EXTENDED TO AUGUST 15, 2023

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

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

A F	or the	2021 calendar year, or tax year beginning	TT 1, 2021 and	ending Si	EP 30, 2	022	
B c	heck if oplicable	C Name of organization			D Emplo	oyer identific	cation number
	Addres	se second harvest heartland]		
	Name change	Doing business as			23	3-7417654	
	Initial return Final return/	Number and street (or P.O. box if mail is not del 7101 WINNETKA AVE N	ivered to street address)	Room/suite		none number 1) 484-51	
	termin ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross re	eceints \$	302,357,845.
	Ameno	, , , , , , , , , , , , , , , , , , , ,	_ii oi ioioigii pootai oodo			is a group re	
	Applic tion		ON O'TOOLE		1	subordinates	
	pendir	9 7101 WINNETKA AVE N BROOKLYN PARK,			1		cluded? Yes No
T	ax-exe			or 527	1 ` ´		list. See instructions
		e: WWW.2HARVEST.ORG	(1113611110.)	01 021	1		n number
			sociation Other >	1 Year	of formation		1 State of legal domicile: MN
	rt I	Summary		L 10a1	or rormation	. 10	Otate of logal dofficine.
		Briefly describe the organization's mission or most	significant activities: SEE PA	RT III I	INE 1		
Se	'	blicity describe the organization's mission of most	significant activities.				
Governance	2	Check this box if the organization discor	ntinued its operations or dispos	sed of more	than 25%	of its not ass	eate
Veri		Number of voting members of the governing body	·			1 1	25
ģ		Number of independent voting members of the gov					25
		Total number of individuals employed in calendar y					268
ţį		Total number of volunteers (estimate if necessary)					9348
Activities &		Total unrelated business revenue from Part VIII, col		0.			
Ac		Net unrelated business taxable income from Form					0.
	D	Net unrelated business taxable income from Form	990-1, Fait i, iiile 11		Prior \		Current Year
	8	Contributions and grants (Part VIII line 1h)				,507,202.	206,415,837.
ne					,997,066.	17,807,075.	
Revenue			al 7al\			403,108.	1,654,087.
Be		Investment income (Part VIII, column (A), lines 3, 4,				39,938.	-61,445.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c,			221	,947,314.	225,815,554.
		Total revenue - add lines 8 through 11 (must equal				· ·	
		Grants and similar amounts paid (Part IX, column (132	,037,386. 0.	157,312,287.
		Benefits paid to or for members (Part IX, column (A	,364,399.	<u> </u>			
ses		Salaries, other compensation, employee benefits (F		14	476,780.	533,986.	
Expenses		Professional fundraising fees (Part IX, column (A), li				470,700.	333,300.
х		Total fundraising expenses (Part IX, column (D), line	The state of the s		36	,384,215.	50,859,871.
		Other expenses (Part IX, column (A), lines 11a-11d,				,262,780.	227,608,481.
		Total expenses. Add lines 13-17 (must equal Part I)				,684,534.	-1,792,927.
c		Revenue less expenses. Subtract line 18 from line	12				
t Assets or	20	Total assets (Dort V. line 16)		Ве		779,386.	End of Year 100,651,861.
Sse	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)				,885,958.	10,599,608.
Net /	21 22	Net assets or fund balances. Subtract line 21 from	line 20			,893,428.	90,052,253.
	rt II	Signature Block	III le 20		101	, 050, 120.	50,032,233.
		Ities of perjury, I declare that I have examined this return,	including accompanying schedules	and stateme	nte and to	the heet of my	knowledge and helief it is
		t, and complete. Declaration of preparer (other than office					knowledge and belief, it is
nuo,	COLLEG	t, and complete. Decignifically proparer (concilinationics	1) is based on an information of wi	non proparor		07/24/	/2023
Sign		Signature of officer				ate	
		ALLISON O'TOOLE, CEO					
Her	8	Type or print name and title					
		7 31 1	Dranararie eignatura	11	Date	Check	PTIN
Paid		Print/Type preparer's name CHARLES SELCER, CPA	Preparer's signature CHARLES SELCER, CPA		7/21/23	if L	
Prep		· 	omining billetin, CIA			self-employe	41-1680240
	arer Only		1600		F	irm's EIN 📐	11 1000240
USE	Unity	Firm's address 100 WASHINGTON AVE S STE MINNEAPOLIS, MN 55401	1000			hone no.612	_332_5500
	the IF	25 discuss this return with the preparer shown above	vo? Coo inoterrations		<u> </u>	HOHE HO. O T Z	X Ves No

23-7417654

Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	SECOND HARVEST HEARTLAND'S MISSION IS TO END HUNGER TOGETHER. IN	
	PARTNERSHIP WITH MORE THAN 423 FOOD SHELVES AND NON-PROFIT PARTNERS	
	AND MORE THAN 1,100 HUNGER-RELIEF PROGRAMS, WE SUPPORT THOSE IN OUR	
	REGION FACING HUNGER.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	y expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total	
	revenue, if any, for each program service reported.	,
4a	100 601 165	17,807,075.
	FOOD BANK: LAST YEAR, WE DISTRIBUTED MORE THAN 123 MILLION POUNDS OF	
	FOOD. AS A FOOD BANK, WE WORK WITH 423 FOOD SHELVES AND NON-PROFIT	
	PARTNERS AND MORE THAN 1,100 HUNGER-RELIEF PROGRAMS IN 41 COUNTIES IN	
	MINNESOTA AND 18 COUNTIES IN WESTERN WISCONSIN TO GET FOOD TO NEIGHBORS	
	FACING HUNGER. WE PROVIDED, ON AVERAGE, 86% OF ALL FOOD DISTRIBUTED BY	
	OUR PARTNERS.	
4b	(Code:) (Expenses \$ 14,695,256. including grants of \$ 2,716,969.) (Revenue \$)
	COMMUNITY OUTREACH: MORE THAN A FOOD BANK, WE'RE A LEADING PARTNER IN	
	THE POLICIES AND PROGRAMS THAT WORK TO END HUNGER AND WE'RE AN	
	INNOVATOR IN THE AREAS WHERE FOOD CAN BE THE SOLUTION. MINNESOTA	
	CENTRAL KITCHEN, OUR PREPARED MEALS INITIATIVE, PROVIDED 1,387,217	
	FULLY PREPARED MEALS ACROSS THE REGION, IN PARTNERSHIP WITH MORE THAN	
	75 COMMUNITY ORGANIZATIONS. FOODRX, OUR MEDICALLY TAILORED NUTRITION	
	BOX PROGRAM, PROVIDED SERVICES TO SUPPORT A HEALTHY DIET AND IMPROVED	
	HEALTH OF 10,394 INDIVIDUALS. OUR SNAP (SUPPLEMENTAL NUTRITION	
	ASSISTANCE PROGRAM) OUTREACH SPECIALISTS PROCESSED OVER 13,200 NEW	
	CLIENT REFERRALS AND ASSISTED OVER 13,100 HOUSEHOLDS WITH SNAP	
	APPLICATIONS AND RE-CERTIFICATIONS. (SEE SCHEDULE O)	
4c	(Code:) (Expenses \$10 , 467 , 112including grants of \$) (Revenue \$))
	FOOD SOURCING: OF THE MORE THAN 120 MILLION POUNDS OF FOOD WE	
	DISTRIBUTED LAST YEAR, MORE THAN 62% WAS FRESH FOOD (PRODUCE (42.6%),	
	MEAT, DAIRY AND BAKERY ITEMS). WE WORK TO SOURCE LOCALLY WHENEVER	
	POSSIBLE. LAST YEAR, WE SOURCED 9.8 MILLION POUNDS OF PRODUCE, 4	
	MILLION POUNDS OF DAIRY, INCLUDING 450,000 GALLONS OF MILK, AND 750,000	
	POUNDS OF MEAT FROM LOCAL MINNESOTA FARMERS AND PROCESSORS. ONE OF OUR	
	LARGEST SOURCES OF FOOD COMES FROM OUR RETAIL FOOD RESCUE PROGRAM,	
	WHICH SOURCED 39.7 MILLION POUNDS OF DONATED FOOD FROM 590 STORE	
	PARTNERS.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ 5,789,234. including grants of \$ 4,919,470.) (Revenue \$)
4e	Total program service expenses ▶ 211,552,769.	
		Form 990 (2021)

23-7417654

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
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		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		х
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 IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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		х
С	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 VIII	11c		х
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 IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
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	Х	L
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
20a	and the second s	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
_	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	L

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Form **990** (2021)

Form 990 (2	Checklist of			HEARTLAND
Part IV	Cnecklist of	Kequirea	Scheau	es (continued)

	· (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	No
	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 organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u></u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			v
00	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		х
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? 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] ,,		х
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	JJa		
b	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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			لل
			Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 52			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4.	Х	
	(gambling) winnings to prize winners?	1c	Δ	

