

SECOND HARVEST HEARTLAND 1140 GERVAIS AVENUE MAPLEWOOD, MN 55109

DEAR LADIES AND GENTLEMEN,

Enclosed are the original and one copy of your income tax returns for the period ended September 30, 2013 for:

SECOND HARVEST HEARTLAND as follows...

- 2012 990 Return of Organization Exempt from Income Tax
- 2012 Schedule A Public Charity Status and Public Support
- 2012 Schedule C Political Campaign and Lobbying Activities
- 2012 Schedule D Supplemental Financial Statements
- 2012 Schedule G Supplemental Info. Regarding Fundraising/Gaming
- 2012 Schedule I Grants & Other Assist. to Org/Gov/Ind. in the U.S
- 2012 Schedule J Compensation Information
- 2012 Schedule M Noncash Contributions
- 2012 Schedule O Supplemental Information to Form 990 or 990EZ
- 2012 Schedule R Related Organizations and Unrelated Partnerships
- 2012 8879-EO IRS e-file Signature Authorization

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

The enclosed returns were prepared primarily from data and information which you submitted. You should review the returns to ensure that there are no omissions or misstatements.

Upon an audit of the return(s), requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records.

Form 990 must be made available for public inspection for a period of three years, beginning with the date the return is filed. The available document must be an exact copy of the return and schedules (including schedule B), as filed with the IRS, except that the names and the addresses of the contributors may be excluded. Any organization that fails to comply with this provision is subject to a penalty of \$20 for each day that inspection is not permitted, up to a maximum of \$10,000. Any organization that willfully fails to comply shall be subject to an additional penalty of \$5,000. You are also required to provide copies of the return if you receive such a request. Should you receive a request for inspection or for copies of your return, you may want to contact us for further details.

These returns were prepared from information provided by you or your representative. The preparation of tax returns does not include the independent verification of information used. Therefore, we recommend you review the returns before signing to ensure there are no omissions or misstatements. If you note anything which may require a change to the returns, please contact us

SECOND HARVEST HEARTLAND

before filing them.

We sincerely appreciate this opportunity to serve you. Please contact us if you have questions concerning the returns or if we may be of further assistance.

Sincerely,

WENDY HARDEN, CPA SCHECHTER DOKKEN KANTER ANDREWS & SELCER, LTD



Instructions for filing SECOND HARVEST HEARTLAND Form 8879-EO - IRS E-file Signature Authorization for the period ended September 30, 2013

Signature...

The original IRS e-file Signature Authorization form should be signed (use full name) and dated by the taxpayer.

Filing...

Return your signed Form 8879-EO to:

SCHECHTER DOKKEN KANTER CPA'S 100 WASHINGTON AVE SO #1600 MINNEAPOLIS MN 55401-2192

Payment of tax... No payment of tax is required.

Form 8879-EO serves as a replacement for your signature that would be affixed to form 990 if you paper filed your return. Please DO NOT separately file form 990 with the Internal Revenue Service. Doing so will delay the processing of your return.

We must receive your signed form before we can electronically transmit your return which is due on May 15, 2014. We would appreciate your returning this form as soon as possible as this will expedite the processing of your return. The Internal Revenue Service will notify us when your return is accepted. Your return is not considered filed until the Internal Revenue Service confirms their acceptance, which may occur after the due date of your return.

Schechter Dokken Kanter Andrews & Selcer Ltd 100 Washington Avenue South • Suite 1600 • Minneapolis, Minnesota 55401-2192 www.sdkcpa.com • 612.332.5500 • Fax 612.332.1529 Form **8879-EO**

IRS *e-file* Signature Authorization for an Exempt Organization For calendar year 2012, or fiscal year beginning 10/01___, 2012, and ending 09/30_

OMB No. 1545-1878

Department of the Treasury Internal Revenue Service Do not send to the IRS. Keep for your records.

Name of exempt organization

•	-			
23	-7	41'	76	54

Employer identification number

__,₂₀ 13

SECOND HARVEST HEARTLAND
Name and title of officer

ROB ZEASKE, CEO

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

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

1a	Form 990 check here 🕨 🛛 X	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	133838826.
2a	Form 990-EZ check here 🕨		b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	•	b Total tax (Form 1120-POL, line 22)		
4a	Form 990-PF check here 🕨		b Tax based on investment income (Form 990-PF, Part VI, line 5)		
5a	Form 8868 check here	ł	Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2012 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

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

X Lauthorize SCHECHTER DOKKEN KANTER	С	to enter my PIN	4 6 5 8 2	as my signature
ERO firm name		,,,	Enter five numbers, but do not enter all zeros	

on the organization's tax year 2012 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2012 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ► Date ► 03/01/2014							
Part III Certification and Authentication							
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.	4 1 4 1 5 9 4 1 1 6 8						
do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2012 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163 , Modernized e-File (MeF) Information for Authorized IRS <i>e-file</i> Providers for Business Returns.							
ERO's signature	Date 🕨						
ERO Must Retain This Form - See Instructions							

Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form 8879-EO (2012)

JSA 2E1676 1.000

BUI4GS K384 2/24/2014 4:19:17 PM V 12-7.12

Form	90
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DRAFT FOR DISCUSSION PURPOSES ONLY **Return of Organization Exempt From Income Tax**

ОМВ	No.	154	5-0047
ഹ	\mathbb{R}		0

	Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except black lung												
		of the Treasury	► Th		benefit trust or	•	,				Open		
		enue Service	dar year, or t	•	n may have to use a cop	,	2, and ending		rung requireme		Insp 0, 20 1		on
<u> </u>	01 111		e of organization		ginning ±	0701,2012	, and chang	_	D Employer ide		•		
Bc	heck if ap	- Franklas	COND HARVE	ST HEAR	LAND				23-741				
	Addre	ess Deine	Business As										
	chang Name	JC 0		P.O. box if mail	is not delivered to street add	ress)	Room/suite		E Telephone nu	umber			
	-	-	0 GERVAIS	AVENUE					(651) 48	4-511'	7		
	Termi	0:00	town or post office,	, state, and ZIP	code								
	Amen		LEWOOD, M	N 55109					G Gross receipt	ts \$]	134,3	49,	,020.
	return Applic pendir	cation F Nar	me and address of	f principal office	r: ROB ZEASKE				H(a) Is this a grou	p return for	Y	es	X No
			0 GERVAIS	AVENUE	MAPLEWOOD, MN	55109			affiliates? H(b) Are all affiliat	tes included	? Y	es	No
I	Tax-exe	empt status:	X 501(c)(3)	501(c)	() (insert no.)	4947(a)(1)	or 527		If "No," attac	h a list. (see	instruction	ıs)	
J	Websit		2HARVEST.C	RG					H(c) Group exemp	tion numbe	r 🕨		
к	Form o	of organization:	X Corporation	Trust	Association Other	►	L Year of fo	ormatio	on: 1976 M	State of le	gal domic	cile:	MN
Pa	art I	Summary					•						
	1	Briefly describ	be the organizat	ion's missior	n or most significant activit	ties:						-	
đ		SECOND H	ARVEST HEA	ARTLAND	IS THE UPPER M	IDWEST'S	LARGEST	HUNC	GER-RELIE	F			
anc		ORGANIZA	TION, WITH	H A MISS	ION OF ENDING	HUNGER T	HROUGH CO	MMUI	NITY				
Governance		PARTNERS	HIPS.										
20		Check this box		0	discontinued its operati	•				6.			
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	3	Number of vo	ting members o	f the governi	ng body (Part VI, line 1a)					3			23.
ties					of the governing body (Pa					4			23.
Activities &					alendar year 2012 (Part V					5			157.
Ac	6	Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12								6		27,	,000.
										7a			0
	b	Net unrelated	business taxab	le income fro	m Form 990-T, line 34 🔒					7b			0
							_	1	Prior Year		Curren		
ne			Contributions and grants (Part VIII, line 1h)						05,735,73	124,9			
Revenue	9	Program servi	ce revenue (Part	ce revenue (Part VIII, line 2g)						9,633,434. 37,986.			,448. ,618.
Re			tment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						99,33			710.	
				- add lines 8 through 11 (must equal Part VIII, column (A), line 12)							133,8		
					column (A), lines 1-3)				15,506,48 97,283,74		L15,9		
					plumn (A), line 4)					0			0
					enefits (Part IX, column (A				8,504,96	52.	9.7	31.	438.
Ises		Professional f	undraising fees	(Part IX colu	mn (A), line 11e)	(), III (CO O TO)	••••		630,29				,174.
Expens	b	Total fundrais	ing expenses (P	art IX. columi	n (D), line 25) ►	3,014,10	3.					-	
ш	17				6,692,48	8,9	74,	,141.					
			es (Part IX, column (A), lines 11a-11d, 11f-24e) es. Add lines 13-17 (must equal Part IX, column (A), line 25)						13,111,48	32. 1	135,485,242.		
	19				om line 12		· · · · · · -		2,395,00	)7.	-1,646,416.		
t Assets or d Balances							E	Beginn	ing of Current Y	'ear	End of	Year	
sets alan	20	Total assets (F	Part X, line 16)				[	-	19,658,29	91.	18,2	20,	,586.
t As d Bä	21	Total liabilities	(Part X, line 26)	)					3,354,77				,490.
Pune					21 from line 20				16,303,51	.2.	14,6	<u>57,</u>	,096.
Pa	art II	Signature	Block										
					this return, including accor han officer) is based on all in					my know	ledge an	d bel	lief, it is
			. Declaration of pr		lan onicer) is based on an in				Jwiedge.				
Sic	'n												
Sig He	-	Signatur	e of officer						Date				
ne		<b>—</b>											
		, ,, ,	print name and title	•	Dreneral-station		Dete			D70.			
Paie	d	Print/Type pre	•		Preparer's signature		Date		Check	if PTIN		~ • •	
	parer		RDEN CPA			•	02/24/			ed   ]	P0095	649	90
	Only	Firm's name	•		EN KANTER CPA'S				Firm's EIN 🕨	612-33	<u>,,</u>	00	
		Eirm's addross	100 WACUTN/		#1600 MINNEAPOLIS M	N EE/01_210'	,		Phone no	012-5	14-22	00	

May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No . . . For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2012)

orm 990 (2012)	Page
Part III         Statement of Program Service Accomplishments           Check if Schedule O contains a response to any question in this Part III         III	X
Briefly describe the organization's mission:	
SECOND HARVEST HEARTLAND IS THE UPPER MIDWEST'S LARGEST HUNGER-RELIE	F
ORGANIZATION, WITH A MISSION OF ENDING HUNGER THROUGH COMMUNITY	
PARTNERSHIPS.	
Did the organization undertake any significant program services during the year which were not liste prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	
Did the organization cease conducting, or make significant changes in how it conducts, any services?	
If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest progra	m convicos os moosurod
expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of gran the total expenses, and revenue, if any, for each program service reported.	
a (Code:) (Expenses \$117,215,928. including grants of \$) (Revenue \$ THE FOOD BANK IS THE FOUNDATION FOR ALL OUR PROGRAMS, AND IS	8,864,448.)
SECOND HARVEST HEARTLAND'S CORE BUSINESS. WE RECEIVE FOOD	
DONATIONS FROM MANUFACTURERS, GROWERS, RETAILERS, GOVERNMENT	
PROGRAMS AND THE COMMUNITY, WHICH ARE THEN DISTRIBUTED TO MEMBER	
NON-PROFITS INCLUDING FOOD SHELVES, SHELTERS, SOUP KITCHENS AND	
PROGRAMS THROUGHOUT OUR 59-COUNTY SERVICE AREA. 83,831,000 POUNDS	
OF FOOD, WHICH INCLUDES 8.764 MILLION POUNDS HELD AS AGENT, WAS	
DISTRIBUTED THROUGH THE FOOD BANK IN THE 12-MONTH PERIOD ENDING	
9/30/2013. SEE SCHEDULE O FOR ADDITIONAL PROGRAM SERVICE	
DESCRIPTION.	
b (Code:) (Expenses \$6,022,110. including grants of \$) (Revenue \$	)
ATTACHMENT 1	·
c (Code: ) (Expenses \$ 3,850,617. including grants of \$ ) (Revenue \$	)
DESCRIPTION OF OTHER PROGRAM SERVICE ACTIVITIES INCLUDED IN THE	,
ORGANIZATION'S MISSION IN SCHEDULE O.	
d Other program services (Describe in Schedule O.) ATTACHMENT 2	
(Expenses \$ 2,294,302. including grants of \$ ) (Revenue \$ )	
e Total program service expenses  129,382,957.	
A 2.000	Form <b>990</b> (20
	Form <b>990</b> (20 <b>PAG</b>

