PUBLIC DISCLOSURE COPY

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2024 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Address change FOOD FORWARD, INC. Name change 90-0678872 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 7412 FULTON AVENUE STE #3 (818) 764-1022202,859,503. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return NORTH HOLLYWOOD, CA 91605 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: RICHARD NAHMIAS for subordinates? Yes X No SAME AS C ABOVE __Yes **H(b)** Are all subordinates included? Tax-exempt status: X = 501(c)(3) = 501(c)527 (insert no.) 4947(a)(1) or If "No," attach a list. See instructions HTTPS://FOODFORWARD.ORG/ H(c) Group exemption number K Form of organization: X Corporation Other L Year of formation: 2011 M State of legal domicile: CA Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: FOOD FORWARD(R) IS ONE OF THE Activities & Governance NATION'S LARGEST INDEPENDENT URBAN PRODUCE RECOVERY ORGANIZATIONS. if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2024 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h Prior Year **Current Year** 483,693 193,836,648 Contributions and grants (Part VIII, line 1h)

ᅙ	9	Program service revenue (Part VIII, line 2g)	143,648.	154,9∠4.							
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	542,531.	1,426,998.							
Ř	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	329.	-155,455.							
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	175,170,201.	195,263,115.							
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	168,489,542.	185,325,930.							
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.							
ဖွ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,017,730.	4,653,148.							
use	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.							
<u>ē</u>	b	Total fundraising expenses (Part IX, column (D), line 25)1,136,936.									
ώ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,405,579.	3,402,665.							
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	174,912,851.	193,381,743.							
	19	Revenue less expenses. Subtract line 18 from line 12	257,350.	1,881,372.							
Ses			Beginning of Current Year	End of Year							
sets	20	Total assets (Part X, line 16)	17,482,876.	19,019,673.							
ASS	21	Total liabilities (Part X, line 26)	1,113,439.	1,151,084.							
EE	22	Net assets or fund balances. Subtract line 21 from line 20	16,369,437.	17,868,589.							
Pa	rt II	Signature Block									
Unde	der penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is										

Signature of officer Date Sign RICHARD NAHMIAS, CHIEF EXECUTIVE OFFICER Here Type or print name and title Date PTIN Preparer's name Preparer's signature 10/20/25 self-employed P00545829 LAUREN A. HAVERLOCK Paid LAUREN A. HAVERLOCK Firm's EIN 39-0859910BAKER TILLY ADVISORY GROUP, Preparer Firm's name Firm's address 21700 OXNARD ST. **STE 300** Use Only

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown above? See instructions LHA For Paperwork Reduction Act Notice, see the separate instructions.

WOODLAND HILLS, CA 91367

Phone no. 818-577-1900

Form 990 (2024)

Form 990 (2024) FOOD FORWARD, INC. 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	X	
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	۰		
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
•	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	l °		
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, 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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		X
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	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or 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
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		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u></u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
-1	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	Х	
	democre government out are ix, column (x), into 1: 11 Tes, complete scriedule i, Parts I and II	<u> </u>		L

Form 990 (2024) FOOD FORWARD, INC.

Part IV | Checklist of Required Schedules (continued)

	Continued)		V	
00	Did the averagination was at asset than \$5,000 of average as at least one of a second in the individuals as		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	00		х
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_^_
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	00	х	
04-	Schedule J	23		
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	04-		x
L	Schedule K. If "No," go to line 25a	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		_
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
ام	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		_
		240		$\overline{}$
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	250		x
L	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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	25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	250		
26				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		x
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	_20		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
20		21		
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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а		28a		х
h	"Yes," complete Schedule L, Part IV	28b		X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	200		
C		28c		x
20	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
29 30	, ,	_29	- 21	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		х
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization required, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part 1	31		
32	,	32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
50	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V. line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			_ - _
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	200		
	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			
٠.	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			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 31			_
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	(gambling) winnings to prize winners?	1c	Х	
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Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			age •
	Continued)		Yes	No
29	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		163	INO
Za	filed for the calendar year ending with or within the year covered by this return 2a 65			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	0.0		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			1
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17	l	1

Form **990** (2024)

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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 15 **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. 14 **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 X 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 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Х 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? Х 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? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 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? 10a 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? Х 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. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 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 Did the organization have a written document retention and destruction policy? 14 Х 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 Х 15a Х 15b Other officers or key employees of the organization 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? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA 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 X Upon request Another's website ___ 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 RICHARD NAHMIAS - (818) 764-1022

