNDS (PASS THROUGH BY THE COUNTY OF ALAMEDA), FOUNDATIONS, CORPORATION, INDIVIDUAL, THE UNITED STATES DEPARTMENT OF AGRICULTURE ("USDA") COMMONDITIES PROGRAM, AND OTHER GOVERNMENTAL ENTITIES. A SMALL AMOUNT OF REVENUE IS EARNED FROM FEES CHARGED TO MEMBER ORGANIZATIONS THAT RECEIVE PURCHASED FOOD. TOTAL FISCAL YEAR 2020 REVENUE AND SUPPORT INCREASED FROM FISCAL YEAR 2020 PRIMARLY DUE TO THE INCREASE IN INDIVIDUAL CONTRIBUTIONS DURING THE ON-GOING PANDEMIC.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

INCLUDING SEVERAL POP-UPS AND THE DISTRIBUTION OF EMERGENCY BAGS.

VOLUNTEER PROGRAM - VOLUNTEERS PLAY AN EVOLVING ROLE IN WORK FROM PACKAGING OF FRESH PRODUCE, BAGGING CHILDREN'S FOOD BAGS, AND SORTING DONATED FOOD TO HELPING IN A VARIETY OF SKILLS- AND PROFESSIONAL-BASED WAYS INCLUDING CONSULTING ON RISK-ASSESSMENTS. VOLUNTEERS ARE ALSO UTILIZED FOR THE HELPLINE, OFFICE ASSISTANCE, ADVOCACY, AND EVENTS. DURING THE YEARS ENDED JUNE 30, 2021 AND 2020, VOLUNTEER HOURS WERE EQUIVALENT TO 48 AND 52 FULL-TIME EMPLOYEES EACH YEAR, RESPECTIVELY. VOLUNTEER HOURS WERE 95,000 AND 103,000 FOR THE YEARS ENDED JUNE 30, 2021 AND 2020, RESPECTIVELY.

| | |
|------------------------------------|--------------------------------|
| Name of the organization | Employer identification number |
| ALAMEDA COUNTY COMMUNITY FOOD BANK | 94-2960297 |

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

HEALTHFUL EATING. NUTRITION EDUCATION SERVICES ALSO HELP CLIENTS
MAXIMIZE THEIR OTHER FOOD RESOURCES TO BRING HEALTHY CHOICES TO THEIR
FAMILIES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER - ADVOCACY, RESEARCH, COMMUNITY ENGAGEMENT- THE FOOD BANK'S
HUNGER EDUCATION AND ADVOCACY EFFORTS CONTINUE TO PROVIDE A VOICE FOR
TENS OF THOUSANDS OF ALAMEDA COUNTY RESIDENTS WHO FACE FOOD INSECURITY.
THE FOOD BANK'S STAFF MEETS WITH LEGISLATORS, GRASSROOTS ANTI-HUNGER
ADVOCATES, AND OTHER ADVOCACY PARTNERS REGULARLY. THE PROGRAM PROMOTES
POLICIES TO BENEFIT LOW-INCOME RESIDENTS SUCH AS EXTENDING CALFRESH
BENEFITS TO PEOPLE LIVING ON SUPPLEMENTAL SECURITY INCOME, A PROGRAM
THAT BENEFITS LOW INCOME SENIORS AND INDIVIDUALS WITH DISABILITIES.
RESEARCH ACTIVITIES INCLUDE MEASURING FOOD INSECURITY AND MAPPING FOOD
INSECURITY WITH SERVICES OFFERED TO HELP STRATEGICALLY IMPROVE SERVICES
WHERE THEY ARE NEEDED MOST.

EXPENSES \$ 1,453,193. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 7A:

THE FOOD BANK'S PARTNER AGENCIES -- FOOD PANTRIES, SOUP KITCHENS,
CHILD-CARE CENTERS, SENIOR CENTERS, AFTER-SCHOOL PROGRAMS AND OTHER
COMMUNITY-BASED ORGANIZATIONS VOTE TO ELECT MEMBERS OF THE BOARD OF
DIRECTORS PER THE ORGANIZATION'S BYLAWS. THE FOOD BANK CAN ELECT UP TO 22
BOARD MEMBERS; A MINIMUM OF TWO MUST REPRESENT FOOD BANK NETWORK
PARTNER/MEMBER AGENCIES.