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes."         Ves         Ne           1 Is the organization required to complete Schedule <i>B</i> , Schedule <i>G</i> Contributors (see instructions)?         1         X           3 Did the organization required to complete Schedule <i>B</i> , Schedule <i>G</i> Contributors (see instructions)?         3         X           4 Section 501(c)(3) organizations. Bud the organization engage in lobiying activities, or have a section 501(h)         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 Revene Procedure 99-197 // "Ne" complete Schedule C, Part II.         4         X           5 Is the organization reside or 0 hold a conservation essement, including essements to preserve open space, the environment, historic land areas, or historic structures? If "Yes." complete Schedule D, Part II.         7         X           8 Did the organization reside or hold a conservation essement, including essements to preserve open space, the environment, historic land areas, or historic structures? II "Yes." complete Schedule D, Part II.         7         X           9 Did the organization resorts an amount in Part X. line 21, for escrow or custodial account liability: serve as a custodial for amounts, part listed in Part X, line 21, for escrow or custodial account liability.         8         X           10 Did the organization report an amount for laws for this historical trassures.         9         X	Form 9	90 (2012)		F	Page <b>3</b>
1         Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.         1         X           2         X         Did the organization required to complete Schedule B, Schedule C Contributors (see instructions)?         2         X           3         Did the organization required to complete Schedule C, Part I.         3         X           4         Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) alcotion in fedice during the taxyear II "Nes." complete Schedule C, Part I.         4         X           5         Is the organization a section 501(c)(4), 501(c)(5), or 301(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revence Procedure 98.197 II "Yes," complete Schedule C, Part 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 II.         6         X           7         Did the organization maintain collections of works of at, historical trassures, or other assets? If "Yes," complete Schedule D, Part I.         7         X           8         Did the organization report an amount in Part X, line 21, for secrow or custodial account liability: serve as acustodian for amounts or listed in Part X, line 21, for secrow or custodial account liability: serves, a custodian for amounts or listed in Part X, line 21, if Yes, "complete Sch	Part	V Checklist of Required Schedules			
complete Schedule A       1       X         2       1s the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office II "Yes," complete Schedule C, Parl I.       3       X         4       Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in fafect during the tax year II "Yes," complete Schedule C, Parl II.       4       X         5       Is the organization association satisfies on the section 501(c)(4). 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Reveue Procedure 98-197 II "Yes," complete Schedule C, Parl II.       4       X         6       Did the organization residue on the distribution or investment of amounts in such fuds or accounts? If "Yes," complete Schedule D, Parl II.       7       X         7       Did the organization researce or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? II "Yes," complete Schedule D, Parl II.       7       X         9       Did the organization researce or hold a conservation easement, including easements to preserve open space, the environment, brate land areas, or historic structures? II "Yes," complete Schedule D, Parl II.       7       X         10       Did the organization researce an amount for lows of art, historical treasures, a custodial account liability, serve as a custodial no sances? II "Yes," complete Schedule D, Parl V.       10       X <td></td> <td></td> <td></td> <td>Yes</td> <td>No</td>				Yes	No
2         is the organization required to complete Schedule B. Schedule of Contributors (see instructions)?         2         X           3         Did the organization engage in direct political campaign activities on behalf of or in opposition to candidates for public offeed If Yess, complete Schedule C. Part I.         3         X           4         Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(c)(4).         4         X           5         Is the organization a section 501(c)(4).         501(c)(5) or 301(c)(6) organization that reaches membership dues, assessments, or similar mounts as defined in Revenue Procedure 99-19? If "Yes," complete Schedule C.         5         X           7         Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D. Part I         7         X           9         Did the organization maintain collections of works of ant, historical trassures, or other similar asset? If Yes," complete Schedule D. Part I         8         X           9         Did the organization maintain collections of Schedule D. Part I         9         X           10         It the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodial for amounts not listed in Part X, or provide advised on phasization, directify or through a related organization, phenet M         10         X </td <td>1</td> <td></td> <td></td> <td></td> <td></td>	1				
Bit the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.       3       x         Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year! If 'Yes,' complete Schedule C, Part I.       4       x         Section 501(c)(3) organization as defined in Revenue Procedure 99-19? If 'Yes,' complete Schedule C, Part I.       4       x         Bit the organization assection 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 anounts in such funds or accounts? If 'S'', complete Schedule D, Part I.       7       X         Bit the organization reserve or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part I.       7       X         Did the organization reserve to hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part V.       7       X         Did the organization reserve to hold a conservation easement, including easements to preserve open space, the environment, historic structures? If 'Yes,' complete Schedule D, Part V.       9       X         Did the organization resorted in Part X, ine 21 for acrow or custodial account liability; serve as a custodian for anounts in the tax year II 'Yes,' complete Schedule D, Part V.       10				X	
candidate for public office? // "res" complete Schedule C, Part I.       3       X         4       Section 501(q)3 or granuzations. Did the organization apage in (oblying activities, or have a socion 501(n)       4       X         5       Is the organization a section 501(c)(14), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 90-197 If "Yes," complete Schedule C, Part III.       4       X         6       Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.       6       X         7       Did the organization maintain collections of works of ant, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II.       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 magement, credit repair, or get X       10       X         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       10       X         11       the organization report an amount for investments-program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V       10       X         12	2		2		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? // "Yes," complete Schedule C, Part //.         4         X           5         Is the organization assents on 501(c)(4), 505(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? // "Yes," complete Schedule C, Part // .         5         X           6         Did the organization assents on 501(c)(4), 505(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? // "Yes," complete Schedule D, Part // .         6         X           7         Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide vero or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? // "Yes," complete Schedule D, Part // .         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, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 102 m ryes," complete Schedule D, Part V         9         X           10         Did the organization report an amount for land, buildings, and equipment in Part X, line 102 m ryes," complete Schedule D, Part V         10         X           11         If the organization report an amount for linextstimets-sprease eater in Part X, li	3				
election in effect during the fax year? If "Yes," complete Schedule C, Part II.       4       X         5 Is the organization assents on 501(c)(d), 501(c)(d			3		X
5         is the organization asction 501(c)(6), 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 // "yes," complete Schedule C, Part II         S         X           6         Did the organization asction 501(c)(6), 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 // "yes," complete Schedule C, Part II         K           7         Did the organization receive or hold a conservation essement, including easements to preserve open space, the anvironment, historic land areas, or historic structures? If "yes," complete Schedule D, Part II.         K           8         Did the organization receive or hold a conservation essement, including easements to preserve open space, the anvironment, historic land areas, or historic structures? If "yes," complete Schedule D, Part II.         K           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, con proved ecredic counseling, debt management, credit repart, or debt neganization, failed areadowments? If "yes," complete Schedule D, Part V         9         X           10         Did the organization report an amount for land, buildings, and equipment in Part X, line 107 II "yes," complete Schedule D, Part VI.         11         X           11         If the organization report an amount for land, buildings. and equipment in Part X, line 17 II "yes," complete Schedule D, Part X         11         X           11         If the organization	4				
assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part II       5         A       Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II.       6       X         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic instructures? If "Yes," complete Schedule D, Part II.       7       X         8       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability: serve as a custodian for amounts not listed in Part X, ine 121, for escrew or custodial account liability: serve as a custodian for amounts or through a related organization, held assets in temporarity restricted endowments, permanent endowments? If ruse, "complete Schedule D, Part V       9       X         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       10       X         11       X       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       11       X         11       X       Did the organization report an amount for landes statements of the tax year III.       11       X         12       Did the organization report an amount for other liabilitis or Part X, line 12 that is 5% or more of its total assets repor			4	X	
Part III       5       X         6       Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II       5       X         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic and areas, or historic structures? If "Yes," complete Schedule D, Part II       7       X         8       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability: sarve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability: sarve as a custodian for amounts not listed in Part X, line 12, for escrow or custodial account liability: sarve as a custodian for amounts not listed in Part X, line 12, for escrow or custodial account liability: sarve as a custodian laccount liability: sarve as a custodian laccount liability: sarve as a custodian laccount sample Schedule D, Part V       9       X         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of lis total assets reported in Part X, line 167. If "Yes," complete Schedule D, Part VI       11a       X         11       X       Did the organization report an amount for lands tatements for the tax year VIIII.       11a       X         11       X       Did the organization report an amount for linvestments-program related in Part X, line 13 that is 5% or more of lis total assets reported in Part X, line 167.	5				
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? /f "Yes," complete Schedule D, Part //         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic instructures? II "Yes," complete Schedule D, Part I/       6       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? II "Yes," complete Schedule D, Part I/       7       X         9       Did the organization report an amount in Part X, ine 21, for escrew or custodial account liability: serve as a custodian for amounts not listed in Part X, ine 71, beart V, ord as applicable.       8       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasie-adownents? If "Yes," complete Schedule D, Part V       10       X         11       It he organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V       11a       X         11       X       Did the organization report an amount for larkest norther securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11b       X         11       Did the organization separate consolidated financial st		assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			37
have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If       6       X         Yes, "complete Schedule D, Part I       6       X         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes," complete Schedule D, Part II.       7       X         8       Did the organization maintain collections of works of art, historical treasures, or there similar assets? If 'Yes,"       8       X         9       Did the organization anount 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 neganization report an amount for laws." complete Schedule D, Part V       9       X         10       Did the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Part V       11       X         10       Did the organization report an amount for investments-program related in Part X, line 10? If 'Yes," complete Schedule D, Part VIII.       11       X         11       X       Did the organization report an amount for other isabilities in Part X, line 13? If 'Yes," complete Schedule D, Part VIII.       11       X         11       X       Did th			5		
"Yes," complete Schedule D, Part I       6       X         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes," complete Schedule D, Part II.       7       X         8       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes," complete Schedule D, Part II.       8       X         9       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-indownents? If 'Yes," complete Schedule D, Part VI.       9       X         10       Did the organization report an amount for investments-orther securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part VI.       10       X         11       Did the organization report an amount for investments-orther securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part VI.       11       X         11       X       11       X       11       X         12       Did the organization report an amount for investments-orther securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part VI.       11       X         13       Lit       X       11 <td>6</td> <td></td> <td></td> <td></td> <td></td>	6				
<ul> <li>Tob, complete Schedule D, Part III.</li> <li>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? II "Yes," complete Schedule D, Part III.</li> <li>Did the organization maintain collections of works of art, historical treasures, or other similar assets? II "Yes,"</li> <li>Bid 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 negatization services? II "Yes," complete Schedule D, Part V.</li> <li>Did the organization report an amount for low of the following questions is "Yes," then complete Schedule D, Part V.</li> <li>Bid the organization report an amount for land, buildings, and equipment in Part X, line 10? II "Yes," complete Schedule D, Part V.</li> <li>Did the organization report an amount for linvestments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? II "Yes," complete Schedule D, Part VI.</li> <li>Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? II "Yes," complete Schedule D, Part VI.</li> <li>Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? II "Yes," complete Schedule D, Part XI.</li> <li>Did the organization separate or consolidated financial statements for the tax year? II "Yes," and II the organization separate or consolidated financial statements for the tax year? II "Yes," and II the organization asperate or onsolidated, Independent audited financial statements for the tax year? II "Yes," and II the organization report on Part IX, line 13 file Schedule D, Part X</li> <li>Did the organization report on Part IX, columa (A), line 3, more than \$5,000 of grants or assistance</li></ul>					37
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"       8       X         9       Did the organization report an amount in Part X, inproved credit counseling, debt management, credit repair, or debt management, credit repair, or debt management, credit repair, or debt meganizations services? If "Yes," complete Schedule D, Part V       9       X         10       Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V       9       X         11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11       X         11       Did the organization report an amount for investments-orber securities in Part X, line 12? It is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11       X         12       Did the organization report an amount for other assets in Part X, line 25% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XII       11       X         13       Did the organization orbort an amount for other assets in Part X, line 25% or more of its total assets reported in Part X, line 16? If "Yes," comp			6		
Built the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II       8       X         Built the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV       8       X         Did the organization for amounts not listed in Part X, ior provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V       9       X         10       Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V       10       X         12       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.       11       X         11       X       Did the organization report an amount for investments-program related in Part X, line 10? If "Yes," complete Schedule D, Part VI.       11       X         11       X       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? If "Yes," complete Schedule D, Part X       114       X         12       Did the organization separate or consolitated financial statements for the tax year? If "Yes," and the organization separate oresonisolitated financial statements for the t	7				37
complete Schedule D, Part II       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? If "Yes," complete Schedule D, Part V       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       9       X         11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         11       Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11b       X         11       Did the organization report an amount for other isbilities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI       11c       X         11       Did the organization is parate, independent audited financial statements for the tax year'. If "Yes," complete Schedule D, Part X       11d       X         12       Did the organization obtain separate, independent audited			7		
<ul> <li>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, ior provide credit counseling, debt management, credit repair, or debt negotiation services? <i>II</i> "Yes," complete <i>Schedule D, Part V</i></li> <li>Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>II</i> "Yes," complete <i>Schedule D, Part V</i></li> <li>If the organization answer to any of the following questions is "Yes," then complete <i>Schedule D, Part V</i></li> <li>Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>II</i> "Yes," complete <i>Schedule D, Part VI</i></li> <li>Did the organization report an amount for line strements-brief sechedule <i>D, Part VI</i></li> <li>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>II</i> "Yes," complete <i>Schedule D, Part VI</i></li> <li>Did the organization report an amount for other assets in Part X, line 25 <i>II</i> "Yes," complete <i>Schedule D, Part XI</i></li> <li>Did the organization report an amount for other assets in Part X, line 25 <i>II</i> "Yes," complete <i>Schedule D, Part XI</i></li> <li>Did the organization's separate or consolidated financial statements for the tax year? <i>II</i> "Yes," <i>and II</i> the organization separate, independent audited financial statements to the sechedule D Part X.</li> <li>Did the organization assets of the TX, sector and the GND of the organization report on Part X.</li> <li>Did the organization asset organed the united states? <i>II</i> "Yes," complete <i>Schedule D</i>.</li> <li>Did the organization assets in Part X, line 25 <i>II</i> "Yes," complete <i>Schedule D</i>.</li> <li>Did the organization assets in Part X.</li> <li>Did the organization assets in Part X.</li> <li>Did the organization assets in Part X.</li>     &lt;</ul>	8				77
custodian for amounts not listed in Part X: or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yss," complete Schedule D, Part V       9       X         10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VII, VI, or X as applicable.       10       X         20 Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.       11a       X         20 Did the organization report an amount for investments-other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.       11c       X         4 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? If "Yes," complete Schedule D, Part VII.       11c       X         4 Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X       11e       X         11 b       X       11e       X       11e       X         4 Did the organization separate, independent audited financial statements for the tax year? If "Yes," and II the organization included in consolidated, independent aud			8		
debt negotiation services? If "Yes," complete Schedule D, Part IV       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization sanswer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VII, X, or X as applicable.       10       X         12       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         13       Did the organization report an amount for investments-orber securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11c       X         14       Did the organization report an amount for ther assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         15       Did the organization separate or consolidated financial statements for the tax year? If "Yes," and If the organization separate, independent audited financial statements for the tax year? If "Yes," and If the organization school described in section 170(b)(1)(A)(0)? If "Yes," complete Schedule D, Part X       112       X         14       X       Did the organization school as school described in section 170(b)(1)(A)(0)? If "Yes," complete Schedule D, Part X       11f       X         14       Did the organization school	9				
<ul> <li>10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V</li> <li>11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VII, VII, VI, VII, X, or X as applicable.</li> <li>a) Did the organization report an amount for investments-other securities in Part X, line 10? II "Yes," complete Schedule D, Part VI</li> <li>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? II "Yes," complete Schedule D, Part VII.</li> <li>c) 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? II "Yes," complete Schedule D, Part VII.</li> <li>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? II "Yes," complete Schedule D, Part VII.</li> <li>c) Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X</li> <li>d) Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and If the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization answerd "No" to line 12a, then complete Schedule D, Part X and XII so pointal.</li> <li>13 Is the organization assistence to any organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to any organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to any organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to any organization report on Part IX, column (A), line 3, more than \$5,000 of aggr</li></ul>					77
endowments, permanent endowments, or quasi-endowments? // "Yes," complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Parts VI, VII, VIII, VIII, X, or Xa as paplicable.       10       X         a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // f "Yes," complete Schedule D, Part VI       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? // f "Yes," complete Schedule D, Part VII.       11b       X         c 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? // f "Yes," complete Schedule D, Part VI       11c       X         d Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? // f "Yes," and // the organization obtain separate, independent audited financial statements for the tax year? // f "Yes," and // the organization a school described in section 170(b)(1)(A)(ii)? // Yes," complete Schedule D, Part X       11d       X         12a       Did the organization a school described in section 170(b)(1)(A)(ii)? // Yes," complete Schedule E       11f       X         11d       tax       11b       X       11d       X         12a       Did the organization aschool			9		
1       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part 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? If "Yes," complete Schedule D, Part VI       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? If "Yes," complete Schedule D, Part VII.       11b       X         c       Did the organization report an amount for investments-orgarm related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.       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? If "Yes," complete Schedule D, Part VII.       11c       X         e       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         f       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       113       X         13       Is the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, invest	10				v
VII, VIII, IX, or X as applicable.       a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       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? If "Yes," complete Schedule D, Part VII       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? If "Yes," complete Schedule D, Part VII       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? If "Yes," complete Schedule D, Part VII       11c       X         e) Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets the organization opport an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         f) Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if the organization notude in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X       11d       X         12a       X       Was the organization neport on amount for other seeses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments for the tax year? If "Yes," and if the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assist			10		<u> </u>
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b       Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12 a		122		x
the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	ь		120		
13       Is the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         15       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? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts II and IV       15       X         16       X         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts II and IV       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? If "Yes," complete Schedule G, Part I (see instructions)       17       X         18       Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X	u		12h	x	
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20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	13		19		х
	20 2				
		If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