Form **990** (2024)

3, NORTH HOLLYWOOD,

7412 FULTON AVE, STE #

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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 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.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)	Jiga	mea	(C	C)	<u> </u>	-	(D)	(E)	(F)
Name and title	Average hours per		not c	heck	more	than o		Reportable compensation	Reportable compensation	Estimated amount of
	week					s both		from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	or dire				ted		organization	(W-2/1099-MISC/	from the
	related	stee c	ruste		a.	bensa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ıal tru	onal t		ploye	com		1099-NEC)		and related
	below line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) RICHARD NAHMIAS	40.00	<u> </u>	=	0	~	Ξ =	Œ.			
FOUNDER/CEO		Х		Х				226,957.	0.	54,940.
(2) KRISTEN JOHNSON	50.00									-
CHIEF OPERATING OFFICER					Х			190,534.	0.	12,423.
(3) JENNIFER COX	50.00									
CHIEF DEVELOPMENT OFFICER						Х		161,139.	0.	16,624.
(4) JODI JACOBSEN	45.00									
DIRECTOR OF HUMAN RESOURCES						X		129,110.	0.	41,251.
(5) DIANE HELFREY	50.00									
DIRECTOR OF FINANCE & ACCOUNTING				Х				137,369.	0.	18,351.
(6) AMIR ZAMBRANO	50.00									
MANAGING DIRECTOR OF PROGRAMS						X		128,518.	0.	5,001.
(7) NKEMDILIM NWOSU	55.00									
DIRECTOR OF COMMUNICATIONS						X		121,134.	0.	10,989.
(8) SAMANTHA TESLIK	42.00									
DIRECTOR OF COMMUNITY PROGRAMS						X		107,824.	0.	17,677.
(9) JEFF HARRIS	10.00	1								_
BOARD CHAIR (AS OF 6/19/24)		Х		Х				0.	0.	0.
(10) ROB VALENCIA	2.00	ļ								
BOARD CHAIR (THRU 6/18/24)	<u> </u>	Х		Х				0.	0.	0.
(11) JASON CRAYNE	4.00	ļ								
TREASURER	1 00	Х		Х				0.	0.	0.
(12) DONELLA WILSON	1.00	ļ		l						•
SECRETARY (AS OF 4/1/24)	1 00	Х		Х				0.	0.	0.
(13) MARK RHEIN	1.00	ļ		l						•
SECRETARY (THRU 3/31/24)	2 00	Х	_	Х				0.	0.	0.
(14) JIM BERLINER	3.00	∤							•	•
BOARD MEMBER	F 00	Х						0.	0.	0.
(15) CHRISTY CHIN	5.00	٠,,								0
BOARD MEMBER	1 50	Х						0.	0.	0.
(16) JEDD GOLD	1.50	٠,							_	•
BOARD MEMBER	2 00	Х	_		_			0.	0.	0.
(17) NEIL HALTRECHT	3.00	. ,							0.	0
BOARD MEMBER	1	X		l				0.	U •	990 (2024)