132004 12-09-21

Form **990** (2021)

	990 (2021) SECOND HARVEST HEARTLAND	23-74	117654	F	Page \$
Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			T.,	Τ
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1		Yes	No
	filed for the calendar year ending with or within the year covered by this return	2a	268		
	If at least one is reported on line 2a, did the organization file all required federal employment tax return	•	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions				
					х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule				
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		Х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<u>5a</u>		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac				X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				
	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?		<u>6a</u>		X
	If "Yes," did the organization include with every solicitation an express statement that such contribution		01-		
	were not tax deductible?		6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv	vices provided to the pr	ayor? 7a	х	
		nces provided to the pa	·	X	1
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa				
	to file Form 8282?	•	7c		x
	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	ct?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file For	m 8899 as required	? 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizat	ion file a Form 1098	-C? 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
	Sponsoring organizations maintaining donor advised funds.				
					-
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
	Section 501(c)(7) organizations. Enter:	40-			
	Initiation fees and capital contributions included on Part VIII, line 12	10a 10b			
	Section 501(c)(12) organizations. Enter:	IUD			
	Gross income from members or shareholders	11a			
	Gross income from other sources. (Do not net amounts due or paid to other sources against	114			
-	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		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.				
	Enter the amount of reserves the organization is required to maintain by the states in which the	1			
	organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	13c			
			441		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		+
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				x
	excess parachute payment(s) during the year?		15		A
	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		X
	If "Yes," complete Form 4720, Schedule O.				
	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in a	anv			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		

If "Yes," complete Form 6069.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 25 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 25 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Х 6 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 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE 0 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records MICHAEL HOBAN - (651) 484-5117

Form **990** (2021)

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7101 WINNETKA AVE N, BROOKLYN PARK, MN

Form 990 (2021) SECOND HARVEST HEARTLAND 23-7417654 Page **7**

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

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

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

Check this box in heither the organization he		Jiya	ııı∠a			ipei	isalt		•	(E)
(A)	(B)				C) ition	1		(D)	(E)	(F)
Name and title	Average hours per		not c	heck	more	than o		Reportable compensation	Reportable compensation	Estimated amount of
	week		cer ar					from	from related	other
	(list any	tor						the	organizations	compensation
	hours for	r direc				pa		organization	(W-2/1099-MISC/	from the
	related	tee o	ustee			ensat		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	nal tr		loyee	omp		1099-NEC)		and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	lud	lus	ijJ.	Ke	e Eig	For			
(1) ALLISON O'TOOLE	40.00									
CHIEF EXECUTIVE OFFICER				Х				500,300.	0.	32,190.
(2) MEGAN MUSKE	40.00									
CHIEF DEVELOPMENT OFFICER				Х				239,312.	0.	14,147.
(3) PATRICK J. BORAN	40.00									
CHIEF FINANCIAL OFFICER (PART-YEAR)				Х				180,037.	0.	21,595.
(4) ELIZABETH COOPER	40.00									
CHIEF EXTERNAL RELATIONS OFFICER				Х				169,135.	0.	27,078.
(5) THIERRY M. IBRI	40.00									
CHIEF OPER/PROG OFFICER (PART-YEAR)				х				168,296.	0.	20,990.
(6) DAVID E. LASKEY	40.00									
DIR ENT EFF & FACILITY MGM						х		133,928.	0.	19,812.
(7) CONSTANCE C. SCHLUNDT	40.00									
DIRECT MARKETING DIRECTOR						х		124,618.	0.	24,196.
(8) COLLEEN HASE	40.00									
DIRECTOR OF INFO. TECH.						Х		137,009.	0.	8,660.
(9) JULIE VANHOVE	40.00									
DIR OF SOURCE/DEM PLAN						Х		121,460.	0.	23,476.
(10) DANIEL J. FUHRMAN	40.00									
CONTROLLER						Х		125,161.	0.	14,257.
(11) STACY L. WADE	40.00									
CHIEF PEOPLE OFFICER				х				112,101.	0.	6,744.
(12) SARAH MOBERG	40.00									
CHIEF OPERATIONS OFFICER (PART-YEAR)				х				57,000.	0.	4,801.
(13) MICHAEL HOBAN	40.00									
CHIEF FINANCIAL OFFICER (PART-YEAR)				х				40,769.	0.	0.
(14) BILL KOSCHAK	1.00									
TREASURER		х		х				0.	0.	0.
(15) CAM HOANG	1.00									
BOARD MEMBER		х						0.	0.	0.
(16) CHRISTINA HENNINGTON	1.00									
BOARD MEMBER		х						0.	0.	0.
(17) CHRIS FINCH	1.00									
BOARD MEMBER		х						0.	0.	0.
132007 12-00-21	•							•		Form 990 (2021)

132007 12-09-21 Form **990** (2021)

FOIII 990 (2021)		_							20 ,11,00	- rage •
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hiç	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do	not c	Pos			one	Reportable	Reportable	Estimated
	hours per	box	, unle: cer ar	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		Cei ai		liecto	i / ii us	(66)	from	from related	other
	(list any hours for	irecto						the	organizations (W-2/1099-MISC/	compensation from the
	related	ord	e e			sated		organization (W-2/1099-MISC/	1099-NEC)	organization
	organizations	ruste	l trustee		99	ubeu		1099-NEC)	1099-NEC)	and related
	below	dual t	rtio na	_	oldr	st cor	-	10001420)		organizations
	line)	Individual trustee or director	Institutional t	Officer	key employee	Highest compensated employee	Former			- 5. ga <u>-</u> a 5.1.5
(18) COLLEEN MAY	1.00									
CHAIR		х		х				0.	0.	0.
(19) DAVID CROSBY	1.00									
SECRETARY		Х		Х				0.	0.	0.
(20) DAVID FIOCCO	1.00									
BOARD MEMBER		Х						0.	0.	0.
(21) DR. DAVID TILSTRA	1.00									
BOARD MEMBER		Х						0.	0.	0.
(22) HUNTER SAKLAD	1.00									
BOARD MEMBER		Х						0.	0.	0.
(23) IBRAHIMA DIOP	1.00									
BOARD MEMBER		Х						0.	0.	0.
(24) JEFF PUTNAM	1.00									
BOARD MEMBER		Х						0.	0.	0.
(25) JILL BOLLETTIERI	1.00									
BOARD MEMBER		Х						0.	0.	0.
(26) JIM LEMKE	1.00									
BOARD MEMBER		Х						0.	0.	0.
1b Subtotal							ightharpoons	2,109,126.	0.	217,946.
c Total from continuation sheets to Part VI	I, Section A						ightharpoons	0.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	2,109,126.	0.	217,946.
2 Total number of individuals (including but n	at limited to th	000	lieta	d ah	000) wh	o ro	ceived more than \$100	000 of reportable	

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

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

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

5 X

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
ONE & ALL, INC., 3500 LENOX ROAD NE, SUITE		
1900, ATLANTA, GA 30326	FUNDRAISING	1,976,869.
THE CREATIVE GROUP, 865 S FIGUEROA STREET,		
SUITE 2600, LOS ANGELES, CA 90017	STAFFING	270,261.
PRESTON SPIRE, 105 S 5TH AVENUE, SUITE		
200, MINNEAPOLIS, MN 55401	MARKETING	253,619.
SALO LLC, 701 N WASHINGTON AVENUE, SUITE		
500, MINNEAPOLIS, MN 55401	STAFFING	250,320.
DORAN LEADERSHIP PARTNERS		
1779 JAMES AVENUE S, MINNEAPOLIS, MN 55403	RECRUITMENT	205,721.
2 Total number of independent contractors (including but not limited	to those listed above) who received more than	
\$100,000 of compensation from the organization	15	
	_	000

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2021)

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1 01111 000	VEST HEARTLAN	D							23-74176	554
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	Position						Reportable	Reportable	Estimated
	hours	(cl	(check all that ap				ly)	compensation	compensation	amount of
	per week (list any hours for related	Individual trustee or director	trustee		99	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	organizations below line)	Individual tr	Institutional trustee	Officer	Key employee	Highest con	Former			organizations
(27) JODI BAHL	1.00									
BOARD MEMBER		Х						0.	0.	0.
(28) JOEL MATURI	1.00									
BOARD MEMBER		Х						0.	0.	0.
(29) KEN DAVIDSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(30) PAULA PHILLIPPE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(31) RON FELDMAN	1.00									
VICE CHAIR		Х		х				0.	0.	0.
(32) SARITA PARIKH	1.00									
BOARD MEMBER		х						0.	0.	0.
(33) SHAHID ALAM	1.00									
BOARD MEMBER		Х						0.	0.	0.
(34) SHAWN O'GRADY	1.00									
PAST CHAIR		Х						0.	0.	0.
(35) SHEILAH STEWART	1.00									
BOARD MEMBER		Х						0.	0.	0.
(36) STACEY FOWLER-MEITTUNEN	1.00									- •
BOARD MEMBER		Х						0.	0.	0.
(37) TAMMYLYNNE JONAS	1.00									- •
BOARD MEMBER		х						0.	0.	0.
(38) TERI CROSBY	1.00								•	
BOARD MEMBER	1.00	х						0.	0.	0.
									••	•
					_					
			\vdash	\vdash	\vdash	\vdash				
		ł								
		-								
				<u> </u>	<u> </u>		<u> </u>			
Total to Part VII, Section A, line 1c										