Form **990** (2012)

JSA

Form 9 Part	90 (2012) V Checklist of Required Schedules (continued)		F	Page 4
Pari	Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		163	
21	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States	21		
22	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
		23	х	
24 0	employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
b		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
لم	to defease any tax-exempt bonds?	240 24d		
d 25 o	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25a		x
h	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	254		
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?	25h		х
	If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	26		х
07	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		х
~~	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
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):			х
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			v
	Schedule L, Part IV.	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			v
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	v	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			v
	conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			v
	Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			v
	complete Schedule N, Part II.	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		77	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33	X	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		<u> </u>
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>x</u>
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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

-	990 (2012)		F	Page 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			•
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 29			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	_		
	reportable gaming (gambling) winnings to prize winners?	1c		
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 157		х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	•	
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	3a		х
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b		
	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i> At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
		4a		х
h	account)? If "Yes," enter the name of the foreign country: ►	τu		
b	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	•		
•	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	00		
	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	30		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.			
а	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 9	90 (2012)			Page <b>6</b>
Part				"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See ir			
	Check if Schedule O contains a response to any question in this Part VI		• •	X
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	5		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 23	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			37
	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, or 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:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
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 in Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	Ľ	
		r	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		<u> </u>
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	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	х	
	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		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	501(c)	(3)s o	nly)
	available for public inspection. Indicate how you made these available. Check all that apply.			
	X       Own website       Another's website       X       Upon request       Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	f inte	rest p	oolicy,
	and financial statements available to the public during the tax year.		'	,
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne		
	Organization: ▶ ROB ZEASKE 1140 GERVAIS AVE MAPLEWOOD, MN 55109 651-209-7901			
JSA		Form	990	(2012)

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
	Check if Schedule O contains a response to any question in this Part VII
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

		(C)								
(A)	(B)		Position					(D)	(E)	(F)
Name and Title	Average					than c		Reportable	Reportable	Estimated
	hours per					is both		compensation	compensation from	amount of other
	week (list any hours for		officer and a director/trustee)				from the	related organizations	compensation	
	related	Indi or d	ndi st ffi ev ng j organ		organization	(W-2/1099-MISC)	from the			
	organizations	dividual t director	itutic	ĕr	employee	lest	ner	(W-2/1099-MISC)		organization and related
	below dotted line)	al tru	onal		oloye	e				organizations
	nine)	ıste	trus		ě	pen				
		ω	tee			sate				
				_		٩				
(1) JOEL ANDERSON	1.00									
BOARD MEMBER		х						0	0	0
(2) BRIAN AUDETTE	1.00									
BOARD MEMBER		х						0	0	0
(3) JILL BICKFORD	1.00									
BOARD MEMBER		Х						0	0	0
(4) TOM BUTTERFIELD	1.00									
VICE CHAIR		Х		х				0	0	0
(5) ERIN CARNISH	1.00									
BOARD MEMBER		Х						0	0	0
(6) EMILY COBORN	1.00									
BOARD MEMBER		х						0	0	0
(7) BILL FINNEGAN	1.00									
BOARD MEMBER		Х						0	0	0
(8) SARAH GEISERT	1.00									
MEMBER AT LARGE		Х						0	0	0
(9) JIM GILLIAM	1.00									
BOARD CHAIR		Х		Х				0	0	0
(10)ROB JOHNSON	1.00									
BOARD MEMBER		Х						0	0	0
(11)TOM JOLLIE	1.00									
BOARD MEMBER		х						0	0	0
(12) MARTIN JUHN	1.00									
BOARD MEMBER		Х						0	0	0
(13) PETER LAWYER	1.00									
BOARD MEMBER		X						0	0	0
(14)DR. CRAIG LEWIS	1.00									
BOARD MEMBER		X						0	0	0
JSA										Form <b>990</b> (2012)

JSA

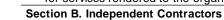
Form 990 (2012)

Page 7

Form	990	(2012)	

Form 990 (2012)												Page 8
Part VII Section A. Officers, Directors, T	rustees, Ke	y En	nplo	bye	es,	and H	igh	est Compensat	ed Employees (co	ontinu	ied)	
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average hours per week (list any hours for	box,	unles	heck ss pe d a d	erson	e than on is both a or/trustee	ın e)	Reportable compensation from the	Reportable compensation from related organizations	а	Estimated imount of other mpensati	f
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org ar	from the ganizatio nd related ganization	on d
15) GLENN MCCABE	1.00											
BOARD MEMBER		x						0	0			
16) BILL MCDONALD	1.00											
BOARD SECRETARY		x		х				0	0			
17) BONNIE MCPHEE	1.00											
BOARD MEMBER		Х						0	0			
18) JON MCTAGGART	1.00											
BOARD MEMBER		X						0	0			
19) JOE MOLINE	1.00											
BOARD MEMBER		X						0	0			
20) CHRIS NEUGENT	1.00											
BOARD MEMBER		X						0	0			
21) JAMIE RICE	1.00											
BOARD TREASURER		X		Х				0	0			
22) KIRSTEN VOSEN	1.00											
BOARD MEMBER		X						0	0			
23) MIKE WITT	1.00											
BOARD MEMBER		X						0	0			
24) ROB ZEASKE	40.00											
CHIEF EXECUTIVE OFFICER				х				202,673.	0			
25) ROBERT CHATMAS	40.00											
CHIEF OPERATING OFFICER				Х				129,196.	0		10,6	543
1b Sub-total							▶∟	0	0			
c Total from continuation sheets to Part VII,	-						▶∟	570,974.	0		29,5	
d Total (add lines 1b and 1c)								570,974.	0		29,5	501
2 Total number of individuals (including but no reportable compensation from the organizati			liste 5	d al	bov	e) who	rec	eived more than	\$100,000 of			
											Yes	No
3 Did the organization list any former off employee on line 1a? If "Yes," complete Sche										3		x
4 For any individual listed on line 1a, is the												
4 For any individual listed on line Ta, is the organization and related organizations g individual											x	

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual 5 for services rendered to the organization? If "Yes," complete Schedule J for such person



Complete this table for your five highest compensated independent contractors that received more than \$100,000 of 1 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	<b>(C)</b> Compensation
A'	FTACHMENT 3		
2	Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ► 5	e listed above) who received	

х

х

4

5

Part VII Section A. Officers, Directors, Tru	istees, Ke	y Em	plo	bye	es,	and I	lig	hest Compensat	ed Employe	es (co	ontinue	d)			
(A) Name and title	<b>(B)</b> Average				<b>C)</b> sition			(D) Reportable	<b>(E)</b> Reportable						
	hours per week (list any hours for	box, office	unles er and	heck ss pe d a d	mor erson lirect	e than c is both tor/trust	an ee)	compensation from the	compensation related organization	from ns	comp	ount of other oensatio om the			
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensatec employee	Former	organization (W-2/1099-MISC)	(W-2/1099-M	ISC)	orga and	in the anization related nization	Ł		
26) JANE HOPKINS GOULD	40.00														
CHIEF FINANCIAL OFFICER				х				145,910.		0		10,1	17		
27) ELINOR LUCAS	40.00	-													
HFMN CAMPAIGN OFFICER				X				93,195.		0		8,7	741		
		-													
		-													
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A				 										
<ul> <li>2 Total number of individuals (including but not reportable compensation from the organization</li> </ul>	limited to t	hose l	liste				o re	ceived more than	\$100,000 of						
												Yes	No		
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											3		x		
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual	eater than	\$15	60,0	00?	⁻ It	f "Yes	s,"	complete Schedu	le J for su	ich	4	x			
<ul> <li>5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye</li> </ul>	accrue co	mpen	sati	on t	fron	n any	un	related organization	on or individu	lal	5		x		
Section B. Independent Contractors	<i>bo, compre</i>	10 001	1040		101	ouon	<i>p</i> 0 <i>i</i>		<u></u>	-					
<ol> <li>Complete this table for your five highest com compensation from the organization. Report c year.</li> </ol>															
(A) Name and business add	lress							<b>(B)</b> Description of se	ervices	C	<b>(C)</b> ompens	ation			
							+								
							1								

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

Form 990 (2012)

	990 (2							Page 9
Par	t VII				ion in this Dont \////			V
		Check if Schedule O co	ontains a respo	nse to any quest	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns		858,719.				
9ran oun	b	Membership dues						
ts, C Am	с	Fundraising events		833,211.				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations	1d					
ons, Sim	е	Government grants (contribu	tions) 1e	1,687,632.				
utio	f	All other contributions, gifts, gran	its,					
oth		and similar amounts not included	above . 1f	121,541,488.				
Con	g	Noncash contributions included i		110,724,843.				
	h	Total. Add lines 1a-1f	<u></u>		124,921,050.			
enu		HOOD DIGEDIDITITION		Business Code	1 020 540	1 020 540		
Rev	2a	FOOD DISTRIBUTION FOOD PURCHASE		624200 624200	1,829,549.	1,829,549.		
ice	b	FOOD FORCHASE		024200	7,034,099.	7,034,099.		
er v	c d							
Program Service Revenue	u o							
gra	f	All other program service rev	enue					
Pro	g	Total. Add lines 2a-2f			8,864,448.			
	3	Investment income (includin						
		other similar amounts)		▶	16,347.			16,347.
	4	Income from investment of t	ax-exempt bond p	proceeds ►	0			
	5	Royalties			0			
			(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
	C L	Rental income or (loss)			0			
	d	Net rental income or (loss) .	(i) Securities	(ii) Other	0			
	7a	Gross amount from sales of	158,384.	30,487.				
	b	assets other than inventory Less: cost or other basis						
	b	and sales expenses	157,327.	2,273.				
	с	Gain or (loss)	1,057.	28,214.				
	d	Net gain or (loss)		<u></u>	29,271.			29,271
Pe	8a	Gross income from fundra	iising					
ent		events (not including \$	833,211.	ATCH 4				
é		of contributions reported on	line 1c).					
л К		See Part IV, line 18						
Other Revenue	b	Less: direct expenses	b	350,594.	55.000	_		FF 000
0	C Oc	Net income or (loss) from fur		···· · · · · · · · · · · · · · · · · ·	-55,829.			-55,829
	9a	Gross income from gaming a See Part IV, line 19						
	b	Less: direct expenses						
	c	Net income or (loss) from ga			0			
	10a	Gross sales of invento	•					
		returns and allowances						
	b	Less: cost of goods sold	b					
	c	Net income or (loss) from sal	les of inventory		0			
		Miscellaneous Reven	ue	Business Code				
	11a	PALLET SALES		900099	42,685.			42,685.
	b	MISC REVENUE		900099	20,139.			20,139.
	С	MERCHANDISE SALES		900099	715.			715.
	d	All other revenue		L	(2, 520			
	е 12	Total. Add lines 11a-11d			63,539. 133,838,826.	8,864,448.		53,328.
	14	Total revenue. See instructio		•••••	103,000,020.	0,007,440.		53,328.

JSA 2E1051 1.000

### Part IX Statement of Functional Expenses

Check if Schedule O contains a response to any question in this Part IX (A) Total expenses (B) (C) Management and (D) Fundraising Do not include amounts reported on lines 6b, 7b, Program service 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to governments and 108,786,360. 108,786,360. organizations in the United States. See Part IV, line 21 . Grants and other assistance to individuals in 2 7,150,129 7,150,129 the United States. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the 0 United States. See Part IV, lines 15 and 16 0 4 Benefits paid to or for members 5 Compensation of current officers, directors, 885,619. 885,619. trustees, and key employees 6 Compensation not included above, to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 6,963,723. 5,218,893. 755,513. 989,317. Other salaries and wages 7 8 Pension plan accruals and contributions (include section 402,471. 263,171. 82,455 56,845. 401(k) and 403(b) employer contributions) 893,423. 585,011 241,761. 66,651. Other employee benefits 9 586,202. 387,952. 120,726. 77,524. 10 Payroll taxes Fees for services (non-employees): 11 a Management 1,610. 1,610. **b** Legal 46,300 46,300. c Accounting 4,358. 4,358. d Lobbying 843,174. 843,174. e Professional fundraising services. See Part IV, line 17 4,297. f Investment management fees 4,297. g Other. (If line 11g amount exceeds 10% of line 25, column 317,719 369,816 52,097. (A) amount, list line 11g expenses on Schedule O.) 436,454. 210,116 18,885. 207,453. Advertising and promotion 12 1,208,185 703,192. 263,449. 241,544. 13 Office expenses 189,957. 18,488. 171,469. 14 Information technology 0 15 Royalties 664,230. 772,884. 108,654. 16 Occupancy 280,042. 174,174. 61,257. 44,611. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings 60,543. 57,826 1,762. 955. 20 Interest 21 Payments to affiliates 1,082,517. 1,046,729. 16,495. 19,293. Depreciation, depletion, and amortization 22 222,181 91,365 111,852. 18,964. Insurance 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 5,000. a ASSISTANCE TO AGENCIES 1,909,147. 1,848,574 55,573. 1,206,293. 72,084. **b VEHICLE EXPENSE** 1,134,209. c HUNGER SOLUTIONS FEE 688,327. 688,327. d CULTIVATION/ACQUISITION 354,763. 354,763. 136,467. 11,966. 88,009. 36,492. e All other expenses ____ 135,485,242. 129,382,957. 3,088,182. 3,014,103. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) 0