432007 12-10-24

Form **990** (2024)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	d Hig	ghes	st C	compensated Employee	s (continued)				
(A)	(B)				C)			(D)	(E)		(F)		
Name and title	Average	(do		Pos	itior	1 than	one	Reportable	Reportable		Es	timate	ed
	hours per	box	, unle	ss pe	rson i	is botl	h an	compensation	compensation	n	an	nount	of
	week	\vdash	cer ar	ia a a	Irecto	or/trus	itee)	from	from related		l .	other	
	(list any hours for	director						the organization	organizations (W-2/1099-MIS		l	pensa om th	
	related	e or d	stee			sated		(W-2/1099-MISC/	1099-NEC)	C/		anizat	_
	organizations	truste	al trus		yee	mper		1099-NEC)	10001120)		ı -	d relat	
	below	Individual trustee or	Institutional trustee	Je.	Key employee	Highest compensated employee	, ler	,			orga	anizati	ons
	line)	Indi	Insti	Officer	Key	E gig	Former						
(18) DAVID LAKE	3.00												
BOARD MEMBER		Х				_		0.		0.			0.
(19) BRIAN LAZARUS	3.00	ļ								_			•
BOARD MEMBER	1 00	Х						0.		0.			0.
(20) CINDY LEE	1.00	.,								^			^
BOARD MEMBER	0.00	Х				_		0.		0.			0.
(21) SHARI LEINWAND	8.00	٠,								^			0
BOARD MEMBER	2 00	Х				\vdash		0.		0.			0.
(22) PAMELA SCHWARTZ	3.00									0.			^
BOARD MEMBER (23) BETTY ZAMORANO-PEDREGON	4.00	Х				-		0.		0.			0.
BOARD MEMBER	4.00	x						0.		0.			0.
DOARD MEMDER		^				\vdash		0.		<u> </u>			0.
						\vdash							
		1											
		1											
1b Subtotal	•							1,202,585.		0.	17	7,2	56.
c Total from continuation sheets to Part VI								0.		0.		-	0.
d Total (add lines 1b and 1c)								1,202,585.		0.	17	7,2	56.
2 Total number of individuals (including but n								eceived more than \$100,	000 of reportable				
compensation from the organization													10
												Yes	No
3 Did the organization list any former officer	, director, trust	ee, ł	кеу є	empl	loye	e, or	hig	hest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su	•		•					•	•				
and related organizations greater than \$150											4	X	
5 Did any person listed on line 1a receive or a	•				,			•					
rendered to the organization? If "Yes, " con	nplete Schedul	e J f	or su	ıch i	oers	on					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	•	•							•	ensa	tion fro	om	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin		ear.				
(A) Name and business	address							(B) Description of s	ervices	C	O) Compe		n
LION POWER EXPRESS INC.,		ÓΒ	MΔ	ND	TF		-	Bosomption or c	JOINTOGO		, cimpo	ioatio	··
APT 208, LOS ANGELES, CA		OI	TITA	עוו	111			THIRD PARTY	DRIVER		22	9,7	50.
mi i zoo, nob imonno, cii	30003								DICE VEIC		22	<i>,</i> ,	50.
-													

Form **990** (2024)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Form 990 (2024) FOOD FORWARD, INC.
Part VIII Statement of Revenue

			Check if Schedule O contains a	resnonse (or note to any lin	e in this Part VIII			
			Cricci ii Coricdule O coritairis a	тезропас с	or riote to arry iiii	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
	_								30000013 3 12 3 14
nts			Federated campaigns	1a					
Gra			Membership dues	1b	106 502				
ts, An			Fundraising events	1c	196,793.				
Contributions, Gifts, Grants and Other Similar Amounts			Related organizations	1d	021 000				
ns,			Government grants (contributions)	1e	831,000.				
ë			All other contributions, gifts, grants, and						
혈			similar amounts not included above		192,808,855.				
E S		g	Noncash contributions included in lines 1a-1f	1g \$	185,501,409.				
<u>2 g</u>		h	Total. Add lines 1a-1f			193836648.			
					Business Code				
e	2	а	OTHER PROGRAM SERVICE REVENU	UE	900099	154,924.			154,924.
e Ķ		b							
S		С							
am eve		d							
Program Service Revenue		е							
Ā		f	All other program service revenue \dots						
		g	Total. Add lines 2a-2f			154,924.			
	3		Investment income (including divider						
			other similar amounts)			557,813.			557,813.
	4		Income from investment of tax-exem						
	5		Royalties						
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of (i) S	ecurities	(ii) Other				
			assets other than inventory 7a 8,2	295,240.					
		b	Less: cost or other basis						
e			and sales expenses	126,055.					
len.		С	Gain or (loss) 7c 8	369,185.					
Revenue			Net gain or (loss)			869,185.			869,185.
her			Gross income from fundraising events (r						
₹			including \$196,793.	of					
			contributions reported on line 1c). So	ee					
			Part IV, line 18	8a	13,440.				
			Less: direct expenses		170,333.				
		С	Net income or (loss) from fundraising	g events		-156,893.			-156,893.
	9	а	Gross income from gaming activities	s. See					
			Part IV, line 19	9a					
		b	Less: direct expenses	9b					
		С	Net income or (loss) from gaming ac	tivities					
	10	а	Gross sales of inventory, less returns	s					
			and allowances	10a	1,438.				
		b	Less: cost of goods sold		0.				
		С	Net income or (loss) from sales of inv	ventory		1,438.			1,438.
					Business Code				
Miscellaneous Revenue	11	а							
ane Dut		b							
e e e		С							
Alsc B		d	All other revenue						
2			Total. Add lines 11a-11d						
	12		Total revenue. See instructions			195263115.	0.	0.	1426467.