SECOND HARVEST HEARTLAND 23-7417654 Page 9 Form 990 (2021) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Revenuè excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 13,907,404 Contributions, Gifts, Grants and Other Similar Amounts 1a 1 a Federated campaigns 1b **b** Membership dues 1,175,337. c Fundraising events 1c d Related organizations 1d 7,735,307 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 183,597,789 1f 155,431,996 g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 206,415,837. **Business Code** 2 a FOOD PURCHASE 624200 12,419,611. 12,419,611 Program Service Revenue 624200 5,387,464 5,387,464 FOOD DISTRIBUTION b С f All other program service revenue 17,807,075, g Total. Add lines 2a-2f Investment income (including dividends, interest, and 52,702 52,702 other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents 6b **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 7a 77,908,826. 55,400. assets other than inventory **b** Less: cost or other basis 76,362,841 and sales expenses Other Revenue 55,400 1,545,985. c Gain or (loss) 1,601,385. 1,601,385. d Net gain or (loss) ${f 8} {\ \ \, {\bf a}} {\ \ \, {\bf Gross income from fundraising events}}$ (not 1,175,337. of including \$ contributions reported on line 1c). See Part IV, line 18 7,500. 179,450 **b** Less: direct expenses _____ -171,950 -171,950. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities \triangleright 10 a Gross sales of inventory, less returns 10a and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a PALLET SALE 900099 78,796 78,796 b MISCELLANEOUS INCOME 900099 31,709 31,709

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1,482,137. Form **990** (2021)

110,505

225,815,554.

d All other revenue

Total. Add lines 11a-11d

Total revenue. See instructions

17,917,580

23-7417654

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

_	Check if Schedule O contains a respons	se or note to any line in t	his Part IX(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	152,199,338.	152,199,338.		
2	Grants and other assistance to domestic				
_		5,112,949.	5,112,949.		
3	Grants and other assistance to foreign	77	7 7		
Ŭ	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees	1,709,563.		1,709,563.	
6	Compensation not included above to disqualified	, ,		, ,	
_	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	13,837,006.	7,561,914.	3,762,519.	2,512,57
8	Pension plan accruals and contributions (include	, ,	, ,	, ,	, ,
-	section 401(k) and 403(b) employer contributions)	567,778.	378,661.	63,218.	125,89
9	Other employee benefits	1,702,804.	829,634.	660,488.	212,68
10	Payroll taxes	1,085,186.	541,301.	365,732.	178,15
11	Fees for services (nonemployees):		·		
а					
b		43,772.	6,132.	12,433.	25,20
С		57,150.		57,150.	
d		47,683.		47,683.	
е		533,986.			533,98
f	Investment management fees	81,335.		81,335.	
g					
	column (A), amount, list line 11g expenses on Sch O.)	4,080,511.	418,514.	531,978.	3,130,01
12	Advertising and promotion	555,725.	144,397.	103,195.	308,13
13	Office expenses	998,341.	597,059.	90,986.	310,29
14	Information technology	1,382,820.	1,068,640.	-12,871.	327,05
15	Royalties				
16	Occupancy	1,286,964.	999,938.	189,571.	97,45
17	Travel	244,013.	130,915.	89,730.	23,36
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	81,921.	14,629.	56,086.	11,20
20	Interest	227,059.	187,153.	22,989.	16,91
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,227,388.	2,001,485.	83,337.	142,56
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	COOM OF DURON PROP PEOP	27,049,039.	27,049,039.		
b	PROCUREMENT	7,951,575.	7,840,231.		111,34
С	DONATED PRODUCT WASTE	3,249,630.	3,249,505.		12
d	VEHICLE EXPENSE	1,217,216.	1,209,476.	7,740.	
е	All other expenses	77,729.	11,859.	64,403.	1,46
25	Total functional expenses. Add lines 1 through 24e	227,608,481.	211,552,769.	7,987,265.	8,068,44
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2021)

Form 990 (2021) Part X | Balance Sheet

Pai	t X	Balance Sheet					
		Check if Schedule O contains a response or n	ote to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			8,295,458.	2	5,427,643
	3	Pledges and grants receivable, net	2,060,540.	3	2,532,129		
	4	Accounts receivable, net			711,391.	4	2,387,423
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial c	contributor, or 35%			
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ		6			
ıs	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			9,231,516.	8	7,162,825
ğ	9	Prepaid expenses and deferred charges			594,948.	9	536,558
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	. 10a	47,442,609.			
	b	Less: accumulated depreciation	. 10b	10,523,568.	38,244,500.	10c	36,919,041
	11	Investments - publicly traded securities	56,533,823.	11	45,666,809		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			107,210.	15	19,433
	16	Total assets. Add lines 1 through 15 (must ed	qual line 3	33)	115,779,386.	16	100,651,861
	17	Accounts payable and accrued expenses			3,432,383.	17	5,080,626
	18	Grants payable				18	
	19	Deferred revenue	72,100.	19	13,850		
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complet		21			
es	22	Loans and other payables to any current or fo					
Ĭ		trustee, key employee, creator or founder, suk					
Liabilities		controlled entity or family member of any of the	iese perso	ons		22	
_	23	Secured mortgages and notes payable to unre	elated thir	rd parties	8,266,000.	23	3,938,286
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,	•				
		parties, and other liabilities not included on lin	es 17-24)	. Complete Part X			
		of Schedule D		1	2,115,475.		1,566,846
	26	Total liabilities. Add lines 17 through 25			13,885,958.	26	10,599,608
G		Organizations that follow FASB ASC 958, c	heck her	e ▶ X			
Ce		and complete lines 27, 28, 32, and 33.			0.7. 600 007		05 050 220
alar	27	Net assets without donor restrictions	97,692,297.	27	87,258,332		
B	28	Net assets with donor restrictions	4,201,131.	28	2,793,921		
n		Organizations that do not follow FASB ASC	958, che	eck here			
УF		and complete lines 29 through 33.					
ts (29	Capital stock or trust principal, or current fund				29	
sse	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			101 002 400	31	00 050 053
Š	32	Total net assets or fund balances			101,893,428.	32	90,052,253
	33	Total liabilities and net assets/fund balances			115,779,386.	33	100,651,861 Form 990 (202

Form **990** (2021)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	225,	815,	554.
2	Total expenses (must equal Part IX, column (A), line 25)	2	227,	608,	481.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,	792,	927.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	101,	893,	428.
5	Net unrealized gains (losses) on investments	5	-10,	048,	248.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	90,	052,	253.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				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," explain on Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis 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 oversight of the	•			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a	Х	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	
			Form	990	(2021)

132012 12-09-21

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021
Open to Public

Inspection
Employer identification number

SECOND HARVEST HEARTLAND 23-7417654 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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	ction A. Public Support	, , , , , , , , , , , , , , , , , , , ,	, =====================================	,				
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
	Gifts, grants, contributions, and	,	, ,	. ,	. ,	, ,	.,	
	membership fees received. (Do not							
	include any "unusual grants.")	141,786,547.	150,210,034.	224,685,988.	212,507,202.	206,415,837.	935,605,608.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	141,786,547.	150,210,034.	224,685,988.	212,507,202.	206,415,837.	935,605,608.	
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)							
	Public support. Subtract line 5 from line 4.						935,605,608.	
Sec	ction B. Total Support			Γ	Т			
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
	Amounts from line 4	141,786,547.	150,210,034.	224,685,988.	212,507,202.	206,415,837.	935,605,608.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	60,423.	64,842.	195,719.	67,315.	52,702.	441,001.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital	160 560	00 424	025 205	121 584	110 505	F10 600	
	assets (Explain in Part VI.)	160,762.	80,434.	235,327.	131,574.	110,505.	718,602.	
	Total support. Add lines 7 through 10		,				936,765,211.	
	Gross receipts from related activities,					12	58,766,035.	
13	First 5 years. If the Form 990 is for the	· ·	rst, second, third, 1	fourth, or fifth tax y	ear as a section 5	U1(c)(3)	. □	
Sac	organization, check this box and stop ction C. Computation of Publi						_	
	Public support percentage for 2021 (I			oolumn (f)\		14	99.88 %	
						15	99.88 %	
	Public support percentage from 2020 33 1/3% support test - 2021. If the control is the control is the control is the control in the control i							
iva	stop here. The organization qualifies						▶ ▼	
h	33 1/3% support test - 2020. If the o		~		line 15 is 33 1/3%			
Ü	and stop here. The organization qual							
17 a								
174	'a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization							
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization							
h	10% -facts-and-circumstances test	-	•		-	7a and line 15 is		
J	more, and if the organization meets the	-					10,001	
	organization meets the facts-and-circu				-			
18	Private foundation. If the organization		-		•			
	iounautom ii tilo organizatio	sia not oncon a i	25.00111110 10, 100	<u>., , , </u>	, chock this box at		/Form 990) 2021	