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

JSA 2E1052 1.000

Form 990 (2012)

Pa	art X	Balance Sheet		
		Check if Schedule O contains a response to any question in this Pa	art X	х Х
			<b>(A)</b> Beginning of year	<b>(B)</b> End of year
	1	Cash - non-interest-bearing	0 1	0
	2	Savings and temporary cash investments	5,069,923. 2	3,735,143.
	3	Pledges and grants receivable, net	1,880,819. 3	1,643,241.
	4	Accounts receivable, net	860,881. 4	661,634.
	5	Loans and other receivables from current and former officers, directors,		
		trustees, key employees, and highest compensated employees.		
		Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	. 05	0
	6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers		
		and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		0
ts	-	organizations (see instructions). Complete Part II of Schedule L		0
Assets	7	Notes and loans receivable, net		6,630,465.
Ř	8	Inventories for sale or use Prepaid expenses and deferred charges ATCH 6	6,142,369. 8 16,123. 9	135,508.
	-		. <u>10,123.</u> g	155,500.
	IVa	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 11,906,284		
	h	Less: accumulated depreciation 10b 7,303,715		4,602,569.
	11	Investments - publicly traded securities <b>ATCH</b> 7	1,007,208.11	760,713.
	12	Investments - other securities. See Part IV, line 11	0 12	0
	13	Investments - program-related. See Part IV, line 11		0
	14	Intangible assets		0
	15	Other assets. See Part IV, line 11	77,213.15	51,313.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	19,658,291. 16	18,220,586.
	17	Accounts payable and accrued expenses	. 940,208. 17	1,012,875.
	18	Grants payable		0
	19	Deferred revenue	. 0 19	0
	20	Tax-exempt bond liabilities	. 0 20	0
ies	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0
Liabilities	22	Loans and other payables to current and former officers, directors,		
Liat		trustees, key employees, highest compensated employees, and		0
		disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties		1,450,024.
	23 24	Unsecured notes and loans payable to unrelated third parties	•	1,150,021
	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		1,100,591.
	26	Total liabilities. Add lines 17 through 25		3,563,490.
es		Organizations that follow SFAS 117 (ASC 958), check here  X and complete lines 27 through 29, and lines 33 and 34.		
anc	27	Unrestricted net assets	12,697,594. 27	11,671,930.
Bala	28	Temporarily restricted net assets		2,985,166.
Ъ	29	Permanently restricted net assets		0
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here  and complete lines 30 through 34.		
its (	30	Capital stock or trust principal, or current funds	30	
Net Assets or	31	Paid-in or capital surplus, or land, building, or equipment fund	31	
t <u>A</u>	32	Retained earnings, endowment, accumulated income, or other funds	32	
Ne	33	Total net assets or fund balances	16,303,512. 33	14,657,096.
	34	Total liabilities and net assets/fund balances	19,658,291. 34	18,220,586.

Form 9	90 (2012)				Pa	ge <b>12</b>			
Part	XI Reconciliation of Net Assets								
	Check if Schedule O contains a response to any question in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1		.33,8					
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	.35,4					
3	Revenue less expenses. Subtract line 2 from line 1	3		-1,6					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		16,3	303,	512.			
5	Net unrealized gains (losses) on investments	5							
6	Donated services and use of facilities	6				0			
7	Investment expenses	7				0			
8	Prior period adjustments	8				0			
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line								
	<u>33,</u> column (B))	10		14,6	557,	096.			
Part									
	Check if Schedule O contains a response to any question in this Part XII								
				[	Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplair	ו in						
	Schedule O.								
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	•.•		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were com	pilec	or						
	reviewed on a separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?			2b	x				
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ed o	n a						
	separate basis, consolidated basis, or both:								
	Separate basis X Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	-							
	of the audit, review, or compilation of its financial statements and selection of an independent account			2c	x				
	If the organization changed either its oversight process or selection process during the tax year, e	xplai	n in						
	Schedule O.								
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	fort	h in		v				
	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 und		the		x				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits		3b	•				

SCHE	DU	LE	Α
(Form	990	or	990-EZ)

Department of the Treasury

# **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions

		enue Service	P Alluoi	1 10 1 0111 330 01 1 0111 330-		000 3	epulate				utio e tie	mspee	
		he organization HARVEST HEAR	ידא א זידי						Emplo	yeriden 22.		5654	er
-				o (All organizations mu		nnlata	thio no	vrt ) Co	o inotri			7054	
Pa				s (All organizations mu						JCIIONS			
				cause it is: (For lines 1 th	-		-		-				
1				association of churches		ea in s	ection	)(a)011	1)(A)(I)	•			
2				(1)(A)(ii). (Attach Schedul	,		- 470/h						
3				ervice organization descri			-			470/1			
4				erated in conjunction wi	ith a r	iospita	i descri	ibea in	Sectio	n 170(b	)(1)(A	(III). E	inter the
-		hospital's name, cit											
5				nefit of a college or univ	ersity	ownea	or ope	erated t	by a go	vernme	ntai u	nit des	cribed in
~		section 170(b)(1)(			ام مالي			(L)(A)(	A \ ( \				
6	v		-	or governmental unit des						:			ما میں ام
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>section 170(b)(1)(A)(vi)</b> . (Complete Part II.)											
~						<b>7</b>							
8				on 170(b)(1)(A)(vi). (Com							<b>.</b>	<i></i>	
9		-	-	es: (1) more than 331/3%									-
		-		exempt functions - subj			-						
				ome and unrelated busi				-		1 511	lax) I		1511165565
10			-	ne 30, 1975. See <b>section</b> ted exclusively to test for	-		-		-	、			
11			• '	rated exclusively to test for the	•	•				•	or t	o oorn	out the
		-		ipported organizations de			-					-	
				es the type of supporting					-				30011011
		a Type I	<b>b</b> Type II	c Type III-Function	-						-		egrated
е				the organization is not	-	-							0
C			-	gers and other than one			-		-	-			-
		509(a)(1) or sectio		golo and other than one			nory ou	pponot	rorgan	20110110	ucot		1 0000001
f				n determination from the	e IRS	that it	is a Tv	vne I T	vne II	or Type	e III e	upporti	na
•		organization, check			0 11 0	that it	10 4 1 )	, po 1, 1	уро II,	01 199	5 0	appon	
g		-		nization accepted any gift	t or co	ntrihuti	on from	any of	the				••
9		following persons?	-	meation accopted any gin			011110111	i any oi					
				ectly controls, either alor	ne or t	onethe	r with	nerson	s desc	rihed in	(ii)	ſ	Yes No
			-	dy of the supported organ		-	, with	percer	0 0000		(")	11g(i)	X
				scribed in (i) above?	Lation	•••						11g(ii)	x
				on described in (i) or (ii) a	hove?							11g(iii)	x
h			•	ut the supported organiza		· · · ·							
		ame of supported	(ii) EIN	(iii) Type of organization		ls the	<b>(v)</b> Did y	ou notify	(vi)	s the	(vii) A	mount of	monetary
		organization		(described on lines 1-9	organi	zation in listed in	the orga	anization	organiz	zation in	. ,	suppo	
				above or IRC section (see instructions))	your g	overning ment?	in col. your su			rganized U.S.?			
					Yes	No	Yes	No	Yes	No			
(A)													
(P)						1							
(B)													
( <b>C</b> )						1							
(C)													
<u> </u>													
(D)													
(E)													
(E)													
Tota	al												

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

Schedule A (Form 990 or 990-EZ) 2012

OMB No. 1545-0047

Open to Public

2

20

Schedule A (Form 990 or 990-EZ) 2012

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	61,563,926.	85,162,653.	98,705,941.	106,371,915.	124,921,050.	476,725,485.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	61,563,926.	85,162,653.	98,705,941.	106,371,915.	124,921,050.	476,725,485.
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).						0
6	Public support. Subtract line 5 from line 4.						476,725,485.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	61,563,926.	85,162,653.	98,705,941.	106,371,915.	124,921,050.	476,725,485.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	88,941.	64,081.	35,620.	17,093.	16,347.	222,082.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) <b>ATCH. 1</b> .	3,484.	7,175.	75,150.	53,174.	63,538.	202,521.
11	Total support. Add lines 7 through 10						477,150,088.
12	Gross receipts from related activities, etc. (s	,				12	37,797,934.
13	First five years. If the Form 990 is f organization, check this box and stop here	<u> </u>					
	tion C. Computation of Public Sup	•	•				99.91%
14	Public support percentage for 2012 (li					14	99.88%
15	Public support percentage from 2011					15	
16a	331/3% support test - 2012. If the c	-					
	this box and <b>stop here.</b> The organizati						
b	331/3% support test - 2011. If the o						
47-	check this box and <b>stop here.</b> The org						
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization Part IV how the organization meets t						
	-			-	-		
۲.	organization 10%-facts-and-circumstances test - 2						
a							
	15 is 10% or more, and if the orga Explain in Part IV how the organizati						
4.6	supported organization						▶
18	Private foundation. If the organization instructions						

Schedule A (Form 990 or 990-EZ) 2012

### Schedule A (Form 990 or 990-EZ) 2012

# Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Part III

Sec	tion A. Public Support		<b></b>	1	1	I	
Caler	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(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						
	Amounts included on lines 1, 2, and 3						
	received from disgualified persons						
b	Amounts included on lines 2 and 3		1				
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
~	Add lines 7a and 7b.						
8	Public support (Subtract line 7c from						
•	line 6.)						
Sec	tion B. Total Support		1				
	ndar year (or fiscal year beginning in) <b>&gt;</b>	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						.,
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
h	sources Unrelated business taxable income (less		+				
5	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	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 IV.)		<b> </b>				
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)		<u> </u>				
14	First five years. If the Form 990 is for	-					
	organization, check this box and stop here					<u></u>	<u></u> ▶
Sec	tion C. Computation of Public Sup	-					
15	Public support percentage for 2012 (line 8					15	%
16	Public support percentage from 2011 Sche					16	%
Sec	tion D. Computation of Investmer						
17	Investment income percentage for 2012 (li					17	%
18	Investment income percentage from 2011					18	%
	331/3% support tests - 2012. If the or	ganization did n	ot check the bo	x on line 14, and	d line 15 is more	e than 331/3%,	and line
19 a	331/3% support tests - 2012. If the org					supported organi	zation
19a	17 is not more than 331/3%, check th	is box and <b>sto</b>	p here. The org	anization qualifie	s as a publicly	supported organ	
		-	•				
	17 is not more than 331/3%, check th	anization did not	check a box on	line 14 or line 19	9a, and line 16 is	more than 331/3	3 %, and
	17 is not more than 331/3%, check th 331/3% support tests - 2011. If the orga	anization did not this box and <b>s</b>	check a box on top here. The or	line 14 or line 19 ganization qualifi	9a, and line 16 is es as a publicly	s more than 331/ supported organ	3 %, and zation ►

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

SCHEDULE A, PART II -	- OTHER INCOM	E			ATTACHMENT 1	
DESCRIPTION	2008	2009	2010	2011	2012	TOTAL
MISCELLANEOUS INCOME	3,484.	7,175.	15,325.	22,013.	20,854.	68,851.
PALLET SALES			59,825.	31,161.	42,684.	133,670.
TOTALS	3,484.	7,175.	75,150.	53,174.	63,538.	202,521.

	0 or 990-EZ)					
(	,	For O	rganizations Exempt From Incom	ne Tax Under section	on 501(c) and section 52	7   2012
		► Comp	lete if the organization is described be	elow. 🕨 Attack	n to Form 990 or Form 990	EZ. Open to Public
	t of the Treasury venue Service		► See separa	te instructions.		Inspection
-		red "Yes,"	to Form 990, Part IV, line 3, or Form	990-EZ, Part V, line 4	6 (Political Campaign Activit	ies), then
<ul> <li>Secti</li> </ul>	ion 501(c)(3) org	anizations:	Complete Parts I-A and B. Do not complete	lete Part I-C.		
<ul> <li>Secti</li> </ul>	ion 501(c) (other	than section	on 501(c)(3)) organizations: Complete F	Parts I-A and C below.	Do not complete Part I-B.	
<ul> <li>Secti</li> </ul>	ion 527 organiza	tions: Comp	blete Part I-A only.			
If the orga	anization answe	ered "Yes,"	to Form 990, Part IV, line 4, or Form	990-EZ, Part VI, line 4	7 (Lobbying Activities), then	
<ul> <li>Secti</li> </ul>	ion 501(c)(3) org	ganizations	that have filed Form 5768 (election un	nder section 501(h)): Co	omplete Part II-A. Do not com	plete Part II-B.
<ul> <li>Secti</li> </ul>	ion 501(c)(3) org	ganizations	that have NOT filed Form 5768 (election	on under section 501(h	)): Complete Part II-B. Do no	t complete Part II-A.
If the orga	anization answe	ered "Yes,"	to Form 990, Part IV, line 5 (Proxy Ta	ax) or Form 990-EZ, Pa	art V, line 35c (Proxy Tax), th	ien
		), or (6) org	anizations: Complete Part III.			
Name of or	rganization				Employer identif	ication number
	HARVEST H				23-74	
Part I-A	Complete	e if the o	rganization is exempt under s	section 501(c) or i	is a section 527 organ	ization.
1 Pro	vide a descript	ion of the	organization's direct and indirect p	political campaign a	ctivities in Part IV.	
2 Poli	itical expenditu	res			▶ \$	
3 Volu	unteer hours					
Part I-B			rganization is exempt under s			
1 Ent	er the amount	of any exc	ise tax incurred by the organizatio	on under section 495	;5▶\$	
2 Ent	er the amount	of any exc	ise tax incurred by organization m	anagers under sect	ion 4955 💶 🕨 🕈	
			a section 4955 tax, did it file Form			
4a Wa	s a correction m	nade?				Yes No
	es," describe ir					
Part I-C	Complete	e if the o	rganization is exempt under	section 501(c), ex	cept section 501(c)(3)	
1 Ente	er the amount	directly e	xpended by the filing organizatior	n for section 527 e	xempt function	
acti	vities				▶\$	
2 Ente	er the amount	of the filin	g organization's funds contributed	to other organizat	ions for section	
527	' exempt functi	on activitie	es		▶\$	
			nditures. Add lines 1 and 2. En			
4 Did	the filing organ	nization file	Form 1120-POL for this year?			Yes No
			and employer identification numb			
			s. For each organization listed, en			
			ributions received that were prom			<b>u</b>
as a	a separate segr	egated fur	nd or a political action committee	(PAC). If additional	space is needed, provide	information in Part IV.
	<b>(a)</b> Name		(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
					filing organization's	contributions received and promptly and directly
					funds. If none, enter -0	delivered to a separate
						political organization. If
						none, enter -0
(1)				_		
(2)						
(2)						
				_		
(3)				-		
(3)				-		
(2) (3) (4) (5)				-		
(3) (4)				-		
(3) (4)				-		