Form 990 (2024) FOOD FORWARD, Part IX Statement of Functional Expenses

04	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)											
Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX											
_		(A)	this Part IX	(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	<u> 185,325,930.</u>	185,325,930.									
2	Grants and other assistance to domestic											
	individuals. See Part IV, line 22											
3	Grants and other assistance to foreign											
	organizations, foreign governments, and foreign											
	individuals. See Part IV, lines 15 and 16											
4	Benefits paid to or for members											
5	Compensation of current officers, directors,											
	trustees, and key employees	640,574.	23,003.	536,610.	80,961.							
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	3,067,481.	2,366,951.	168,691.	531,839.							
8	Pension plan accruals and contributions (include	400		22	22 121							
	section 401(k) and 403(b) employer contributions)	109,735.	50,296.	36,278.	23,161.							
9	Other employee benefits	501,583.	357,365.	95,437.	48,781.							
10	Payroll taxes	333,775.	217,334.	62,190.	54,251.							
11	Fees for services (nonemployees):											
	Management	4.40		440								
	Legal	440. 153,701.		440.								
	Accounting	153,701.		153,701.								
	Lobbying											
	Professional fundraising services. See Part IV, line 17	91,225.		91,225.								
	Investment management fees Other. (If line 11g amount exceeds 10% of line 25,	91,225		91,223.								
g	column (A), amount, list line 11g expenses on Sch O.)											
12	Advertising and promotion	56,008.	25,954.	3,955.	26,099.							
13	Office expenses	89,908.		21,692.	29,092.							
14	Information technology	144,767.	52,075.	69,576.	23,116.							
15	Royalties	, -	, , , , ,	, ,	,							
16	Occupancy	280,565.	187,577.	89,888.	3,100.							
17	Travel	87,127.	44,672.	36,519.	5,936.							
18	Payments of travel or entertainment expenses	-		-								
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings	75,261.	26,575.	43,690.	4,996.							
20	Interest											
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	325,621.	302,732.	18,981.	3,908.							
23	Insurance	87,333.	63,288.	24,045.								
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	PRODUCE TRANSPORTATION	449,757.	449,757.									
b			,									
c												
d												
е	All other expenses	1,560,952.		336,432.	301,696.							
25	Total functional expenses. Add lines 1 through 24e	193,381,743.	190,455,457.	1,789,350.	1,136,936.							
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)				000							

Form **990** (2024)

Pa	rt X	Balance Sneet					
		Check if Schedule O contains a response or note t	o any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			82,652.	1	302,562
	2	Savings and temporary cash investments			454,155.	2	329,243
	3	Pledges and grants receivable, net			934,792.	3	2,950,636
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or fo					
		trustee, key employee, creator or founder, substan					
		controlled entity or family member of any of these	controlled entity or family member of any of these persons				
	6	Loans and other receivables from other disqualified					
		under section 4958(f)(1)), and persons described in	ı sect	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			129,743.	9	91,118
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		2,578,537.			
	b		10b	1,304,880.	900,113.		1,273,657 13,443,966
	11	Investments - publicly traded securities	14,204,885.	11	13,443,966		
	12	Investments - other securities. See Part IV, line 11		12			
	13	Investments - program-related. See Part IV, line 11		13			
	14	Intangible assets	776 536	14	COO 401		
	15	Other assets. See Part IV, line 11			776,536.	15	628,491
	16	Total assets. Add lines 1 through 15 (must equal l			17,482,876.	16	19,019,673
	17	Accounts payable and accrued expenses			378,243.	17	561,345
	18	Grants payable		18			
	19 20	Deferred revenue			19 20		
	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Par		of Schodulo D		21	
	22	Loans and other payables to any current or former					
Liabilities	~~	trustee, key employee, creator or founder, substan					
≣		controlled entity or family member of any of these				22	
E.	23	Secured mortgages and notes payable to unrelate	-			23	
	24	Unsecured notes and loans payable to unrelated the				24	
	25	Other liabilities (including federal income tax, payal					
		parties, and other liabilities not included on lines 1					
		of Schedule D	-		735,196.	25	589,739
	26	Total liabilities. Add lines 17 through 25			1,113,439.	26	1,151,084
		Organizations that follow FASB ASC 958, check					· · · ·
es		and complete lines 27, 28, 32, and 33.		_			
anc	27	Net assets without donor restrictions			15,419,645.	27	14,299,162
Bal	28	Net assets with donor restrictions			949,792.	28	3,569,427
nd		Organizations that do not follow FASB ASC 958					
Ŀ		and complete lines 29 through 33.					
S O	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or equip			30		
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inco	me, c	or other funds		31	
№	32	Total net assets or fund balances		16,369,437.	32	17,868,589.	
	33	Total liabilities and net assets/fund balances			17,482,876.	33	19,019,673.