Name of the organization

ALAMEDA COUNTY COMMUNITY FOOD BANK

Employer identification number

94-2960297

FORM 990, PART VI, SECTION A, LINE 7B:

THE FOOD BANK'S PARTNER AGENCIES ELECT NEW MEMBERS TO THE BOARD AND TAKE ACTION REGARDING CHANGES TO BYLAWS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE CPA FIRM PREPARES THE TAX RETURN AND RELATED FILINGS. THE TAX RETURN MUST BE REVIEWED BY THE EXECUTIVE DIRECTOR AND CFO AND IS MADE AVAILABLE TO ALL BOARD MEMBERS FOR REVIEW. IN PARTICULAR, THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS IS RESPONSIBLE FOR REVIEWING THE TAX RETURN. THE TAX RETURN IS THEN SIGNED BY AN OFFICER OF THE CORPORATION AND SUBMITTED TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST STATEMENTS ARE COMPLETED ANNUALLY. STATEMENTS ARE REVIEWED BY THE EXECUTIVE DIRECTOR FOR CONFLICTS.

FORM 990, PART VI, SECTION B, LINE 15:

PER THE FOOD BANK POLICIES, THE FOOD BANK WILL STRIVE TO BE A DESIRED EMPLOYER IN A COMPETITIVE MARKETPLACE. COMPENSATION GUIDELINES ARE REVIEWED BY THE OVERSIGHT COMMITTEE OF THE BOARD OF DIRECTORS ANNUALLY. THE AGGREGATE PERCENTAGE OF WAGE INCREASES FOR EACH FISCAL YEAR WILL BE APPROVED BY THE BOARD OF DIRECTORS THROUGH THE BUDGET PROCESS. WAGE GUIDELINES AND ANY WAGE CHANGES ARE REVIEWED AND APPROVED ON AN ONGOING BASIS BY THE EXECUTIVE DIRECTOR AND THE CFO. IT IS EXPECTED THAT THE WAGES FOR EACH POSITION WILL FALL WITHIN THE WAGE GUIDELINES AND WILL NOT EXCEED THE MAXIMUM SET FORTH FOR THE POSITION. SALARY GUIDELINES ARE DERIVED BASED ON SALARY DATA OF COMPARABLE ORGANIZATIONS AND JOB DUTIES AND ARE PROPOSED BY AN OUTSIDE CONSULTANT. DECISIONS TO CHANGE SALARIES INCLUDE

Name of the organization

ALAMEDA COUNTY COMMUNITY FOOD BANK

Employer identification number

94-2960297

CONSIDERATION OF THE EMPLOYEES' EXPERIENCE AND PERFORMANCE.

WITH RESPECT TO THE EXECUTIVE DIRECTOR'S, CFO'S, AND KEY EMPLOYEES' SALARY SPECIFICALLY, THE BOARD REVIEWS THESE SALARIES ANNUALLY AND VOTES TO APPROVE SALARY CHANGES FOR THOSE POSITIONS. THE PROCESS PERFORMED BY MEMBERS OF THE BOARD OF DIRECTORS INCLUDES REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABLE DATA FROM OTHER ORGANIZATIONS AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOOD BANK'S ARTICLES OF INCORPORATION, BYLAWS, MOST RECENT TAX RETURNS, AND MOST RECENT AUDIT REPORTS ARE AVAILABLE AT [HTTPS://WWW.ACCFB.ORG/FINANCIALS/](https://www.accfb.org/financials/). THESE DOCUMENTS AND OTHERS INCLUDING CONFLICT OF INTEREST POLICY AND PRIOR YEAR'S TAX RETURNS AND FINANCIAL STATEMENTS ARE ALSO AVAILABLE UPON REQUEST AND VIA CHARITY NAVIGATOR: WWW.CHARITYNAVIGATOR.ORG AND GUIDESTAR.

**Application for Automatic Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-0047

► **File a separate application for each return.**
 ► **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| | | |
|--|---|---|
| Type or print File by the due date for filing your return. See instructions. | Name of exempt organization or other filer, see instructions. ALAMEDA COUNTY COMMUNITY FOOD BANK | Taxpayer identification number (TIN) 94-2960297 |
| | Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 2599 | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. OAKLAND, CA 94614-0599 | |

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|-----------------------------------|-------------|
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 (other than individual) | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

AMY DONOVAN, CHIEF FINANCIAL OFFICER

- The books are in the care of ► **7900 EDGEWATER DRIVE - OAKLAND, CA 94621**
Telephone No. ► **(510) 635-3663** Fax No. ► _____
- If the organization does not have an office or place of business in the United States, check this box ☐ _____
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and TINs of all members the extension is for.

- 1** I request an automatic 6-month extension of time until **MAY 16, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ► ☐ calendar year _____ or
 ► ☒ tax year beginning **JUL 1, 2020**, and ending **JUN 30, 2021**.

- 2** If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

| | | | |
|---|-----------|----|-----------|
| 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a | \$ | 0. |
| b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. | 3b | \$ | 0. |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | 0. |

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.