**Political Campaign and Lobbying Activities** 

SCHEDULE C

OMB No. 1545-0047

Sch	edule C (Form 990 or 990-EZ) 2012			Page Z
Pa	art II-A Complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	l filed Form 5768 (elec	tion under
Α	Check ► X if the filing organization	belongs to an affiliated group (and list in Pa	art IV each affiliated gro	oup member's
	name, address, EIN, exp	enses, and share of excess lobbying expendence	ditures).	•
в		checked box A and "limited control" provisi	,	
	Limits on Lobi	bying Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" m	eans amounts paid or incurred.)	organization's totals	group totals
1;	a Total lobbying expenditures to influence	e public opinion (grass roots lobbying)		
I	<ul> <li>Total lobbying expenditures to influence</li> </ul>	e a legislative body (direct lobbying)	4,358.	
	c Total lobbying expenditures (add lines	1a and 1b)	4,358.	
(	d Other exempt purpose expenditures		129,378,599.	
•		dd lines 1c and 1d)	129,382,957.	
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.		
9	g Grassroots nontaxable amount (enter	25% of line 1f)	250,000.	
I	h Subtract line 1g from line 1a. If zero of	less, enter -0-	0	0
i	Subtract line 1f from line 1c. If zero or		0	0
j		o on either line 1h or line 1i, did the organi		
	reporting section 4911 tax for this yea	r?		Yes No

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	<b>(d)</b> 2012	<b>(e)</b> Total				
2 a	Lobbying nontaxable amount				1,000,000.	1,000,000.				
b	Lobbying ceiling amount (150% of line 2a, column (e))					1,500,000.				
c	Total lobbying expenditures				4,358.	4,358.				
d	Grassroots nontaxable amount				250,000.	250,000.				
e	Grassroots ceiling amount (150% of line 2d, column (e))					375,000.				
f	Grassroots lobbying expenditures									

Schedule C (Form 990 or 990-EZ) 2012

referendum, through the use of:       Image: Comparison of the state	-	
b       Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?         c       Media advertisements?         d       Mailings to members, legislators, or the public?         e       Publications, or published or broadcast statements?         f       Grants to other organizations for lobbying purposes?         g       Direct contact with legislators, their staffs, government officials, or a legislative body?	-	
c       Media advertisements?	_	
d       Mailings to members, legislators, or the public?         e       Publications, or published or broadcast statements?         f       Grants to other organizations for lobbying purposes?         g       Direct contact with legislators, their staffs, government officials, or a legislative body?		
e       Publications, or published or broadcast statements?         f       Grants to other organizations for lobbying purposes?         g       Direct contact with legislators, their staffs, government officials, or a legislative body?		
g       Direct contact with legislators, their staffs, government officials, or a legislative body?		
g       Direct contact with legislators, their staffs, government officials, or a legislative body?		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		
i Other activities?		
j Total. Add lines 1c through 1i	L	
<b>2</b> a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	_	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	L	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or	section	
501(c)(6).		
4 Mars substantially all (000/ as mars) dues resained nandedustible by members?		Yes No
<ol> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> </ol>		<u> </u>
<ul><li>3 Did the organization make only in-house lobbying expenditures of \$2,000 of less?</li><li>3 Did the organization agree to carry over lobbying and political expenditures from the prior year?</li></ul>	2	<u> </u>
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or		
answered "Yes."       1     Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		
political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
2 A superstant second to a set of $(222/2)(4)(4)$ set is a set of second set in the section $4(22/2)$ dues	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		
<ul> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the</li> </ul>		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	4 5	

#### Schedule C (Form 990 or 990-EZ) 2012 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed

During the year, did the filing organization attempt to influence foreign, national, state or local

description of the lobbying activity.

1

JSA 2E1266 1.000

(b)

Amount

(a)

No

Yes

BUI4GS K384 2/24/2014 4:19:17 PM V 12-7.12

PAGE 21

Part IV Supplemental Information (continued)

SCHEE	DULE D
(Form	990)

Department of the Treasury

Internal Revenue Service

# **Supplemental Financial Statements**

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

OMB No. 1545-0047
2012
Open to Public

	e of the organization		Employer identification number 23-7417654
	t Organizations Maintaining Donor Advised Funds o	or Other Similar Funds or	
	organization answered "Yes" to Form 990, Part IV, li	ine 6.	
	(a) D	onor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate contributions to (during year)		
	Aggregate grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisors in wri	ting that the assets held in a	donor advised
	funds are the organization's property, subject to the organization's	-	
	Did the organization inform all grantees, donors, and donor advis	-	
i	only for charitable purposes and not for the benefit of the donor		
	conferring impermissible private benefit?		
	t II Conservation Easements. Complete if the organiza	tion oneward "Vas" to Ea	Yes No
ai	Purpose(s) of conservation easements held by the organization (		1111 990, Part IV, III e 7.
	Preservation of land for public use (e.g., recreation or educa	, , , , , , , , , , , , , , , , , , , ,	f an historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
	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.	F	
		_	Held at the End of the Tax Year
l	Total number of conservation easements		2a
C	Total acreage restricted by conservation easements		2b
;	Number of conservation easements on a certified historic structu	ure included in (a)	2c
d	Number of conservation easements included in (c) acquired afte		
-	historic structure listed in the National Register		2d
	Number of conservation easements modified, transferred, release		•
	tax year ►		
	Number of states where property subject to conservation easem	ant is logated	
	Does the organization have a written policy regarding the periodi		
	violations, and enforcement of the conservation easements it hold		
	Staff and volunteer hours devoted to monitoring, inspecting, and	enforcing conservation ease	ements during the year
	▶		
	Amount of expenses incurred in monitoring, inspecting, and enfo	rcing conservation easemen	ts during the year
	▶\$		
	Does each conservation easement reported on line 2(d) above s		
	(i) and section 170(h)(4)(B)(ii)?		Yes No
	In Part XIII, describe how the organization reports conservation e	easements in its revenue and	expense statement, and
	balance sheet, and include, if applicable, the text of the footnote	to the organization's financia	al statements that describes the
	organization's accounting for conservation easements.	-	
Par	t III Organizations Maintaining Collections of Art, Histo	prical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to For	m 990, Part IV, line 8.	
			avanue statement and belance above
a	If the organization elected, as permitted under SFAS 116 (ASC works of art, historical treasures, or other similar assets held	for public exhibition. educ	cation, or research in furtherance of
	public service, provide, in Part XIII, the text of the footnote to its fi	inancial statements that desc	cribes these items.
,	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its re	evenue statement and balance shee
	works of art, historical treasures, or other similar assets held		cation, or research in furtherance o
	public service, provide the following amounts relating to these ite		
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		▶\$
	If the organization received or held works of art, historical tr		
	following amounts required to be reported under SFAS 116 (ASC		
а	Revenues included in Form 990. Part VIII. line 1		
a b	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X		▶ \$

Scheo Par	t III Organizations Maintaini	ng Coll	ections o	f Art, His	storical 1	Freasu	res,	or Ot	her Simi	lar Asse	ets (co		Page <b>2</b> Ied)
3	Using the organization's acquisitio collection items (check all that app		sion, and o	other recor	ds, check	c any o	of the	e follow	ing that a	ire a sigr	nificant	use c	of its
а	Public exhibition			d	_		-	program					
b	Scholarly research			е	Other								
С	Preservation for future gener												_
4	Provide a description of the organ XIII.	nization's	collections	s and expla	ain how t	hey fur	rther	the or	ganization'	s exemp	t purpo:	se in	Part
5	During the year, did the organization assets to be sold to raise funds rath	er than t	o be maint	ained as pa	irt of the c	organiza	ation	's collec	tion?	[	Yes		No
Par	t IV Escrow and Custodial A line 9, or reported an am					janizat	ion a	answei	red "Yes"	to Form	n 990,	Part	IV,
1a	Is the organization an agent, truste												-
	included on Form 990, Part X?									••••	Yes		No
b	If "Yes," explain the arrangement in	Part XIII	and comp	lete the foll	owing tab	le:			•				
-									A	mount			
ک لہ	Beginning balance Additions during the year						1c						
u	Distributions during the year						1d 1e						
e f	Ending balance						1f						
2a	Did the organization include an am										Yes		No
	If "Yes," explain the arrangement in												
Par													
i ai			rrent year	(b) Pric				rs back	(d) Three y		<b>(e)</b> Fou	r years	back
1a	Beginning of year balance	( )	,		,	.,					.,		
b	Contributions												
с	Net investment earnings, gains,												
	and losses												
d	Grants or scholarships												
е	Other expenditures for facilities												
	and programs												
f	Administrative expenses												
g	End of year balance												
2	Provide the estimated percentage	of the cur	rent year e	end balance	e (line 1g,	column	ı (a))	held as	:				
а	Board designated or quasi-endown	nent 🕨		_%									
b	Permanent endowment	%											
С	Temporarily restricted endowment		%										
-	The percentages in lines 2a, 2b, an												
3a	Are there endowment funds not in	the poss	ession of tl	he organiza	ation that	are hel	d and	d admir	istered for	the	r		
	organization by:										0.0	Yes	No
	(i) unrelated organizations										3a(i)		
ь	(ii) related organizations										3a(ii)		
	If "Yes" to 3a(ii), are the related org						• • •	• • • •			3b		
4	Describe in Part XIII the intended u		-										
Par	t VI Land, Buildings, and Equ	lipment.											
	Description of property			other basis tment)	`	ther)			cumulated eciation	(0	<b>l)</b> Book va		
1a						220,0						20,0	
b	Buildings				5,5	565,3	48.	2,9	94,119.		2,5	71,2	229.
c	Leasehold improvements					01 1			10 555			<b>—</b>	<u>)                                    </u>
d	Equipment					121,9			42,680.			79,2	
	Other					999,0			66,916.			32,0	
Tota	I. Add lines 1a through 1e. (Column	(d) musi	t equal Forr	n 990, Part	X, columr	n (B), lin	ne 10	(C).) <b></b>			4,6	02,5	<b>b</b> 69.

Schedule D (Form 990) 2012

Schedule D (Fo	,			Page 3
Part VII	Investments - Other Securities. See F	orm 990, Part X, line	ə 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
(1) Financia	I derivatives			
	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I)				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related. See F			
	(a) Description of investment type	(b) Book value	(c) Method of value Cost or end-of-year m	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13.)	no 4Γ		
Part IX	Other Assets. See Form 990, Part X, li			(h) De ale value
(1)	(a)	Description		(b) Book value
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	mn (b) must equal Form 990, Part X, col. (B) I	ine 15.).		•
Part X	Other Liabilities. See Form 990, Part X			
1.	(a) Description of liability	(b) Book value	e	
(1) Federa	al income taxes			
	AL AGENT PAYABLE	11,	776.	
(3) ACCRU	JED EXPENSES	737,	419.	
(4) CURRE	ENT PORTION OF DEFERRED RENT	8,	607.	
(5) DEFEF	RED RENT, NET OF CURRENT	67,	422.	
	OF CREDIT	200,		
	ENT PORTION OF CAPITAL LEASES	38,		
(8) CAPIT	TAL LEASES, NET OF CURRENT	36,	730.	
(9)				
(10)				
(11)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 1,100,	591.	
2. FIN 48 (A	SC 740) Footnote. In Part XIII, provide the text	of the footnote to the o	rganization's financial statements that	reports the organization's

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

Schedu	le D (Form 990) 2012		Page <b>4</b>
Part		n	
1	Total revenue, gains, and other support per audited financial statements	1	134,538,826.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities2b700,000.		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.) 2d		
е	Add lines 2a through 2d	2e	700,000.
3	Subtract line 2e from line 1	3	133,838,826.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.) 4b		
с	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	133,838,826.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu	irn	
1	Total expenses and losses per audited financial statements	1	136,185,242.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a 700,000.		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.) 2d		
е	Add lines 2a through 2d	2e	700,000.
3	Subtract line 2e from line 1	3	135,485,242.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.) 4b		
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	5	135,485,242.
Part			
	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro ation.		
SE	E PAGE 5		

Schedule D (Form 990) 2012

FINANCIAL STATEMENT FIN 48 (ASC 740) FOOTNOTE

PART X, LINE 2

THE ORGANIZATION IS EXEMPT, AS A PUBLIC CHARITY, FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND APPLICABLE STATE STATUTES. HOWEVER, INCOME FROM CERTAIN ACTIVIITIES NOT DIRECTLY RELATED TO THE ORGANIZATION'S TAX-EXEMPT PURPOSE COULD RESULT IN TAXABLE INCOME. THE ORGANIZATION HAS EVALUATED ITS TAX POSITIONS FOR UNCERTAINTY AND HAS NO UNRECOGNIZED TAX MATTERS THAT ARE REQUIRED TO BE DISCLOSED.

#### CONTRIBUTED SERVICES

SCHEDULE D, PART XII, LINE 2B

THE ORGANIZATION RECEIVED DONATED IN-KIND PROFESSIONAL BUSINESS SERVICES IN 2013 WHICH WERE RECORDED AS REVENUE AND EXPENSE AT THE FAIR VALUE AS ESTABLISHED BY THE DONOR OF \$700,000.