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

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

Secti	ion A. Public Support	low, picase comp	nete i art ii.j				
Calend	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
n	Sifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no						
n fo a	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the irganization's tax-exempt purpose						
а	Gross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to rexpended on its behalf						
5 T	the value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 5						_
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сА	add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 A 10a G d s	Amounts from line 6 Gross income from interest, lividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	(4) 2011	10/2010	(0) 20 10	(4) 2020	(6) 202.	(1) 10101
b U (I	Inrelated business taxable income less section 511 taxes) from businesses cquired after June 30, 1975						
11 N a	dd lines 10a and 10b						
12 C	other income. Do not include gain or loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)			1			<u> </u>
	irst 5 years. If the Form 990 is for the	· ·			•		. —
	heck this box and stop here						>
	ion C. Computation of Public			. (6)		145	
	Public support percentage for 2021 (lin		•	.,,		15	<u>%</u>
	Public support percentage from 2020					16	%
	ion D. Computation of Invest			ino 10 pali ima (n)		17	0/
	nvestment income percentage for 202					17	<u>%</u>
	nvestment income percentage from 2			on line 14 and line		18	%
	3 1/3% support tests - 2021. If the					- 4.5	▶ □
b 3	nore than 33 1/3%, check this box and 3 1/3% support tests - 2020. If the	organization did n	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
lii	ne 18 is not more than 33 1/3%, chec	k this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐
20 P	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

132023 01-04-22

Schedule A (Form 990) 2021

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Yes No 1 2 За 3b Зс 4a 4b 4c 5a 5b <u>5c</u> 6 7 8 9a 9b 9с 10a 10b

132024 01-04-21

1 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11b alone (the governing body or a supported organization? b A family member of a person described on line 11a above? c A 39% controlled entity of a person described on line 11a above? 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's following the state of the supported organization is above the regularly appoint or elect at least a majority of the organization's different controlled the organization's activities. If the organization had none supported organization have the power to regularly appoint or elect at least a majority of the organization's different controlled the organization's activities. If the organization had more supported organization's disported by the product of survival to the supported organization had more supported organization and more supported organization and the supported organization had more supported organization and the supported organization had been supported organization and the supported organization had been supported organization and the supported organization had been supported organization and the supported organization and the supported organization of the supported organization or supported organization organization or supported organization organization organization	Pal	TIV Supporting Organizations (continued)			
a A person who directly or indirectly controls, either above or together with persons described on lines 11b and 11b allow, the governing body of a supported organization? A 35% controlled entity of a person described on line 11a above? A 35% controlled entity of a person described on line 11a above? A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11b above? A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on the 11b above? B 45% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described provided organizations bear the power to regularly appoint or elect at least a majority of the organization of the organization bear the 14b and 15b an				Yes	No
1 Le blow, the governing body of a supported organization? b A family member of a person described on line 11 a on 11b above? If "Yes" to line 11a, 11b, or 11c, provide c A 35% controlled entity of a person described on line 11 a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to require yapoint or eded at least a majority of the organizations of one or more supported organizations have the power to require yapoint or eded at least a majority of the organizations of one or more supported organizations have the power to require the provisions of the supported organizations of the control of the supported organizations of the supported organization organizations of the supported organization or under than the supported organization organizations of the supported organization organizations of the supported organization or such organizations organizations organizations organizations organizations organizations organizations	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A Amily member of a person described on line 11 a above? A AS% contilled entity of a person described on line 11 a of 110 above? A AS% contilled entity of a person described on line 111 a of 110 above? Bestion B. Type I Supporting Organizations Did the growning body, members of the governing body, officers acting in their official capacity, or membership of one or not supported organization that the property of the organization that the organization of the organizations of the organizations. 1 Were a majority of the organizations of erectors of trustees during the tax year also a majority of the directors or trustees of each of the organizations of very organizations. 1 Were an anjority of the organizations of erectors or frustees during the tax year also a majority of the directors or trustees of each of the organization was vested in the same persons that controlled or munaged that according organization or supported organizations or the organization organization organizations of the organization organization organizati	а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
a A3% controlled retity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide potatis in Part VI. Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their efficial capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of officers, effectively operated, supervised, or controlled the organization of electric three than one supported organization had not not expended organization and expended organization and waste conditions or restrictions, if any, applied to such powers during the law year. 2 Did the organization operate for the benefit of any supported organization of the than the supported organization of the three t		11c below, the governing body of a supported organization?	11a		
Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of officers, directors, or trustees at all times during the tax year? "It have a comparable in the organization of the organization of section in the supported organization, describe how the powers to appoint and/or renove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operated personal organization of the tent the supported organization of the organization of the organization of the supported organization of the organization		·	11b		
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization sofficers, effectively operated, supervised or commoder the power to regularly appoint or elect at least a majority of the organization sofficers, effectively operated, supervised, or commoder the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organization, disorible how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organization operate for the benefit of any supported organization? If "Yes," expaint in Part VI how providing such benefit camed out the purposes of the supported organization (s) that operated, supported organizations or trustees the supported organization organization (s) that operated, supported organizations or trustees of each of the organization directors or trustees of each of the organizations directors or trustees of each of the organization as supported organizations, by the last day of the fifth month of the organization stay year, (i) a copy of the form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's powering documents in effect on the date of notification, and (iii) copies of the organization's powering documents in effect on the date of notification, to the extent not previously provided organization's powering documents in effect on the date of notification, to the organization in Part VI how the organization's powering documents in effect on the date of notification, to the organization's powering documents in effect on the date of notification, to the organization in Part VI how the organization's powering documents in effect on the date of notification, to the organization in a supported organization's supported organization's supported organization's supported organization's suppor	С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of officers, directors, or trustases at all times during the tax year? // 1/h ² o ² centible in PRT VI () now the supported organization of directors, describe in PRT VI () now the supported organization of supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2		detail in Part VI.	11c		
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations, directors, or trustees at all times during the tax year? If "Yo," of escribe in Part VI how the supported organizations (effective) operated. Supervised, or controlled the organizations activities. If the organization powers during the tax year as expected organization and what conditions or restrictions, if any applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization other than the supported organization of what conditions or restrictions, if any applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization of the tax has been organization (s) that operated, 2 Did the organization of the entire trained out the purposes of the supported organization (s) that operated, 3 Section 0. Type II Supporting Organizations 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organizations is supported organization or management of the supporting Organization's supported organization's part VI how control or management of the supporting Organization is supported organization or management of the supporting Organization was vested in the same persons that controlled or managed the supported organization organization is governing body under the organization organization is governing obdy and supported organizations and (ii) copies of the organization's governing obcuments in effect on the date of notification, and (iii) copies of the organization's governing obcuments in effect on the date of notification, to the extent not previously provided organization's income or assets at all times during the tax year? If Yes,* describe in Part VI have role the	Sec	tion B. Type I Supporting Organizations			
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			3h		

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations						
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.						
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sect	Section A - Adjusted Net Income (A) Prior Year (B) Current Year (optional)						
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
_3	Other gross income (see instructions)	3					
_4	Add lines 1 through 3.	4					
_5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
_ 7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
_6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functional	y integra	ted Type III supporting orga	nization (see			
	instructions).			·			

Par	rt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	nizations (continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ea	xempt purposes	1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of supported		
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purpo	3		
4	Amounts paid to acquire exempt-use assets	4		
5	Qualified set-aside amounts (prior IRS approval required -	provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which	the organization is responsive		
	(provide details in Part VI). See instructions.	3	8	
9	Distributable amount for 2021 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
	and a division division by mile a division in	(i)	(ii)	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2021	Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
а	From 2016			
b	From 2017			
С	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
ī	Carryover from 2016 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result greater	r		
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
•	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
	Excess from 2021			
-	LAVEGO HUHLAUA I			

Schedule A (Form 990) 2021 SECOND HARVEST HEARTLAND	23-7417654	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a o Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addition (See instructions.)	1 and 2; Part IV, Sectior V, Section B, line 1e; Pa	n C,
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:		
MISCELLANEOUS INCOME		
2017 AMOUNT: \$ 97,016.		
2018 AMOUNT: \$ 5,327.		
2019 AMOUNT: \$ 150,648.		
2020 AMOUNT: \$ 52,691.		
2021 AMOUNT: \$ 31,709.		
PALLET SALES		
2017 AMOUNT: \$ 63,746.		
2018 AMOUNT: \$ 75,107.		
2019 AMOUNT: \$ 84,679.		
2020 AMOUNT: \$ 78,883.		
2021 AMOUNT: \$ 78,796.		