Pa	T XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	195			
2	Total expenses (must equal Part IX, column (A), line 25)	2	193			
3	Revenue less expenses. Subtract line 2 from line 1	3				72.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	16	, 36	9,4	37 .
5	Net unrealized gains (losses) on investments	5		-37	0,2	<u> 20.</u>
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		-1	2,0	00.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	<u> 17</u>	,86	8,5	<u>89.</u>
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were 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	X	
	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	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		,	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	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					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		<u> X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990	(2024)

SCHEDULE A

(Form 990)

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.

Open to Public Inspection

GO to www.iis.gov/Forms

Employer identification number

OMB No. 1545-0047

			FORWARD,						0-0678872				
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.					
The	organ	ization is not a private found	lation because it is: (F	For lines 1 through 12, cl	neck only	one box.)							
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(I)(A)(i).						
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	າ 990).)								
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(i	ii).						
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in section	n 170(b)(1)(A)	(iii). Enter	the hospital's name,				
		city, and state:											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
		section 170(b)(1)(A)(iv). (Complete Part II.)											
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	X	An organization that norma	ılly receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	e general _l	public described in				
		section 170(b)(1)(A)(vi). (C	omplete Part II.)										
8	Ш	A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)								
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	ınction with a	land-grant	college				
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of	the college	e or				
		university:											
10		An organization that norma	•					•					
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support f	rom gross investment				
		income and unrelated busing	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.				
		See section 509(a)(2). (Co											
11	Щ	An organization organized a	•	•	•								
12	Ш	An organization organized a	•	•	-			-	•				
		more publicly supported or	-						Check the box on				
		lines 12a through 12d that	* *					-					
а			•	•	•	-							
		the supported organization			majority c	of the direc	tors or trustee	es of the su	upporting				
		organization. You must o			:			-(-\ ll	utus su				
b		Type II. A supporting org	•				-		-				
		control or management o			ame perso	ns that co	ntroi or manag	je tne supp	σοπεα				
_		organization(s). You mus			in connect	tion with	and functional	v intograta	od with				
C		Type III functionally inte its supported organization						y integrate	eu witti,				
d		Type III non-functionally		•	•	•	•	ted organi:	zation(s)				
u		that is not functionally int						-					
		requirement (see instructi	-		•		-	arrattoriti	VCITCSS				
е		Check this box if the orga	•	•	•			I Tyne III					
ŭ		functionally integrated, or					1 ypc 1, 1 ypc 1	i, iype iii					
f	Fnte	er the number of supported of		nany integrated cappertin	ig organiz	ation.							
		vide the following information	•	d organization(s).									
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed ng document?	(v) Amount of	monetary	(vi) Amount of other				
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)				
				,									
Tota	ı						1		1				

432021 01-14-25

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

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

Sec	tion A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total				
	Gifts, grants, contributions, and		• •								
	membership fees received. (Do not										
	include any "unusual grants.")	119098448	128086410	146946855	174471693	193836648	762440054				
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						-				
Ŭ	furnished by a governmental unit to										
	the organization without charge										
1		119098448	128086410	146946855	174471693	193836648	762440054				
	The portion of total contributions	113030110	120000110	110310033	1,11,1033	133030010	702110031				
3	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,										
							34310506.				
_	**						728129548				
	Public support. Subtract line 5 from line 4.						120129340				
		(-) 0000	(h) 0001	(-) 0000	(4) 0000	(=) 0004	(s) Tatal				
	ndar year (or fiscal year beginning in)	(a) 2020 119098448	(b) 2021 1 2 9 0 9 6 4 1 0	(c) 2022	(d) 2023	(e) 2024	(f) Total				
		119090440	120000410	140940033	174471093	193030040	702440034				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,	2 040	2 175	167 567	E22 2E0	FE7 012	1262762				
_	and income from similar sources	2,948.	2,175.	107,307.	533,259.	337,013.	1263762.				
9	Net income from unrelated business										
	activities, whether or not the	16 270					16 270				
	business is regularly carried on	16,378.					16,378.				
10	Other income. Do not include gain										
	or loss from the sale of capital	0 050	0 070	700	200	1 420	15 205				
	assets (Explain in Part VI.)	9,859.	2,978.	793.	329.	1,438.					
	Total support. Add lines 7 through 10						763735591				
	Gross receipts from related activities,	•	,			12	410,179.				
13	First 5 years. If the Form 990 is for the	-		•							
C	organization, check this box and stop										
	ction C. Computation of Publi					<u> </u>	05 24				
	Public support percentage for 2024 (I					14	95.34 %				
	Public support percentage from 2023					15	95.80 %				
16a	33 1/3% support test - 2024. If the						77				
	stop here. The organization qualifies										
b	33 1/3% support test - 2023. If the										
	and stop here. The organization qual										
17a	10% -facts-and-circumstances test	- 2024. If the orga	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,				
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization										
	meets the facts-and-circumstances te	est. The organization	n qualifies as a pu	blicly supported o	rganization						
b	10% -facts-and-circumstances test	_					10% or				
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the										
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization										
18	Private foundation. If the organization	on did not check a b	oox on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s				
						Schedule A	(Form 990) 2024				