Complete if the organization answered Yes' to Form 990-Part N, lines 17, 30, 00 Form 990-PZ, line 8a, 1500, 00 Form 990, Part IV, line 17.       Employer identification number       23 - 7417654         Part       Fundraising Activities. Complete if the organization answered Yes' to Form 990, Part IV, line 17.       Form 990-PZ filers are not required to complete this part.       Indicate whether the organization raised funds through any of the following activities. Check all that apply.       Indicate whether the organization raised funds through any of the following activities. Check all that apply.         a       X       Mail solicitations       f       X       Solicitation of government grants         b       X       Internet and email solicitations       f       X       Solicitation of government grants         c       X       Phone solicitations       g       X       Solicitation of non-government grants         c       X       Internet and email solicitations       g       X       Solicitation of government grants         a       X       Individual information argreement with any individual induraising events       Wes       No         b       If 'Yes,' list the ten highest paid individuals or entities (fundraisers)	SCHEDULE G Supplemental Information Regarding									
Comparison         Complete if the organization answered "Ves' to Form 390, Far N, the sta.         Open 16 Public           Internal Revenues basis         A Match to Form 390 of Form 390. For M States in Strong Strong States in Strong States in Strong States in Stron	(Form 990 or 990-EZ)		Fundraising	j or Ga	iming <i>i</i>	Activities				
Second HarVEST HEARTLAND       Employer identification number 23-7417654         Second HarVEST HEARTLAND       Form 990-E2 filers are not required to complete this part.         1       Indicate whether the organization answerd "Yes" to Form 990, Part IV, line 17.         a X       Mail solicitations       e       X       Solicitation of non-government grants         b X       Internet and email solicitations       f       X       Solicitation of government grants         c X       Phone solicitations       g       X       Solicitation of government grants         c X       Internet and email solicitations       g       X       Solicitation of government grants         d X       Internet and email solicitations       g       X       Solicitation of government grants         d X       Internet and email solicitations       g       X       Solicitation of government grants         d X       Internet and email solicitations       g       X       Solicitation of government grants         d X       Internet and email solicitations       g       X       Yes       No         b If "Yes," list the ten highest paid individuals or entities (fundraiser) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.       (Y) Amount paid to for realmal by individual (for entiting control dover graintation contentity (fundraser)       <	Department of the Treasury	-	organization entered n	nore than \$1	15,000 on Fo	rm 990-EZ, line 6a.	19, or if the			
Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.         Form 990-E2 filers are not required to complete this part.         a       X         Mail solicitations       e       X       Solicitation of non-government grants         b       X       Internet and email solicitations       f       X       Solicitation of government grants         c       X       None solicitations       g       X       Solicitation of government grants         c       X       None solicitations       g       X       Solicitation of government grants         c       X       Phore solicitations       g       X       Solicitation of government grants         c       X       Phore solicitations       g       X       Solicitation of government grants         d       X       Internet and email solicitations       g       X       Solicitation of government grants         d       X       Interplay and the organization have a written or oral agreement with any individual (including officers, directors, trustees or new problemation and address of individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be controbutions         f       Internet and address of individual fundraiser have out of oreating or control of control fundraiser is to be controbutions       (f) Amount paid to fundraiser is control	Name of the organization						Employer identification	on number		
Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.         Form 990-E2 filers are not required to complete this part.         a       X         Mail solicitations       e       X       Solicitation of non-government grants         b       X       Internet and email solicitations       f       X       Solicitation of government grants         c       X       None solicitations       g       X       Solicitation of government grants         c       X       None solicitations       g       X       Solicitation of government grants         c       X       Phore solicitations       g       X       Solicitation of government grants         c       X       Phore solicitations       g       X       Solicitation of government grants         d       X       Internet and email solicitations       g       X       Solicitation of government grants         d       X       Interplay and the organization have a written or oral agreement with any individual (including officers, directors, trustees or new problemation and address of individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be controbutions         f       Internet and address of individual fundraiser have out of oreating or control of control fundraiser is to be controbutions       (f) Amount paid to fundraiser is control	SECOND HARVEST H	EARTLAND					23-741765	4		
IFERENT         1       Indicate whether the organization raised funds through any of the following activities. Check all that apply.         1       Indicate whether the organization raised funds through any of the following activities. Check all that apply.         a       X       Main solicitations       Image: X         b       X       Internet and email solicitations       Image: X       Solicitation of government grants         c       X       Phone solicitations       Image: X       Solicitation of government grants         c       X       Phone solicitations       Image: X       Solicitation of government grants         d       X       Image: X       Phone solicitations       Image: X       Solicitation of government grants         2a       Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?       X       Yes       No         b       If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization       (w) Gross receipts from activity matching are listed in form eating by organization activity for eating by fundraiser listed in form eating by organization activity and activity and activity and activity and activity activity and activity and actity activity activity activity activity activity activi	Fundraisir		nolete if the organ	ization a	nswered	"Yes" to Form 9				
a       X       Mail solicitations       e       X       Solicitation of non-government grants         b       X       Internet and email solicitations       f       X       Solicitation of government grants         c       X       Phone solicitations       g       X       Solicitation of government grants         2a       Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?       X       Y es       No         b       If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.       (ii) Activity       (iii) Did fundraiser have custody or control of the organization or entity (fundraiser)       (iii) Activity       (iii) Did fundraiser have custody or control of the organization or entity (fundraiser)       (iv) Amount paid to (or retained by) organization         1       DIRECT MAIL       Yes       No       (iv) Grass receipts       (iv) Amount paid to (or retained by) organization         2       DIRECT MAIL       Yes       982,708       149,470       833,238.         2       DIRECT MAIL       X       558,226       571,211       -12,985.         3       TELE-       NoN       X       157,007	Form 990	-EZ filers are not	required to compl	ete this p	oart.					
b       X       Netroret and email solicitations       f       X       Solicitation of government grants         c       X       Phone solicitations       g       X       Special fundraising events         2a       Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?       X       Yes       No         b       If Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.         (I) Name and addness of individual or entity (fundraiser)       (fi) Activity       (fii) Did fundraiser have custody or control of custody or control of room activity       (f) Amount paid to (or retained by) corganization         1         1         0         1         1         0         1         1         0         1         1         1         1         1         1         1         1		•	sed funds through a	r	•					
c       X       Phone solicitations       g       X       Special fundraising events         2a       Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?       X       Test       No         bit fives," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.       (ii) Activity       (iii) Did fundraiser have or control of contrained by organization       (iii) Activity       (iii) Did fundraiser have organization is control with any endividual control with any endividual or entity (fundraiser)       (iv) Amount paid to (or relained by) organization         1       DIRECT MAIL       Yes       No         2       DIRECT MAIL       Yes       Yes       149,470       833,238.         2       DIRECT MAIL       Yes       Yes       149,470       833,238.         2       DIRECT MAIL       Yes       Yes       49,515.         3       TELE-       X       157,007       107,492       49,515.         3       TELE-       X       157,007       107,492       49,515.         4       MONTHLY       X       58,624       15,000       43,624.         5			е							
d X       In-person solicitations         2a Did the organization have a written or oral agreement with any individual (including officiers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?       X       Yes       No         b If Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.       (ii) Activity       (iii) Did fundraiser have control of control of or entity (fundraiser)       (v) Amount paid to (or retained by) fundraised to (or retained by) fundraised by)         0) Name and address of individual or entities (Tuntraiser have control of or entity (fundraiser)       (iii) Activity       (iii) Did fundraiser have control of		email solicitations	f		itation of g	government grants	6			
2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?       X Yes       No         b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.       (ii) Did fundraiser have custody or control of cont		ations	g	X Spec	cial fundra	ising events				
or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? X Yes No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Activity (iii) Did fundraiser have or entity (fundraiser is to be contributions? (iii) Activity (iii) Activity (iiii) Activity (iii) Activity (iii) Activity	d X In-person sol	icitations								
compensated at least \$5,000 by the organization.         (i) Name and address of individual or entity (fundraiser)       (ii) Activity       (iii) Did fundraiser have custody or control of contributions?       (iv) Amount paid to (or retained by) from activity       (iv) Amount paid to (or retained by) fundraiser listed in cost. (i)       (iv) Amount paid to (or retained by) form activity         1       DIRECT MAIL CULTIVATION       Yes       No       149,470.       833,238.         2       DIRECT MAIL CULTIVATION       X       558,226.       571,211.       -12,985.         3       TELE- ARIA COMMUNICATIONS       MARKETING       X       157,007.       107,492.       49,515.         4       MONTHLY       A       A       A       A       A       A         APPLEBY ARGANBRIGHT       GIVING       X       58,624.       15,000.       43,624.       5         6       Image: Amount and the amount of the amount and the								X Yes No		
(i) Name and address of individual or entity (fundraiser)       (ii) Activity       (iii) Activity       (iii) Activity       (iv) Gross receipts from activity       for retained by fundraiser inset in coll (i) fundraiser inset inset in coll (i) (i) retained by organization       (ii) Activity       (iii) Activity       (iii) Activity       (iv) Around inset				(fundraise	ers) pursua	ant to agreements	under which the	fundraiser is to be		
Yes         No           1         DIRECT MAIL CULTIVATION         X         982,708         149,470         833,238.           2         DIRECT MAIL CULTIVATION         X         982,708         149,470         833,238.           2         DIRECT MAIL ACQUISITION         X         558,226         571,211         -12,985.           3         TELE- ARIA COMMUNICATIONS         MARKETING         X         157,007         107,492         49,515.           4         MONTHLY APPLEBY ARGANBRIGHT         GIVING         X         58,624         15,000         43,624.           5         Image: State			<b>(ii)</b> Activity	custody o	r control of		(or retained by) fundraiser listed in	(or retained by)		
1       DIRECT MAIL       v       982,708.       149,470.       833,238.         2       DIRECT MAIL       v       982,708.       149,470.       833,238.         2       DIRECT MAIL       v       v       558,226.       571,211.       -12,985.         3       ACQUISITION       X       558,226.       571,211.       -12,985.         3       MARKETING       X       157,007.       107,492.       49,515.         4       MONTHLY       v       v       43,624.         5       Image: Construct Structure S				Vaa Na						
SLICE CONSULTING       CULTIVATION       X       982,708       149,470       833,238.         2       DIRECT MAIL       ACQUISITION       X       558,226       571,211       -12,985.         3       TELE-       ACQUISITION       X       157,007       107,492       49,515.         4       MONTHLY       APPLEBY ARGANBRIGHT       GIVING       X       58,624       15,000       43,624.         5       G       Image: Construct on the state on	1			163	NU					
2       DIRECT MAIL ACQUISITION       X       558,226       571,211       -12,985.         3       TELE-       X       157,007       107,492       49,515.         AARIA COMMUNICATIONS       MARKETING       X       157,007       107,492       49,515.         AAPPLEBY ARGANBRIGHT       GIVING       X       58,624       15,000       43,624.         5       Image: Comparison of the second of		1			v	982 708	149 470	833 338		
RUSS REID CO.       ACQUISITION       X       558,226       571,211       -12,985.         3       TELE-       ARIA COMMUNICATIONS       MARKETING       X       157,007       107,492       49,515.         4       MONTHLY       X       58,624       15,000       43,624.         5       Image: Control of the second secon		1			<u>л</u>	<i>J</i> 02,700.	149,470	055,250.		
3       TELE- MARKETING       X       157,007       107,492       49,515         4       MONTHLY       X       58,624       15,000       43,624         5       Image: State Stat	_				v	<b>FEO 006</b>	E71 011	10 005		
ARIA COMMUNICATIONS       MARKETING       X       157,007       107,492       49,515         4       MONTHLY       GIVING       X       58,624       15,000       43,624         5       GIVING       X       58,624       15,000       43,624         6       Image: State Stat					•	550,220.	5/1,211	-12,905.		
4       MONTHLY       X       58,624       15,000       43,624.         5       GIVING       X       58,624       15,000       43,624.         6       GIVING       X       58,624       15,000       43,624.         7       GIVING       X       58,624       15,000       43,624.         7       GIVING       X       58,624       15,000       43,624.         6       GIVING       GIVING       GIVING       43,624.         7       GIVING       GIVING       GIVING       GIVING         8       GIVING       GIVING       GIVING       GIVING       GIVING         9       GIVING       GIVING       GIVING       GIVING       GIVING       GIVING         10       GIVING	-					158 008	105 400	40 515		
APPLEBY ARGANBRIGHT       GIVING       X       58,624       15,000       43,624         5		ONS			X	157,007.	107,492	49,515.		
5	-						1 - 000	40.004		
6		.GHT	GIVING		X	58,624.	15,000	43,624.		
7       Image: Control of the second s	5									
8       Image: Second se	6									
9       10       1,756,565       843,173       913,392.         3       List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from	7									
10       1,756,565       843,173       913,392.         3       List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from	8									
Total       ▶       1,756,565       843,173       913,392.         3       List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from	9									
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from	10									
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from										
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from	Total					1 756 565	842 172	912 202		
registration or licensing.	3 List all states in v	which the organizat			to solicit					
	-	ensing.								
MN,W1,	MN,WI,									

Schedule G (Form 990 or 990-EZ) 2012

OMB No. 1545-0047

#### Schedule G (Form 990 or 990-EZ) 2012

Part II

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

			(a) Event #1 DISH	(b) Event #2 VINTNER BALL	(c) Other events 1.	(d) Total events (add col. (a) through					
			(event type)	(event type)	(total number)	col. <b>(c)</b> )					
Revenue	1	Gross receipts	677,579.	235,561.	214,836.	1,127,976					
R	2	Less: Contributions	486,539.	131,836.	214,836.	833,211					
	3	Gross income (line 1 minus line 2).	191,040.	103,725.	0	294,765					
	4	Cash prizes									
uses	5	Noncash prizes									
	6	Rent/facility costs	21,302.	29,369.		50,671					
<b>Direct Expenses</b>	7	Food and beverages	45,233.		36.	45,269					
Direc	8	Entertainment	93,592.			93,592					
	9	Other direct expenses	108,366.	9,745.	42,951.	161,062					
		Direct expense summary. Add lines				( <u>350,594</u> ) -55,829					
	11 Net income summary. Combine line 3, column (d), and line 10       -55,829.         Part III       Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.										

Revenue		(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1 Gross revenue				
ses	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes% No	Yes%	Yes% No	
	7 Direct expense summary. Add lines 2	through 5 in column (d)			()
	8 Net gaming income summary. Comb	ine line 1, column d, and	l line 7		
	Enter the state(s) in which the organizat Is the organization licensed to operate of	aming activities in each	of these states?		Yes No
b	If "No," explain:				
	Were any of the organization's gaming l If "Yes," explain:	icenses revoked, suspe		• • • • • •	Yes No

Schedule G (Form 990 or 990-EZ) 2012

Page **2** 

JSA

# SCHEDULE I (Form 990)

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

2012 Open to Public Inspection

No

OMB No. 1545-0047

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

#### SECOND HARVEST HEARTLAND

Employer identification number 23-7417654

### 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?	X Yes	

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

1 (a) Name and address of organization or government	<b>(b)</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
			265,092.				SUPPORT FOOD DISTRI- BUTION TO AGENCIES
(2) COMPLETE LIST AVAILABLE UPON REQUEST			265,092.				
(3)				108,521,268.	FMV	MEALS	FOOD DISTRIBUTION
(4)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and go	overnment or	ganizations list	ed in the line 1 tabl	e	<u> </u> 	└►	499.
3 Enter total number of other organizations liste			<u></u>	<u></u>	<u></u>		143.
For Paperwork Reduction Act Notice, see the Ins							ule I (Form 990) (20

#### Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (f) Description of non-cash assistance (b) Number of (c) Amount of (d) Amount of (a) Type of grant or assistance (e) Method of valuation (book, recipients , cash grant non-cash assistance FMV, appraisal, other) 1 MEALS DISTRIBUTED TO INDIVIDUALS 14,416. 1,676,533. FMV INDIVIDUAL MEALS 2 FEDERAL COMMODITIES 12,705. 5,473,596. FMV VARIOUS FOOD ITEMS 3 4 5 6

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

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

SCHEDULE I - PART I, LINE 2

GRANTS ARE REVIEWED MONTHLY BY THE FINANCE DEPARTMENT. CASH

DISBURSEMENTS ARE COMPARED TO GRANT APPLICATIONS AND DONOR CORRESPONDENCE

TO ENSURE COMPLIANCE. WHEN APPROPRIATE, WORKBOOKS OR GRANT CARDS ARE

CREATED TO DOCUMENT EXPENDITURES. REGULAR SITE MONITORING, WHICH

INCLUDES SITE VISITS, IS PERFORMED AS PART OF SHH'S OVERALL COMPLIANCE

EFFORTS.