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

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

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

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

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

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

<u> 3ec</u>	tion 50 f(c)(4), (5), or (6) organizat	tions. Complete Part III.			
Name o	f organization			Empl	oyer identification number
		VEST HEARTLAND			23-7417654
Part I	I-A Complete if the org	janization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2 Po	ovide a description of the organiz litical campaign activity expendit lunteer hours for political campai	ures		▶\$	
Part I	I-B Complete if the org	janization is exempt und	er section 501(c)(3).	
1 En	ter the amount of any excise tax	incurred by the organization und	der section 4955	▶\$	
2 En	ter the amount of any excise tax	incurred by organization manag	ers under section 4955	▶\$	
3 If t	he organization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Wa	as a correction made?				Yes No
	Yes," describe in Part IV.			=0.1/	1/01
Part I	I-C Complete if the org	anization is exempt und	er section 501(c),	except section 501(c	<u>)(3).</u>
	ter the amount directly expended		•		
	ter the amount of the filing organ	ization's funds contributed to ot	ther organizations for se		
	tal exempt function expenditures				
	e 17b				
	the filing organization file Form				
ma coi	ter the names, addresses and en ade payments. For each organiza ntributions received that were pro	tion listed, enter the amount pai omptly and directly delivered to	d from the filing organiz a separate political orga	ration's funds. Also enter the anization, such as a separate	e amount of political
ро	litical action committee (PAC). If	additional space is needed, prov	vide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Schedule C (Form 990) 2021	SECOND HARVEST H	EARTLAND		23-7	417654 Page 2
Part II-A Complete if the org	ganization is exen	npt under sectior	1 501(c)(3) and file	d Form 5768 (ele	ction under
	ation belongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and sha	re of excess lobbying e	expenditures).		-	
B Check ▶ ☐ if the filing organize	ation checked box A ar	nd "limited control" pro	visions apply.		
	its on Lobbying Exper			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to inf	luence public opinion (grassroots lobbying)		4,195.	
b Total lobbying expenditures to infl		· ·		52,530.	
c Total lobbying expenditures (add				56,725.	
d Other exempt purpose expenditur				211,496,044.	
e Total exempt purpose expenditure				211,552,769.	
f Lobbying nontaxable amount. Ent				1,000,000.	
If the amount on line 1e, column (a)		bying nontaxable am			
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17		00 plus 5% of the exce			
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (e	nter 25% of line 1f)			250,000.	
h Subtract line 1g from line 1a. If ze	ro or loop ontor O			0.	
i Subtract line 1f from line 1c. If zer				0.	
i If there is an amount other than ze			•		
reporting section 4911 tax for this	year?				Yes No
	4-Year Ave	eraging Period Under	Section 501(h)		
(Some organizations		01(h) election do not la	•	f the five columns be	elow.
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying portovable amount	1 000 000	1 000 000	1 000 000	1 000 000	4 000 000

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total		
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.		
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.		
c Total lobbying expenditures	47,618.	53,201.	20,716.	9,142.	130,677.		
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.		
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.		
f Grassroots lobbying expenditures	4,210.	2,826.	6,259.	4,195.	17,490.		

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)).

	ch "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k))
of the I	lobbying activity.	Yes	No	Amo	ount
1 [During the year, did the filing organization attempt to influence foreign, national, state, or				
ŀ	local legislation, including any attempt to influence public opinion on a legislative matter				
c	or referendum, through the use of:				
a \	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c N	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f (Grants to other organizations for lobbying purposes?				
_	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h F	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section	5 E01(a)(E)	0r 000	tion	
	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 50 1 (0)(5)	, or sec	tion	
uit					
uit	\(-\/-\/-			Yes	N
	Were substantially all (90% or more) dues received nondeductible by members?		. 1	Yes	N
1 \				Yes	N ₁
1 \ 2 [3 [Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? 1 501(c)(5)	2 3 , or sec	tion	
1 \ 2 [3 [Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members	e prior year? n 501(c)(5) No" OR (b	, or sec b) Part I	tion	
1 \2 [3 [7] 2 art 1 [2 [8]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? n 501(c)(5) No" OR (b	, or sec b) Part I	tion	
1 \2 [3 [7] 2 art 1 [2 5	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5) No" OR (b	a, or sec b) Part I	tion	
1 \2 [3 [3] 2 art 1 [2] 2 a (4)	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	e prior year? n 501(c)(5) No" OR (b	2 3 , or sec b) Part I	tion	
1 \2 [3 [3] 2 art 1 [2] 2 a (4)	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5) No" OR (b	2 3, or sec b) Part I	tion	
11 \ 22 [2art 11 [22	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the street of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the street of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	e prior year? n 501(c)(5) No" OR (b	2 3 , or sec b) Part I	tion	
1 \ \22 \ [\ \23 \ [\ \24 \] \] 11 \ [\ \24 \] 6 \ 6 \ 6 \ C \] 3 \ \ \/ 4 \ 3 \ \/ 4	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the string of \$100 or less? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? n 501(c)(5) No" OR (b	2 3 , or sec b) Part I	tion	3, is
1 \ \ 22 \ [\ 33 \ [\ 24 \] \ 34 \]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the string of \$10 (c) (a) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Solicity answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? n 501(c)(5) No" OR (b	2 3 , or sec b) Part I	tion	
11 \\22 \[\frac{1}{2} \] 11 \[\frac{1}{2} \] 22 \[\frac{1}{2} \] 3 \[\frac{1}{2} \] 4 \[\frac{1}{2} \]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.	e prior year? n 501(c)(5) No" OR (b	2 3, or sec b) Part I	tion	
11 \\22 \[\frac{1}{2}\] 11 \[\frac{1}{2}\] 22 \[\frac{1}{2}\] 3 \[\frac{1}{2}\] 4 \[\frac{1}{2}\] 6 \[\frac{1}{2}\]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the string of \$10 (c) (a) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Solicity answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? n 501(c)(5) No" OR (b	2 3 , or sec b) Part I	tion	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

SECOND HARVEST HEARTLAND

Employer identification number 23-7417654

Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		imilar Funds or <i>F</i>	Accounts. Complete if the
	organization answered Tes On Form 990, Part IV, line	(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year	()		
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	vriting that the assets he	ld in donor advised fu	nds
	are the organization's property, subject to the organization's e	-		
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			Yes No
Par	t II Conservation Easements. Complete if the org	anization answered "Yes	s" on Form 990, Part I	V, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of a his	storically important land area
	Protection of natural habitat		Preservation of a ce	rtified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribu	ution in the form of a c	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				
С	Number of conservation easements on a certified historic stru			2c
d	Number of conservation easements included in (c) acquired a			
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or to	erminated by the orga	nization during the tax
_	year			
4	Number of states where property subject to conservation ease			
5	Does the organization have a written policy regarding the peri			□ v □ u.
_	violations, and enforcement of the conservation easements it		d anfaraing concernat	
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, an	d emorcing conservat	ion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and on	forcing conservation o	acoments during the year
′	\$\\$\$ \$\$	iii ig or violations, and em	lording conservation e	asements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirement	s of section 170(h)(4)(l	3)(i)
Ū	and section 170(h)(4)(B)(ii)?	• •		
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footne			
	organization's accounting for conservation easements.	3		
Par	t III Organizations Maintaining Collections of	Art, Historical Trea	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	8, not to report in its reve	enue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education,	or research in further	ance of public
	service, provide in Part XIII the text of the footnote to its finan-	cial statements that desc	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 958	8, to report in its revenue	statement and balan	ce sheet works of
	art, historical treasures, or other similar assets held for public $% \left(1\right) =\left(1\right) \left(1\right) $	exhibition, education, or	research in furtheran	ce of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			
2	If the organization received or held works of art, historical trea			, provide
	the following amounts required to be reported under FASB AS			
	Revenue included on Form 990, Part VIII, line 1			k .
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2021