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.)

Se	ction A. Public Support	elow, please comp	olete i ait ii.j				
Cale	endar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(1) = 1 = 1	(12)	(5) = 5 = 5	(4,7=5=5	(5) = 5 = 1	χ, του
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	A Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
		(-) 0000	(h) 0001	(=) 0000	(4) 0000	(-) 0004	(f) Tatal
	endar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
,	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First 5 years. If the Form 990 is for the	· ·		,	•	()()	· —
<u>-</u>	check this box and stop here	a Cummant Da					
	ction C. Computation of Publi					T I	
	Public support percentage for 2024 (I		•	column (f))		15	<u>%</u>
	Public support percentage from 2023 ction D. Computation of Inves		-			16	<u>%</u>
	Investment income percentage for 20			ine 13 column (f)		17	%
	Investment income percentage from					18	
	a 33 1/3% support tests - 2024. If the						
136	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2023. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	ind
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	in did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	1 1

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of 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")? *If* "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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 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		
<u> </u>		
3с		
- 55		
4a		
Tu		
4b		
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40		
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8		
9a		
3a		
9b		
90		
9с		
90		
10a		
IVa		
10b		
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га	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	-		
800	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	_		
<u>Sac</u>	the supported organization(s). tion D. All Type III Supporting Organizations	1		
<u> </u>	tion B. All Type III Supporting Organizations		Yes	Na
4	Did the examination provide to each of its supported examinations, by the last day of the fifth month of the		res	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	s).		
а	The organization satisfied the Activities Test. Complete line 2 below.	•		
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental			
	entity (see instructions).			
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2024

5

Income tax imposed in prior year

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

5

6

Schedule A (Form 990) 2024

and 4c. 8 Breakdown of line 7: a Excess from 2020 **b** Excess from 2021 c Excess from 2022 d Excess from 2023 e Excess from 2024

Schedule B (Form 990)

(Rev. December 2024)

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

FOOD FORWARD, INC.

Employer identification number

90-0678872

Organization type (check one):						
Filers of	:	Section:				
Form 99	0 or 990-EZ	$\overline{\mathbf{X}}$ 501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Note: Or	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
X	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year				
answer "	No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).				

Name of organization

Employer identification number

FOOD FORWARD, INC.

90-0678872

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.							
(a)	(b)	(c)	(d)					
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution					
1		\$ 18,362,649.	Person Payroll Noncash X (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution					
2		\$ <u>15,191,204.</u>	Person X Payroll Noncash X (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution					
3		\$ 6,532,704.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No. 4	Name, address, and ZIP + 4	\$ 6,403,645.	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
5	runio, addi O33, dila Eif T T	\$5,347,738.	Person Payroll Noncash X (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No. 6	Name, address, and ZIP + 4	Total contributions \$4,681,677.	Person Payroll Noncash (Complete Part II for noncash contributions.)					

Name of organization Employer identification number

FOOD FORWARD, INC.

90-0678872

Part II	II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.							
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received					
1	FRESH PRODUCE							
1								
		\$ 18,362,649.	12/31/24					
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received					
Part I		(See instructions.)						
2	FRESH PRODUCE							
		\$ <u>15,186,724.</u>	12/31/24					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received					
	FRESH PRODUCE							
3								
		\$6,497,779.	12/31/24					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received					
	FRESH PRODUCE							
4								
		\$6,403,645.	12/31/24					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received					
	FRESH PRODUCE							
5								
		\$5,347,738.	12/31/24					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received					
6	FRESH PRODUCE							
		\$ <u>4,681,677.</u>	12/31/24					

Employer identification number

Name of organization

FOOD FORWARD, 90-0678872 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

(Rev. December 2024) 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

Open to Public Inspection

Name of the organization

FOOD FORWARD, INC.