7

Schedule I (Form 990) (2012)

SCHEDULE J (Form 990)		Compensation Information ○ For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" to Form 990, Part IV, line 23.						
	nent of the Treasury Revenue Service	► Attach to Form		rate instructions.		Open to	ectio	
	of the organization				Employer identificat			
	8	T HEARTLAND			23-74176			
Part	Questio	ons Regarding Compensation						
		······································					Yes	No
1a	990, Part VII, First-cla Travel fo Tax inde	propriate box(es) if the organization pr Section A, line 1a. Complete Part III to ass or charter travel or companions emnification and gross-up payments onary spending account	provide any rel Housing al Payments Health or s		g these items. personal use nal residence on fees			
b 2	If any of the or reimburse explain	boxes on line 1a are checked, did the ement or provision of all of the ex nization require substantiation prior to	e organization f enses describe	ollow a written policy r ed above? If "No," con	egarding paymer nplete Part III t	0 1b		
	directors, trus	stees, and the CEO/Executive Director,	egarding the ite	ms checked in line 1a?		2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.          Compensation committee       Written employment contract         Independent compensation consultant       X         X       Form 990 of other organizations         During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing							
а		or a related organization: verance payment or change-of-control p	vment?			4a		х
b	Participate in	, or receive payment from, a suppleme	tal nongualified	retirement plan?		4b		х
С		, or receive payment from, an equity-ba				4c		х
	If "Yes" to an	by of lines 4a-c, list the persons and persons 501(c)(3) and 501(c)(4) organizations	ovide the applic	able amounts for each i				
5	For persons I	listed in Form 990, Part VII, Section A, n contingent on the revenues of:	-		any			
		tion?				5a		x
	Any related o	rganization? e 5a or 5b, describe in Part III.				5b		X
6		listed in Form 990, Part VII, Section A, n contingent on the net earnings of:	ne 1a, did the o	rganization pay or accrue	any			
а	The organizat	tion?				6a		Х
b	Any related o	rganization?				6b		X
		e 6a or 6b, describe in Part III.						
7		listed in Form 990, Part VII, Section						
8	Were any am to the initia	t described in lines 5 and 6? If "Yes," de nounts reported in Form 990, Part VII I contract exception described in I	paid or accrue egulations sec	d pursuant to a contract tion 53.4958-4(a)(3)? I	that was subject f "Yes," describ	et		X
-	In Part III					8		X
9	9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?							

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

Schedule J (Form 990) 2012

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

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

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

(A) Name and Title		<b>(B)</b> Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990	
ROB ZEASKE	(i)	187,673.	15,000.	0	11,100.	0	213,773.	0	
1 CHIEF EXECUTIVE OFFICER		0	С	dd	0	0	(	00	
JANE HOPKINS GOULD	(i)	144,895.	640.	375.	9,617.	500.	156,027.	0	
2 CHIEF FINANCIAL OFFICER	(ii)	0	С	oo	0	0	(	00	
	(i)								
	(ii)								
	(i)								
4	(ii)								
	(i)								
5	(ii)								
	(i)								
6	(ii)								
	(i)								
7	(ii)								
	(i)								
8	(ii)								
	(i)								
9	(ii)								
	(i)								
10	(ii)								
	(i)								
11	(ii)								
	(i)								
12	(ii)								
	(i)								
13	(ii)								
	(i)								
14	(ii)								
	(i)								
15	(ii)								
	(i)								
16	(ii)								

Schedule J (Form 990) 2012

#### Part III Supplemental Information

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

#### SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

## **Noncash Contributions**

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Employer identification number

Name of the organization

## SECOND HARVEST HEARTLAND

Fai	Types of Property			1				
		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash cont			
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	56.	157,327.	AVERAGE (	COST		
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
••	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
15	contribution - Historic							
	structures						-	
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles	x		111,267,516.	WHOLESALE	-wr	тант	
19	Food inventory			111,207,510.	WHOLEDALL	5 <b>M</b> 15.	10111	<u>. Avc</u>
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()						-	
26	Other ►()							
27	Other ►()							
28	Other ►()							
29	Number of Forms 8283 received				29			
	which the organization completed I	-orm 8283,	Part IV, Donee Acknowledg		25		Yes	No
30 a	During the year, did the organizat	tion receive	by contribution any prope	arty reported in Part I line	s 1-28 that		163	
50 a	it must hold for at least three yea							
	used for exempt purposes for the e				•	30a		х
h	If "Yes," describe the arrangement i		j penou:			JUa		
31	Does the organization have a		ance policy that require	s the review of any r	on-standard			
31	-					31	x	
32 3	contributions? Does the organization hire or use	a third nart	es or related organization	e to solicit process or s	sell noncash	51		
Jza	•		•			32a	x	
h	contributions? If "Yes," describe in Part II.		•••••	• • • • • • • • • • • • • • • •		528		
ы 33	If the organization did not report ar	amount in	column (c) for a type of are	porty for which column (o	) is checked			
55	describe in Part II.			perty for which column (a	j is checked,			
For P	Paperwork Reduction Act Notice, see th	e Instruction	s for Form 990		Schedule	M (For	m 990)	(2012)
					- should			··-/

PAGE 35



Employer identificatio

90)	

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

SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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



Department of the Treasury Internal Revenue Service

ORGANIZATION'S MISSION

FORM 990 - PART I, LINE I & PART III, LINE 1 OUR MISSION IS TO END HUNGER THROUGH COMMUNITY PARTNERSHIPS. IN THE YEARS SINCE OUR 2001 FOUNDING, SECOND HARVEST HEARTLAND HAS EVOLVED FROM A FOOD BANK FOCUSED ALMOST SOLELY ON FOOD DISTRIBUTION, TO A HUNGER RELIEF AGENCY THAT DRIVES EFFICIENCY, INNOVATION AND COLLABORATION. TODAY, SECOND HARVEST HEARTLAND IS THE LARGEST HUNGER RELIEF AGENCY IN THE UPPER MIDWEST. IN FY13, WE SURPASSED OUR GOAL TO DISTRIBUTE 81 MILLION POUNDS OF FOOD BY MORE THAN 3 MILLION POUNDS (83,831,000). PARTNERSHIPS WITH RETAIL DONORS, GOVERNMENT AGENCIES, CORPORATIONS, FOUNDATIONS, AND INDIVIDUALS COUPLED WITH LEVERAGING EFFICIENCIES WITHIN OUR ORGANIZATION WILL ALLOW US TO CONTINUE TO DELIVER MORE FOOD.

BUT THE EMERGENCY FOOD SYSTEM CAN'T SOLVE THE PROBLEM OF HUNGER ALONE, SO WE ARE CONTINUING TO INVEST IN COMMUNITY OUTREACH EFFORTS, OR BEYOND THE FOOD BANK INITIATIVES, THAT CONNECT THOSE IN NEED WITH THE MEALS THEY NEED TO LIVE HEALTHY, PRODUCTIVE LIVES. THESE PROGRAMS INCLUDE THE SNAP (THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM, FORMERLY KNOWN AS FOOD STAMPS) OUTREACH PROGRAM , THROUGH WHICH OUTREACH SPECIALISTS VISIT FOOD SHELVES, SOUP KITCHENS, AND OTHER ORGANIZATIONS AND EVENTS TO HELP PEOPLE UNDERSTAND THE PROGRAM, AND TO BREAK DOWN BARRIERS TO PARTICIPATION-FROM LACK OF AWARENESS TO DIFFICULT APPLICATION PROCESSES OR OTHER COMPLICATIONS. MORE THAN ONE IN FOUR PEOPLE WHO QUALIFY FOR SNAP ARE LEAVING THEIR BENEFITS ON THE TABLE IN MINNESOTA. THAT'S THE EQUIVALENT OF NEARLY \$210 MILLION OF ALREADY-FUNDED FOOD AND FINANCIAL ASSISTANCE UNCLAIMED WHICH COULD ALSO HELP MINNESOTA'S ECONOMY.

SPACE - SPLIT UP PARAGRAPH

THESE INITIATIVES ALSO INCLUDE THE USDA'S SFSP-THE SUMMER FOOD SERVICE PROGRAM-A MINNESOTA DEPARTMENT OF EDUCATION ADMINISTERED PROGRAM THAT FUNDS FREE MEALS TO CHILDREN 18 AND YOUNGER DURING THE SUMMERTIME. WE IDENTIFY HIGH-NEED AREAS ANNUALLY IN OUR COLLABORATION WITH THE MINNESOTA DEPARTMENT OF EDUCATION USING SCHOOL FREE AND REDUCED MEAL PROGRAM DATA TO PROMOTE OUR MINI-GRANTS PROGRAM TO ELIGIBLE AGENCIES AND ORGANIZATIONS, AS WELL AS PLANNING OUR OUTREACH EFFORTS FOR THE YEAR, INCLUDING CONTACTING SCHOOL DISTRICTS ABOUT THE PROGRAM, ETC. SECOND HARVEST HEARTLAND HAS DEDICATED STAFF TO CONDUCT OUTREACH IN TARGETED COMMUNITIES AND PROVIDES MINI-GRANTS TO ORGANIZATIONS TO HELP ALLEVIATE THE BARRIERS TO PARTICIPATION.

FRESH FOOD

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INCREASINGLY, FRESH FOOD IS PART OF THE SECOND HARVEST HEARTLAND OFFERING, AS RETAIL PARTNERS AND GROWERS JOIN HUNGER-RELIEF EFFORTS AND CONTINUE TO CONTRIBUTE RECORD LEVELS OF PERISHABLE FOOD. IN FACT, FRESH FOODS COMPRISED MORE THAN 41% OF ALL FOOD DISTRIBUTED THROUGHOUT THE FISCAL YEAR. OF THIS AMOUNT, MORE THAN 29 MILLION POUNDS WERE DISTRIBUTED THROUGH THE FOOD RESCUE PROGRAM-LARGELY COMPRISED OF NUTRITIOUS FOOD SUCH AS PRODUCE, MEAT AND DAIRY OPTIONS.

PARTNERSHIPS CONTINUED TO BE FORMED OR EXPANDED IN FY2013 WITH MINNESOTA GROWERS AND FARMERS, IN AN EFFORT TO BEGIN TO CAPTURE THE MORE OF THE 300 MILLION POUNDS OF CROPS-CORN, POTATOES, APPLES, WATERMELON, SQUASH AND MORE-THAT IS EITHER PLOWED UNDER OR UNSOLD EACH YEAR IN OUR STATE. THIS YEAR, THE PRODUCE CAPTURE PROGRAM COLLECTED MORE THAN 5.9 MILLION POUNDS OF SWEET CORN, POTATOES, APPLES, CABBAGE, CARROTS, CUCUMBERS, WATERMELON, TOMATOES AND OTHER PRODUCE.

#### VOLUNTEER PROGRAM

OUR VOLUNTEER PROGRAM IS A VITAL COMPONENT OF OUR EFFORTS TO BRING MORE FOOD TO THOSE WHO ARE HUNGRY IN OUR COMMUNITY. IN THE COMING YEARS WE WILL NEED ADDITIONAL SUPPORT FROM VOLUNTEERS IN ORDER TO SUPPORT OUR CONTINUED GROWTH IN FOOD DISTRIBUTION, PARTICULARLY IN THE AREAS OF OUR FOOD RESCUE PROGRAM AND HARVEST TO HOME, WHICH PROVIDE OPPORTUNITIES FOR US TO PROVIDE INCREASED NUTRITIOUS FOOD STREAMS FOR THOSE IN NEED. AS A RESULT, OVER THE NEXT FIVE YEARS, THE NEED FOR VOLUNTEERS IS EXPECTED TO INCREASE FOUR-FOLD.

IN ORDER TO MEET THIS RAPIDLY GROWING DEMAND, AND TO BETTER SERVE OUR VOLUNTEERS, SECOND HARVEST HEARTLAND IS MAKING SIGNIFICANT CHANGES AND INVESTMENTS IN OUR VOLUNTEER PROGRAM. IN FY13, WE WERE ABLE TO ENGAGE MORE THAN 27,800 INDIVIDUAL VOLUNTEERS WHO CONTRIBUTED MORE THAN 130,000 HOURS-THE EQUIVALENT OF ALMOST 63 FULL-TIME EMPLOYEES.

VOLUNTEERS PLAY A VITAL ROLE IN OTHER PROGRAMMING EFFORTS: PACKING BOXES AND HELPING TO DISTRIBUTE THEM FOR OUR COMMODITIES SUPPLEMENTAL FOOD PROGRAM (CSFP), AND HELPING PEOPLE APPLY FOR CSFP AND SUPPLEMENTAL

JSA 2E1228 1.000

Page 2

NUTRITION ASSISTANCE PROGRAM (SNAP). CONTINUED GROWTH IN OUR VOLUNTEER PROGRAM IS ALSO REQUIRED TO CONTINUE TO MEET OUR GOALS FOR THOSE IN NEED.