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Par	rt III Organizations Maintaining C	ollections of Art	i, Historical Tre	asures, o	r Other	Similar	Assets	(contir	nued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	following that	make sig	gnificant u	ise of its			
	collection items (check all that apply):									
а	Public exhibition	d	Loan or exc	hange progra	am					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further th	ne organizatio	n's exem	pt purpos	se in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or othe	er similar a	assets				
	to be sold to raise funds rather than to be ma							Yes		No
Par	rt IV Escrow and Custodial Arran		ete if the organizatio	n answered '	"Yes" on I	Form 990	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermedi	ary for contributions	s or other ass	sets not ir	ncluded		_		_
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:							
								Amoun	t	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
	Did the organization include an amount on Fe					ty?	L	Yes		No
_	If "Yes," explain the arrangement in Part XIII.									
Par	rt V Endowment Funds. Complete i									
		(a) Current year	(b) Prior year	(c) Two year	rs back ((d) Three y	ears back	(e) Four	years	back
1a	5 5 ,	22,197,246.	04 065 444							
b	Contributions	1,000,000.	21,865,441.	•						
С	Net investment earnings, gains, and losses	-4,214,630.	331,805.							
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses	10 000 616	00 105 046							
g	End of year balance		22,197,246.	•						
2	Provide the estimated percentage of the curr	•)) held as:						
a	Board designated or quasi-endowment		_%							
b	Permanent endowment									
С		%								
_	The percentages on lines 2a, 2b, and 2c sho	•								
за	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	nd administer	ed for the	e organiza	ition	ſ	Yes	No
	by:								162	X
	(i) Unrelated organizations							3a(i)		X
	(ii) Related organizations							3a(ii)		_ A
	If "Yes" on line 3a(ii), are the related organiza	•						3b		<u> </u>
4 Par	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm		wment iunas.							
	Complete if the organization answere		. Part IV. line 11a. S	See Form 990	. Part X. I	ine 10.				
	Description of property	(a) Cost or o		or other		cumulate	м	(d) Boo	k valu	
	bescription of property	basis (investm		(other)	` '	reciation	,u	(u) D00	n valu	C
12	Land	`		,470,000.				2	470	000.
				,091,410.		2,426,	882.			528.
	Leasehold improvements			, ,== · •		, ,	-		,	
			5	,542,462.		3,577,	857.	1.	964.	605.
	Other			,338,737.		4,518,				908.
	I. Add lines 1a through 1e. (Column (d) must e									041.
. otal		<u>quai ruiii 330, raft</u>	A. COIGITIII (DJ. IIIIB T	<i><u> </u></i>			<u> </u>			

Schedu	ule D (Form 990) 2021 SECOND HARVEST H	EARTLAND		23-7417654	Page 3
Part					
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.		
(a) De	escription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market	value
(1) Fin	ancial derivatives	. ,			
	osely held equity interests				
(3) Oth	ner				
(A)					
(B)					
(C)					
(D)					
(E)_					
(F)_					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part	VIII Investments - Program Related.				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line			
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market	value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
<u>(8)</u> (9)					
	Col. (h) must agual Form 000. Port V. col. (D) line 10.)				
Part	Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
ı uıt	Complete if the organization answered "Yes"	on Form 990 Part IV line	11d See Form 990 Part Y line 15		
		Description	Tra. Gee Form 556, Fart X, line 15.	(b) Book v	valuo
	(a)	Description		(b) BOOK (7aiue
<u>(1)</u>					
(2)_					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	(Column (b) must equal Form 990, Part X, col. (B) line	e 15.)]	▶	
Part	X Other Liabilities.				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line	25.	
1.	(a) Description of liability			(b) Book v	value
(1)	Federal income taxes				
(2)	FISCAL AGENT PAYABLE				82,835.
(3)	CAPITAL LEASE, CURRENT PORTION			<u> </u>	429,878.
(4)	CAPITAL LEASES, NET OF CURRENT				054,133.
(5)	,				
				+	
<u>(6)</u>				+	
(7)				+	
(8)					

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

Schedule D (Form 990) 2021

1,566,846.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

23-7417654

rai	Reconciliation of Revenue per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	WILLI	nevellue per ne	tuiii.	
1	Total revenue, gains, and other support per audited financial statements			1	216,906,706.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-10,048,248.		
b	Donated services and use of facilities	2b	1,139,400.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-8,908,848.
3	Subtract line 2e from line 1			3	225,815,554.
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			
	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	225,815,554.
Par	t XII Reconciliation of Expenses per Audited Financial Statement	s With	Expenses per F	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	228,747,880.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	1,139,400.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	1,139,400.
3	Subtract line 2e from line 1			3	227,608,480.
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	1.		
С	Add lines 4a and 4b			4c	1.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	227,608,481.
Par	t XIII Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, I	ines 1b	and 2b; Part V, line 4	; Part X, I	ine 2; Part XI,
lines :	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	al inforn	nation.		
PART	V, LINE 4:				
DIIDT	NG 2021, SECOND HARVEST HEARTLAND ESTABLISHED A BOARD-DESIGNATED				
DOKI	NG ZUZI, SECOND MARVESI MEARIBAND ESTABLISMED A BOARD-DESIGNATED				
ENDO	WMENT FUND. THE PURPOSE OF THIS ENDOWMENT IS TO FIGHT HUNGER NOW	AND			
T. A V	THE GROUNDWORK FOR A STRONGER MINNESOTA THAT'S READY FOR NEW				
	THE GROUPHORK ISK II BINOROLK HIMLESOIN IMIT D'KLEDI ION HEM				
CHAL	LENGES. THE FUNDS WILL HELP FEED THE COMMUNITY, STRENGTHEN FOOD				
SHEL	VES AND OTHER HUNGER-RELIEF AGENCIES AND ADDRESS THE RACIAL HUNG	ER			
	THE TIME COMMENTS AND THE REPORT OF THE PROPERTY OF THE PROPER				
DIVI	DE. EACH YEAR THE BOARD CAN AUTHORIZE UP TO 5% OF THE MARKET VAL	UE OF			
THE	ENDOWMENT FOR ANY PURPOSE CONSISTENT WITH THE PURPOSE OF THE				
ENDO	WMENT.				
PART	X, LINE 2:				
THE	DRGANIZATION IS EXEMPT, AS A PUBLIC CHARITY, FROM FEDERAL AND ST.	ATE			

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization **Employer identification number** SECOND HARVEST HEARTLAND 23-7417654 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations f X Solicitation of government grants X Phone solicitations g X Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization contributions' listed in col. (i) ONE & ALL - 2 NORTH LAKE AVE. Yes No STE 700, PASADENA, CA 91101 Х DIRECT MAIL ACQUISITION 5,533,310 356,201 5,177,109. GATEWAY FUNDRAISING - 2350 WHITEMAN RD, #F, CONCORD, CA TELEMARKETING Х 525,230 115,928 409,302.

Х

0.

61,857

6,058,540 533 986. 5 586 411 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, NY NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

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

SEE PART IV FOR CONTINUATIONS

LANNED GIVING

MARKETING/CONSULTING

Schedule G (Form 990) 2021

CANOPY RESOURCES - 3901 EAST

PARIS SE, GRAND RAPIDS, MI

0.

Pa	ırt I	Fundraising Events. Complete if the of fundraising event contributions and ground fundraising event contributions and ground fundraising event contributions.				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
			DISH	KICK HUNGER	5	col. (c))
Φ			(event type)	(event type)	(total number)	33 (3))
Revenue	1	Gross receipts	586,100.	463,743.	132,994.	1,182,837.
_	2	Less: Contributions	578,600.	463,743.	132,994.	1,175,337.
	3	Gross income (line 1 minus line 2)	7,500.			7,500.
	4	Cash prizes				
õ	5	Noncash prizes				
xpense	6	Rent/facility costs	9,025.			9,025.
Direct Expenses	7	Food and beverages	48,889.			48,889.
Ω	8	Entertainment	10,663.			10,663.
	9	Other direct expenses			1,255.	110,873.
	10	Direct expense summary. Add lines 4 through			>	179,450.
	11					-171,950.
Pa	ırt I		answered "Yes" on Form	990, Part IV, line 19, or r	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	T	1		T
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
- Be	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
		,	Yes %	Yes%	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
	_					
а	ls t	ter the state(s) in which the organization conducted the organization licensed to conduct gaming actions.	ctivities in each of these	states?		Yes No
b	lf " —	No," explain:				
		ere any of the organization's gaming licenses re			/ear?	Yes No
13208	32 10	D-21-21			Sche	dule G (Form 990) 2021

Sch	nedule G (Form 990) 2021 SECOND HARVEST HEARTLAND	23-74	117654	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
á	a The organization's facility		13a	%
	b An outside facility		13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
,	b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount	i		
	of gaming revenue retained by the third party \$			
•	c If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	∟ No
ı	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ie		
_	organization's own exempt activities during the tax year ▶ \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	d Part	III, lines 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G	G(Form 990) SECOND HARVEST HEARTLAND	23-7417654	Page 4
Part IV	Supplemental Information (continued)		<u> </u>
	· · · · · · · · · · · · · · · · · · ·		

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Attach to Form 990.