Employer identification number 90-0678872

Total number at end of year 2 Aggregate value of grants from (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable provate benefit? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable provate benefit of the organization funds. Yes No No Posservation Easterments. Yes No No Posservation Did not Yes No Posservation Did not Did not Posservation Did not Did no	Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		r Si	milar Funds o	or Ac	cour	ts. Complete if the
2 Aggregate value of contributions to (during year) 4 Aggregate value of prants from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charatable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yea" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of land for public use (for example, recreation or education) Preservation of a certified historic structure Preservation of open space 2 Complete lines 2 a through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 1 Total number of conservation easements included on line 2 a quieted and you the tax year. 2 Total number of conservation easements included on line 2 a quieted and you have a preservation decreased in the National Register 3 Number of conservation easements included on line 2 a quieted and you have a preservation during the tax year. 4 Number of states where property subject to conservation easements in the lodge of the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furthernance of public service, provide in Part XIII, describe how the organization reports conservation e				vised	funds	(b) Fun	ds and other accounts
2 Aggregate value of contributions to (during year) 4 Aggregate value of prants from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charatable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yea" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of land for public use (for example, recreation or education) Preservation of a certified historic structure Preservation of open space 2 Complete lines 2 a through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 1 Total number of conservation easements included on line 2 a quieted and you the tax year. 2 Total number of conservation easements included on line 2 a quieted and you have a preservation decreased in the National Register 3 Number of conservation easements included on line 2 a quieted and you have a preservation during the tax year. 4 Number of states where property subject to conservation easements in the lodge of the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furthernance of public service, provide in Part XIII, describe how the organization reports conservation e	1	Total number at end of vear	. ,					
3 Aggregate value of grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization in property, subject to the organization's exclusive legal control? Or Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III Conservation Easements. Complete if the organization asswered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of part and part of preservation of a conservation essement on the last day of the tax year. 2 Complete lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation essement on the last day of the tax year. a Total number of conservation easements 2 Description of conservation easements on a certified historic structure included on line 2a. 2 Complete lines 2 at through 2d if the organization does not be a certified historic structure included on line 2a. 2 Complete in the structure listed in the National Register 2d Number of conservation easements michaelded on line 2 acquired after July 25, 2006, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 2d Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number								
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9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part X \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ Bevenue included on Form 990, Part VIII, line 1 \$ Bevenue included on Form 990, Part VIII, line 1 \$ Bevenue included on Form 990, Part VIII, line 1 \$ Bevenue included on Form 990, Part VIII, line 1 \$ Bevenue included on Form 990, Part VIII, line 1 \$ Bevenue included on Form 990, Part VIII, line 1 \$ Bevenue included on Form 990, Part VIII, line 1 \$ Bevenue included on Form 990, Part VIII, line 1	8	Does each conservation easement reported on line 2d above	satisfy the requirement	nts (of section 170(h)(4)(B)(i)		
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provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 \$	D							
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a Revenue included on Form 990, Part VIII, line 1	2	-				yaın, p	provide	;
	_							¢

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

Schedule D (Form 990) (Rev. 12-2024)

432051 01-02-25

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		895,138.	386,145.	508,993.
d Equipment		385,357.	258,294.	127,063.
e Other		1,298,042.	660,441.	637,601.
Total. Add lines 1a through 1e. (Column (d) must equa	1,273,657.			

Schedule D (Form 990) (Rev. 12-2024)

Schedule D (Form 990) (Rev. 12-2024) FOOD FORWA	RD, INC.	90)-0678872 _{Page} 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
70 E	(b) Book value	(b) Mothed of Valuation: cool of on	a or your market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
· ·			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.			
	F 000 D+ IV/ I'	14 - O - Farma 200 David V. Para 40	
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets	5 000 D + 11/1		
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	T
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
<u>(9)</u>			
Total. (Column (b) must equal Form 990, Part X, line 15, co.	<u>l. (B)) </u>		
Part X Other Liabilities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) OPERATING LEASE LIABILITIE	ES		589,739.
(3)			
(4)			†
			
(5)			+
(6)			+
(7)			+
(8)			1
(0)			i e

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) (Rev. 12-2024)

589,739.