#### PROGRAM SERVICES

FORM 990 - PART III

THE COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) IS ONE OF THE FOUNDATIONAL SERVICES PROVIDED BY SECOND HARVEST HEARTLAND. THROUGH THE PROGRAM, WE PROVIDE FOOD FOR QUALIFYING INDIVIDUALS, FAMILIES, AND SENIORS, DISTRIBUTING 30-35 POUNDS OF NUTRITIONALLY-BALANCED USDA FOOD TO INDIVIDUALS EACH MONTH AT NO COST TO THEM. PROGRAM PARTICIPANTS ARE GIVEN ONE OF THREE HIGHLY NUTRITIOUS FOOD PACKAGES, DEPENDING ON THEIR AGE AND NUTRITIONAL NEEDS AS DETERMINED BY THE USDA. THE PACKAGES MAY INCLUDE CANNED FRUITS, VEGETABLES AND JUICES, DRY AND UHT MILK, AMERICAN CHEESE, CANNED MEAT, PEANUT BUTTER OR DRIED BEANS, CEREAL, RICE OR PASTA. WE SERVE ABOUT 9,300 CLIENTS IN 41 COUNTIES IN MINNESOTA, 95 PERCENT OF WHOM ARE SENIORS. SEE SCHEDULE O FOR ADDITIONAL PROGRAM SERVICE DESCRIPTION.

#### ADDITIONAL PROGRAM SERVICES

FORM 990 - PART III

SINCE FY11, SECOND HARVEST HEARTLAND HAS MADE GREAT STRIDES IN ADDRESSING THE MISSING MEALS GAP BY MOVING BEYOND FOOD DISTRIBUTION ALONE. WE HAVE ENHANCED OUR OUTREACH EFFORTS TO CONNECT ELIGIBLE PEOPLE WITH PUBLIC RESOURCES THROUGH VARIOUS PROGRAMS. MINNESOTA CURRENTLY RANKS 43RD OUT OF 50 STATES FOR ELIGIBLE PEOPLE'S UTILIZATION OF THE SUPPLEMENTAL NUTRITION

Page 2

ASSISTANCE PROGRAM (SNAP - FORMERLY KNOWN AS FOOD STAMPS). SECOND HARVEST HEARTLAND'S SNAP OUTREACH SPECIALISTS VISIT FOOD SHELVES, SOUP KITCHENS, AND OTHER ORGANIZATIONS AND EVENTS TO HELP PEOPLE UNDERSTAND THE PROGRAM, AND TO BREAK DOWN BARRIERS TO PARTICIPATION-FROM LACK OF AWARENESS TO DIFFICULT APPLICATION PROCESSES OR OTHER COMPLICATIONS. IN FY13, WE ASSISTED OVER 3,000 HOUSEHOLDS WITH SNAP APPLICATIONS AND RE-CERTIFICATIONS (A 300% INCREASE SINCE 2010), ADDING OVER 3 MILLION MEALS TO FAMILIES. THE SUMMER FOOD SERVICE PROGRAM IS A MEAL REIMBURSEMENT PROGRAM THAT FUNDS FREE MEALS TO HIGH-NEED CHILDREN 18 AND YOUNGER DURING THE SUMMERTIME. THIS USDA PROGRAM, ADMINISTERED BY THE MINNESOTA DEPARTMENT OF EDUCATION, PROVIDES CHILDREN WITH COMPLETE, WHOLESOME MEALS AT SAFE PLACES FOR CHILDREN ONCE SCHOOL IS OUT OF SESSION FOR THE SUMMER. OUR STAFF CONDUCTS OUTREACH EFFORTS TO INCREASE AWARENESS OF SFSP, AS WELL AS ADMINISTER A MINI-GRANT PROGRAM WHICH PROVIDES MEAL-SITE SPONSORS WITH SUPPORT TO EXPAND THEIR EFFORTS TO FEED MORE CHILDREN.

#### PUBLIC AVAILABILITY

PART VI, LINE 19

COPIES OF ALL INFORMATION ARE AVAILABLE UPON REQUEST. FORM 990 IS MADE AVAILABLE THROUGH THE ORGANIZATION'S WEBSITE.

CONFLICT OF INTEREST POLICY PART VI, LINE 12C UPON HIRING, EMPLOYEES ARE PROVIDED A COPY OF THE CONFLICT OF INTEREST POLICY. HUMAN RESOURCES RETAINS A SIGNED COPY FROM EACH EMPLOYEE STATING

Employer identification number

THEY UNDERSTOOD AND ACCEPTED THE TERMS OF THE POLICY. MEMBERS OF THE BOARD ARE REQUIRED TO PROVIDE A SIGNED AGREEMENT ANNUALLY.

**REVIEW OF FORM 990** 

PART VI, LINE 11A

A DRAFT OF FORM 990 IS INTERNALLY REVIEWED BY THE CHIEF FINANCIAL OFFICER. IT IS THEN REVIEWED BY THE FINANCE COMMITTEE BEFORE IT IS PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL.

COMPENSATION OF OFFICERS

PART VI, LINE 15A & 15B

SHH USES EXTERNAL SURVEYS TO EVALUATE ALL EMPLOYEES' COMPENSATION. SHH ALSO USES OTHER COMPENSATION SOURCES AS WELL AS CONSIDERING THE COST-OF-LIVING ADJUSTMENT PER THE FEDERAL SOCIAL SECURITY ADMINISTRATION GUIDELINES, THE CONSUMER PRICE INDEX, AND WAGE AND SALARY TREND REPORTS TO DETERMINE AN APPROPRIATE AVERAGE ANNUAL PERCENTAGE. AN AVERAGE INCREASE BASED ON SECOND HARVEST HEARTLAND'S FINANCIALS IS APPROVED FOR BUDGETING PURPOSES. EMPLOYEES ARE GIVEN A PERFORMANCE APPRAISAL AND A RECOMMENDATION OF AN INCREASE (IF MERITED) IS MADE TO THE EXECUTIVE TEAM.

HUNGER FREE MINNESOTA'S POLICIES - (DISREGARDED ENTITY) FORM 990, PART VI, SECTION B, LINE 10A AND 10B HUNGER FREE MINNESOTA, LLC, A DISREGARDED ENTITY FOR TAX PURPOSES, DOES NOT HAVE ANY LOCAL CHAPTERS, BRANCHES, OR AFFILIATES. ALL OF THEIR GOVERNING POLICIES ARE THE SAME AS SECOND HARVEST HEARTLAND.

JSA 2E1228 1.000

Employer identification number

ATTACHMENT 1

#### FORM 990, PART III - PROGRAM SERVICE, LINE 4B

THE COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) IS ONE OF THE FOUNDATIONAL SERVICES PROVIDED BY SECOND HARVEST HEARTLAND. THROUGH THE PROGRAM, WE PROVIDE FOOD FOR INDIVIDUALS, FAMILIES, AND SENIORS, DISTRIBUTING 29 POUNDS OF NUTRITIONALLY-BALANCED USDA FOOD TO INDIVIDUALS EACH MONTH AT NO COST TO THEM. PROGRAM PARTICIPANTS ARE GIVEN ONE OF THREE HIGHLY NUTRITIOUS FOOD PACKAGES, DEPENDING ON THEIR AGE AND NUTRITIONAL NEEDS AS DETERMINED BY THE USDA. THE PACKAGES MAY INCLUDE CANNED FRUITS, VEGETABLES AND JUICES, DRY AND UHT MILK, AMERICAN CHEESE, CANNED MEAT, PEANUT BUTTER OR DRIED BEANS, CEREAL, RICE OR PASTA. WE SERVE NEARLY 8,500 LOW-INCOME SENIORS AND AN ADDITIONAL 1,500 ADULTS AND CHILDREN MONTHLY. CSFP DISTRIBUTION AVERAGED 319,000 POUNDS PER MONTH, FOR A YEARLY TOTAL OF 3,836,000 POUNDS IN FY12.

		ATTACHM	ENT 2
FORM 990, PART III, LINE 4D - OTHER PROGRAM S	ERVICES		
DESCRIPTION	GRANTS	EXPENSES	REVENUE
AGENCY RELATIONS		1,000,932	
FOOD RESCUE		1,293,370	
TOTALS		2,294,302	_ ≜
		ATTACHMEN	<u>π 2</u>
		ATTACHMEN	1 5
990, PART VII- COMPENSATION OF THE FIVE HIGHE	ST PAID IND. CO	NTRACTORS	
NAME AND ADDRESS	DESCRIPTION	OF SERVICES	COMPENSATION

Schedule O (Form 990 or 990-EZ) 2012

Schedule O (Form 990 or 990-EZ) 2012

Employer identification number

ATTACHMENT 3 (CONT'D)

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

Schedule O (Form 990 or 990-EZ) 2012

SECOND HARVEST HEARTLAND

Name of the organization

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
RUSS REID CO. 14384 COLLECTIONS CENTER DR CHICAGO, IL 60693	DIRECT MAIL SERVICE	571,211.
DOHERTY TOP TALENT SOLUTIONS 2515 WHITE BEAR AVE NORTH ST PAUL, MN 55109	TEMP EMPLOY SERVICES	205,013.
TRILLIEM DRIVERS 1059 109TH AVE NE MINNEAPOLIS, MN 55434	TEMP EMPLOY SERVICES	167,956.
MINNESOTA PUBLIC RADIO 480 CEDAR STREET ST. PAUL, MN 55101	ADVERTISING	162,954.
SLICE CONSULTING 1810 HARTFORD AVE ST PAUL, MN 55116	DIRECT MAIL	149,470.

		ATTACHMENT 4
FORM 990, PART VIII - EXCLUDED CON	TRIBUTIONS	
	MOTIN	
DESCRIPTION	AMOUNT	
DISH	486,539.	
VINTER BALL	131,836.	
VARIOUS FUNDRAISING EVENTS	214,836.	
TOTAL	833,211.	

ATTACHMENT 5

Name of the organization		Empl	oyer identification number
SECOND HARVEST HEARTLAND		p.	
		 ATTA(	CHMENT 5 (CONT'D)
FORM 990, PART VIII - FUNDRAISING	F EVENTS		
	GROSS	DIRECT	NET
DESCRIPTION	INCOME	EXPENSES	INCOME
DISH	191,040.	268,493.	-77,453.
VINTER BALL	103,725.	39,113.	64,612.
VARIOUS FUNDRAISING EVENTS		42,988.	-42,988.
TOTALS	294,765.	350,594.	EE 000
IUIALS	294,703.		-55,829
		ATTACHMI	ENT 6
FORM 990, PART X - PREPAID EXPENS	SES AND DEFERRED CHARGE	IS	
	BEGINNING	:	ENDING
DESCRIPTION	BOOK VALUE	BO	OK VALUE

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES BEGINNING ENDING DESCRIPTION BOOK VALUE BOOK VALUE INVESTMENTS 1,007,208. 760,713.

TOTALS

760,713. TOTALS 1,007,208.

16,123.

16,123.

PREPAID EXPENSES

JSA

135,508.

135,508.

ATTACHMENT 7

#### SCHEDULE R (Form 990)

## **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization

SECOND HARVEST HEARTLAND

Employer identification number 23-7417654

OMB No. 1545-0047

Open to Public

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

Attach to Form 990.

	(a) (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
(1) HUNGER FREE MINNESOTA, I	LLC					
1140 GERVAIS AVENUE	MAPLEWOOD, MN 55109	HUNGER RELIEF	MN	2,284,948.	2,037,872.	SHH
_(2)						
<u>(3)</u>						
_(4)						
_(5)						
_ <u>(6)</u>						

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	(g Section 5 contr enti	<b>g)</b> 512(b)(13) rolled ity?
						Yes	No
_(1)							
_(2)							
_(3)							
(4)							
_(5)							
(6)							
_(7)							

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

Schedule R (Form 990) 2012

JSA

Schedule R (Form 990) 2012

Page 2

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 Part III because it had one or more related organizations treated as a partnership during the tax year.) **(e)** Predominant (a) Name, address, and EIN of (d) (i) (j) (b) (c) (f) (g) (h) (k) Percentage Primary activity Legal Direct controlling Share of total Share of end-of-Code V-UBI General or Disproportionat income (related, related organization domicile entity income year assets amount in box 20 ownership managing allocations? unrelàted, (state or of Schedule K-1 partner? excluded from tax under (Form 1065) foreign sections 512-514) country) Yes No Yes No (1)_____ <u>(2)</u> <u>(3)</u> (4) (5) (6) (7)

## Part IV

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

<b>(b)</b> Primary activity	(c) Legal domicile	(d) Direct controlling	<b>(e)</b> Type of entity	<b>(f)</b> Share of total	(g)	(h)	(i Sect	i)
	(state or foreign country)		(C corp, S corp, or trust)	income	Share of end-of-year assets	Percen- tage ownership	512(b	b)(13) rolled
							Yes	
						-     -     -     -     -       -     -     -     -     -       -     -     -     -     -       -     -     -     -     -       -     -     -     -     -       -     -     -     -     -		

Schedule R (Form 990) 2012

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Y	es No
	During the tax year, did the organization engage in any of the following transactions with one or more r	related organizations lis	ted in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1	la	
b	Gift, grant, or capital contribution to related organization(s)			1	lb	
С	Gift, grant, or capital contribution from related organization(s)			1	lc	
d	Loans or loan guarantees to or for related organization(s)			1	ld	
е	Loans or loan guarantees by related organization(s)			1	le	
f	Dividends from related organization(s)				1f	
g	Sale of assets to related organization(s)			1	lg	
h	Purchase of assets from related organization(s)			1	h	
i	Exchange of assets with related organization(s)			[ /	1i	
j	Lease of facilities, equipment, or other assets to related organization(s)			••••••	1j	
k	Lease of facilities, equipment, or other assets from related organization(s)				lk	
I.	Performance of services or membership or fundraising solicitations for related organization(s)				11	
m	Performance of services or membership or fundraising solicitations by related organization(s)			1	m	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1	In	
0	Sharing of paid employees with related organization(s)			1	lo	
n	Reimbursement paid to related organization(s) for expenses			1	l p	
q	Reimbursement paid by related organization(s) for expenses	• • • • • • • • • • • • • •		· · · · · · · · · · · · · · · · · · ·	lq	
٦				•••••		
r	Other transfer of cash or property to related organization(s)			1	1r	
s	Other transfer of cash or property from related organization(s)			1	ls	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete t				olds.	
	(a) Name of other organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(c Method of amount		
1)						
2)						
2)						
(3)						
4)						
( <u>4)</u> ( <u>5)</u> (6)						

PAGE 48

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

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

(a) Name, address, and EIN of entity	(b) (c) Primary activity Legal domicile (state or foreign country)		e or foreign income (related,		(e) Are all partners section 501(c)(3) organizations?		Share of Share of		h) portionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
			section 512-514)	Yes	No			Yes	No		Yes	No		
_(1)														
(2)														
(3)														
_(4)														
_(6)														
_(7)														
_(8)														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

Schedule R (Form 990) 2012

Schedule R (Form 990) 2012	
Part VII	Supplemental Information
	Complete this part to provide additional information for responses to questions on Schedule R (see instructions).