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

2021
Open to Public

Inspection

	-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?	Yes No
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	res No
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for all	
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	
	ose of grant sistance
COMPLETE LIST AVAILABLE UPON	
REQUEST 640,000. 0. AGENCY CAPAC	TTY
COMPLETE LIST AVAILABLE UPON	
REQUEST 0. 221,488.FMV EQUIPMENT AGENCY CAPAC	ITY
COMPLETE LIST AVAILABLE UPON REOUEST 0. 149567201 FMV MEALS FOOD DISTRIE	IIIII ON
REQUEST 0. 149567201FMV MEALS FOOD DISTRIE	OTION
COMPLETE LIST AVAILABLE UPON	
REQUEST 15,000. 0. WELLNESS PAR	TNER GRANTS
COMPLETE LIST AVAILABLE UPON	
REQUEST 941,219. 0. DISTRIBUTION	GRANTS
COMPLETE LIST AVAILABLE UPON	
REQUEST 814,430. 0. COLLABORATIO	N GRANTS
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	311.
3 Enter total number of other organizations listed in the line 1 table	231.

Schedule I (Form 990) 2021 SECOND HARVEST HEARTLAND 23-7417654 Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
MEALS DISTRIBUTED TO INDIVIDUALS	8473	0.	164,705.	FMV	INDIVIDUAL MEALS
FEDERAL COMMODITIES	8473	0.	4,948,244.	FMV	VARIOUS FOOD ITEMS
Part IV Supplemental Information. Provide the information	required in Part I, lin	e 2; Part III, column	ı (b); and any other ad	dditional information.	1
PART I, LINE 2:					
GRANTS ARE REVIEWED MONTHLY BY THE FINANCE DEPAR	RTMENT. CASH DIS	BURSEMENTS			
ARE COMPARED TO GRANT APPLICATIONS AND DONOR COR	RRESPONDENCE TO	ENSURE			
COMPLIANCE. REGULAR SITE MONITORING, WHICH INCLU					
		, 15			
PERFORMED AS PART OF SHH'S OVERALL COMPLIANCE EN	FFORTS.				

35

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

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

➤ Attach to Form 990.

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

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

SECOND HARVEST HEARTLAND

Employer identification number 23-7417654

Pa	art I Questions Regarding Compensation			
	·		Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the follow	wing to or for a person listed on Form 990,		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant inform	nation regarding these items.		
	First-class or charter travel	sing allowance or residence for personal use		
	Travel for companions	ments for business use of personal residence		
	Tax indemnification and gross-up payments	Ith or social club dues or initiation fees		
	Discretionary spending account Personal	sonal services (such as maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a wr	itten policy regarding payment or		
	reimbursement or provision of all of the expenses described above? If "No	," complete Part III to explain		
2	Did the organization require substantiation prior to reimbursing or allowing	expenses incurred by all directors,		
	trustees, and officers, including the CEO/Executive Director, regarding the	items checked on line 1a?		
3	Indicate which, if any, of the following the organization used to establish the	ne 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.		
		ten employment contract		
		npensation survey or study		
	Form 990 of other organizations X App	roval by the board or compensation committee		
_				
4	During the year, did any person listed on Form 990, Part VII, Section A, lin	e 1a, with respect to the filing		
	organization or a related organization:			v
a				X
b	Participate in or receive payment from a supplemental nonqualified retirem			X
С	Participate in or receive payment from an equity-based compensation arra			<u> </u>
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable am	ounts for each item in Part III.		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must con	mplete lines 5-9.		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organize			
•	contingent on the revenues of:	and the pay of according any compensation		
а	The organization?	5a		х
				х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organiz	zation pay or accrue any compensation		
	contingent on the net earnings of:			
а	The organization?	6a		Х
	•	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization	zation provide any nonfixed payments		
	not described on lines 5 and 6? If "Yes," describe in Part III			х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursua	nt to a contract that was subject to the		
	initial contract exception described in Regulations section 53.4958-4(a)(3)?	P If "Yes," describe in Part III		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumpt	on procedure described in		
	Regulations section 53.4958-6(c)?	9		<u></u>

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

Schedule J (Form 990) 2021

62903.01

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) ALLISON O'TOOLE	(i)	375,000.	125,000.	300.	25,882.	6,308.	532,490.	0.	
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) MEGAN MUSKE	(i)	203,656.	35,356.	300.	14,147.	0.	253,459.	0.	
CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) PATRICK J. BORAN	(i)	157,787.	22,000.	250.	10,264.	11,331.	201,632.	0.	
CHIEF FINANCIAL OFFICER (PART-YEAR)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) ELIZABETH COOPER	(i)	161,058.	8,077.	0.	10,453.	16,625.	196,213.	0.	
CHIEF EXTERNAL RELATIONS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) THIERRY M. IBRI	(i)	147,904.	20,167.	225.	9,838.	11,152.	189,286.	0.	
CHIEF OPER/PROG OFFICER (PART-YEAR)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) DAVID E. LASKEY	(i)	129,878.	3,750.	300.	7,084.	12,728.	153,740.	0.	
DIR ENT EFF & FACILITY MGM	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
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	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization Employer identification number SECOND HARVEST HEARTLAND 23-7417654

Par	t I Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determ noncash contribution	_	s
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	Х	123	1,545,657.	AVERAGE COST		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory	Х		153,886,339.	WHOLESALE-WEIGHT.AVG	}	
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other						
26	Other						
27	Other						
28	Other ()						
29	Number of Forms 8283 received by the organization	zation during	the tax year for c	ontributions			
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29			
						Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it		
	must hold for at least three years from the date		l contribution, and	which isn't required to be us	sed for		
	exempt purposes for the entire holding period?	?			30	а	X
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	-	•	•	ions? 31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash			
					32	a X	
	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in c	olumn (c) foi	r a type of property	for which column (a) is chec	cked,		
	describe in Part II.						

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

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. CHEDULE N, LINE 32b: ANYMOND JAMES AND MORGAN STANLEY ARE USED AS STOCK BROKERS TO SELL TOCK DONATIONS.	Schedule M	1 (Form 990) 2021 SECOND HARVEST HEARTLAND	23-7417654	Page 2
AYMOND JAMES AND MORGAN STANLEY ARE USED AS STOCK BROKERS TO SELL	Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, a is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of the number of items received.	and whether the organiza nation of both. Also comp	tion olete
	SCHEDULE	M, LINE 32B:		
TOCK DONATIONS,	RAYMOND J	JAMES AND MORGAN STANLEY ARE USED AS STOCK BROKERS TO SELL		
	STOCK DON	JATTONS		
	DIGGIC DOL			

132142 11-17-21

SCHEDULE O (Form 990)

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 Form 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

2021
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

SECOND HARVEST HEARTLAND

Employer identification number 23-7417654

PART I LINE 1 DESCRIPTION OF ORGANIZATION MISSION: SECOND HARVEST HEARTLAND'S MISSION IS TO END HUNGER TOGETHER. IN PARTNERSHIP WITH 423 FOOD SHELVES AND NON-PROFIT PARTNERS AND MORE THAN 1,100 HUNGER-RELIEF PROGRAMS, WE SUPPORT THOSE IN OUR REGION FACING HUNGER PART I, LINE 1 & PART III, LINE 1 AT SECOND HARVEST HEARTLAND, WE WORK TO END HUNGER TOGETHER. AS ONE OF THE LARGEST, MOST EFFICIENT, AND MOST INNOVATIVE HUNGER-RELIEF ORGANIZATIONS IN THE NATION, WE LEVERAGE OUR UNIQUE POSITION IN THE EMERGENCY FOOD CHAIN TO MAKE AN IMPACT. THROUGH PARTNERSHIPS, WE SUPPORT THOSE IN OUR REGION FACING HUNGER TODAY, MORE THAN A FOOD BANK, WE'RE A LEADING PARTNER IN THE POLICIES AND PROGRAMS THAT WORK TO END HUNGER, LIKE SNAP, SCHOOL MEALS AND SENIOR NUTRITION PROGRAMS AND WE'RE AN INNOVATOR IN THE AREAS WHERE FOOD CAN BE THE SOLUTION, LIKE FOODRX AND MINNESOTA CENTRAL KITCHEN IN FISCAL YEAR 2022, OUR WORK PROVIDED MORE THAN 113 MILLION MEALS, IN 6 PEOPLE IN OUR SERVICE AREA SOUGHT OUR ASSISTANCE. ALL OF OUR HUNGER-FIGHTING EFFORTS STRIVE TO DECREASE THE RACIAL HUNGER DIVIDE THE FACT THAT BLACK AND HISPANIC HOUSEHOLDS EXPERIENCED FOOD INSECURITY AT LEAST TWICE THE RATE OF WHITE, NON-HISPANIC HOUSEHOLDS. WE REACHED THOSE EXPERIENCING HUNGER THROUGH BOTH FOOD BANK OPERATIONS

AND HUNGER-FIGHTING PROGRAMS:

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

Schedule O (Form 990) 2021

62903.01

<u>Schedule O (Form 990) 2021</u>

Name of the organization **Employer identification number** SECOND HARVEST HEARTLAND 23-7417654 AS A FOOD BANK, WE WORK WITH 423 FOOD SHELVES AND NON-PROFIT PARTNERS AND MORE THAN 1,100 HUNGER-RELIEF PROGRAMS IN 41 COUNTIES IN MINNESOTA AND 18 COUNTIES IN WESTERN WISCONSIN TO GET FOOD TO NEIGHBORS FACING HUNGER. LAST YEAR WE PROVIDED, ON AVERAGE, 86% OF ALL FOOD DISTRIBUTED BY FOOD SHELF PARTNERS TO THEIR NEIGHBORS. OF THE NEARLY 123 MILLION POUNDS OF FOOD WE DISTRIBUTED LAST YEAR, MORE THAN 65.2% WAS FRESH FOOD (PRODUCE, MEAT, DAIRY AND BAKERY ITEMS). OUR AGENCY RELATIONS TEAM HELPED EASE PANDEMIC-ERA PRESSURES FOR OUR PARTNERS BY MAKING \$1.8 MILLION IN GRANTS AVAILABLE TO HELP PARTNERS ADJUST TO INCREASING NEEDS AND CHANGES IN HOW THE NETWORK OPERATES. AMONG OTHER NEEDS. THESE GRANTS HELPED SUPPORT PARTNERS AS THEY CONTINUE TO ADDRESS PANDEMIC-ERA AND INFLATIONARY PRESSURES, INCREASE THEIR CAPACITY, AND PROVIDE SERVICES IN NEW WAYS TO SUPPORT NEIGHBORS. OUR VOLUNTEER BASE IS CRITICAL TO OUR OPERATIONS. LAST YEAR, 9,348 UNIQUE VOLUNTEERS DONATED TIME TO SECOND HARVEST HEARTLAND FROM FOOD SORTING AND PACKING TO CLIENT ASSISTANCE TO SKILL-BASED VOLUNTEER PROJECTS AND MORE CONTRIBUTING 57,293 TOTAL HOURS, VOLUNTEERS DONATED THE TIME EQUIVALENT TO 27 FULL-TIME EMPLOYEES. BASED ON THE AVERAGE HOURS PER YEAR WORKED BY A FULL-TIME EMPLOYEE: 2,080. MINNESOTA CENTRAL KITCHEN, OUR PREPARED MEALS INITIATIVE, PROVIDED 1,387,217 FULLY PREPARED MEALS AT LOCATIONS ACROSS THE REGION, IN PARTNERSHIP WITH MORE THAN 75 COMMUNITY ORGANIZATIONS WHO DISTRIBUTED THE MEALS WHERE THEY WERE NEEDED MOST. ON AVERAGE MORE THAN 60% OF THE INGREDIENTS IN EACH MEAL WERE SOURCED BY SECOND HARVEST HEARTLAND. 19

Schedule O (Form 990) 2021 Page **2**

Schedule O (Form 990) 2021	Page 2
Name of the organization SECOND HARVEST HEARTLAND	Employer identification number 23-7417654
KITCHENS PARTICIPATED IN THE COLLABORATIVE, EMPLOYING AROUND 80 FOOD	
SERVICE WORKERS WEEKLY AND INVESTING \$6.5 MILLION IN LOCAL BUSINESSES.	
WE PROVIDED COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) FOOD BOXES TO	
MORE THAN 230 UNIQUE DISTRIBUTION SITES IN 41 MINNESOTA COUNTIES,	
SERVING APPROXIMATELY 5,300 SENIORS MONTHLY.	
FOODRX, OUR MEDICALLY TAILORED NUTRITION BOX PROGRAM, PROVIDED SERVICES	
TO SUPPORT A HEALTHY DIET AND IMPROVED HEALTH OF 10,394 INDIVIDUALS	
THROUGH FOUR SERVICE CATEGORIES: FOODRX CHRONIC DISEASE MANAGEMENT	
PROGRAM (1,060), FOODRX STABILITY BOXES (555), SNAP REFERRALS (6,080),	
COMMUNITY RESOURCES (2,699).	
OUR SNAP (SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM) OUTREACH	
SPECIALISTS PROCESSED OVER 18,600 NEW CLIENT REFERRALS AND ASSISTED	
OVER 13,100 HOUSEHOLDS WITH SNAP APPLICATIONS AND RE-CERTIFICATIONS.	
THIS ADDED OVER 9.4 MILLION MEALS TO FAMILIES LAST YEAR.	
OUR CHILD NUTRITION PROGRAMS PROVIDED OVER \$492,600 IN GRANTS TO 24	
EDUCATION AND NONPROFIT PARTNERS TO HELP MEET INCREASED NEED AND	
ADDRESS FOOD ACCESS CHALLENGES DUE TO COVID-19, INFLATION, AND OTHER	
HARDSHIPS AFFECTING FAMILIES. THESE GRANTS SUPPORTED THE DELIVERY OF	
4.4 MILLION MEALS TO MINNESOTA KIDS.	
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:	
COMMUNITY OUTREACH: (CONTINUED FROM PART III) OUR CHILD NUTRITION	
PROGRAMS PROVIDED OVER \$492,600 IN GRANTS TO 24 EDUCATION AND NONPROFIT	

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Employer identification number Name of the organization SECOND HARVEST HEARTLAND 23-7417654 PARTNERS TO HELP MEET INCREASED NEED AND ADDRESS FOOD ACCESS CHALLENGES DUE TO COVID-19, INFLATION, AND OTHER ISSUES FACING MINNESOTA FAMILIES. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: COMMODITY SUPPLEMENTAL FOOD PROGRAM: THE COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) IS ONE OF THE FOUNDATIONAL SERVICES PROVIDED BY SECOND HARVEST HEARTLAND. THROUGH THIS PROGRAM. WE PROVIDE FREE FOOD FOR SENIORS, DISTRIBUTING 30-35 POUNDS OF NUTRITIONALLY BALANCED USDA FOOD TO INDIVIDUALS EACH MONTH. PROGRAM PARTICIPANTS ARE GIVEN A BOX OF HIGHLY NUTRITIOUS FOOD, WHICH MAY INCLUDE CANNED FRUITS, VEGETABLES AND JUICES, SHELF-STABLE MILK, AMERICAN CHEESE, CANNED MEAT, PEANUT BUTTER OR DRIED BEANS, AND CEREAL, RICE OR PASTA. IN FY22, WE PROVIDED CSFP FOOD BOXES TO MORE THAN 230 UNIQUE DISTRIBUTION SITES IN 41 MINNESOTA COUNTIES, SERVING APPROXIMTELY 5,300 SENIORS MONTHLY. THE LARGEST SITE IN OUR SERVICE AREA IS SECOND HARVEST HEARTLAND IN BROOKLYN PARK DISTRIBUTING FOOD TO CLOSE TO 400 CLIENTS EACH MONTH EXPENSES \$ 5,789,234. INCLUDING GRANTS OF \$ 4,919,470. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 IS PREPARED BY OUR AUDITOR WITH SUPPORT FROM STAFF AT SECOND HARVEST HEARTLAND. THE FINANCE COMMITTEE OF THE BOARD REVIEWS AND APPROVES THE FORM 990 WHICH IS THEN PROVIDED TO ALL BOARD MEMBERS PRIOR TO FILING. FORM 990, PART VI, SECTION B, 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 THEY UNDERSTOOD AND ACCEPTED THE TERMS OF THE POLICY. MEMBERS OF THE BOARD ARE REQUIRED TO PROVIDE A SIGNED AGREEMENT ANNUALLY.

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Name of the organization SECOND HARVEST HEARTLAND	Employer identification number 23-7417654
FORM 990, PART VI, SECTION B, LINE 15:	
SHH PERIODICALLY 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.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
AL,AR,CA,FL,GA,HI,IL,KS,KY,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,OR,PA,RI,SC,TN,UT	
VA,WV,WI	
FORM 990, PART VI, SECTION C, LINE 19:	
COPIES OF ALL INFORMATION ARE AVAILABLE UPON REQUEST. FORM 990 IS MADE	
AVAILABLE THROUGH THE ORGANIZATION'S WEBSITE.	
FORM 990, PART XII, LINE 2C:	
THE ORGANIZATION DID NOT CHANGE ITS OVERSIGHT PROCESS OR SELECTION	
PROCESS DURING THE TAX YEAR.	