Sche	edule D (Form 990) (Rev. 12-2024) FOOD FORWARD, INC.				OO/OO/2 Page 2		
Pa	rt XI Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per Re	turn			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.						
1	Total revenue, gains, and other support per audited financial statements			1	195,445,065.		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains (losses) on investments	2a	-370,220.				
b			376,087.				
С	Recoveries of prior year grants						
d			5,750.				
е				2e	11,617.		
3	Subtract line 2e from line 1			3	195,433,448.		
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	-170,333.				
С	Add lines 4a and 4b			4c	-170,333.		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				195,263,115.		
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents Wit	h Expenses per F	Retur	'n		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.						
1	Total expenses and losses per audited financial statements			1	193,945,913.		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a	376,087.				
b	Prior year adjustments	2b					
С	Other losses	2c					
d	Other (Describe in Part XIII.)	2d	188,083.				
е	Add lines 2a through 2d			2e	564,170.		
3	Subtract line 2e from line 1			3	193,381,743.		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIII.)	4b					
С	Add lines 4a and 4b			4c	0.		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	193,381,743.		
Pa	Part XIII Supplemental Information						
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	IV, lines 1b	and 2b; Part V, line 4	; Part	X, line 2; Part XI,		
linac	2d and 4h; and Part XII, lines 2d and 4h. Also complete this part to provide any additional and additional and any additional and any additional and additional additional and additional additional and additional	tional info	mation				

s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE ORGANIZATION'S BOARD OF DIRECTORS ESTABLISHED AN OPERATING RESERVE POLICY AND FUND IN 2020 TO ENSURE THE STABILITY OF THE MISSION, PROGRAMS, EMPLOYMENT, AND ONGOING OPERATIONS OF THE ORGANIZATION. THE MINIMUM OPERATING RESERVE FUND BALANCE IS SIX MONTHS OF AVERAGE CASH OPERATING COSTS FOR THE CURRENT FISCAL YEAR'S OPERATING BUDGET, AND IS RE-CALCULATED AFTER APPROVAL OF THE ANNUAL OPERATING BUDGET.

PART X, LINE 2:

THE ORGANIZATION HAS RECEIVED TAX-EXEMPT STATUS FROM THE INTERNAL REVENUE SERVICE AND CALIFORNIA FRANCHISE TAX BOARD UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND UNDER REVENUE AND TAXATION CODE SECTION 23701D, RESPECTIVELY. THE ORGANIZATION FILES AN EXEMPT RETURN IN THE U.S. FEDERAL JURISDICTION AND THE STATE OF CALIFORNIA.

SINCE THE ORGANIZATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAX LIABILITY, NO PROVISION IS MADE FOR CURRENT OR DEFERRED INCOME TAXES. THE ORGANIZATION USES THE SAME ACCOUNTING METHODS FOR TAX AND FINANCIAL REPORTING. MANAGEMENT HAS CONSIDERED ITS TAX POSITIONS AND BELIEVES THAT ALL OF THE POSITIONS TAKEN IN ITS FEDERAL AND STATE EXEMPT ORGANIZATION RETURNS ARE MORE-LIKELY-THAN-NOT TO BE SUSTAINED UPON EXAMINATION. TO DATE, THE ORGANIZATION HAS NOT RECORDED ANY UNCERTAIN TAX POSITIONS. DURING THE YEARS ENDED DECEMBER 31, 2024 AND 2023, THE ORGANIZATION DID NOT RECOGNIZE ANY AMOUNT IN POTENTIAL INTEREST AND PENALTIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS.

432054 01-02-25

Schedule D (Form 990) (Rev. 12-2024)

SCHEDULE G (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

OMB No. 1545-0047

Open to Public Inspection

						Employer identification number		
,							90-0678872	
Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.								
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a								
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have cr or con contribu	trol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No					
Γotal								
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.								

LHA 432081 01-14-25

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

Schedule G (Form 990) (Rev. 12-2024)

	edule G (Form 990) (Rev. 12-2024) FOOD FOR				00/00/2 Page 2
Pa	Fundraising Events. Complete if the of fundraising event contributions and gro				
			(b) Event #2 ARTIST IN RESIDENCE (event type)	(c) Other events 1 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	166,336.	33,897.	10,000.	210,233.
ш	2 Less: Contributions	157,296.	29,497.	10,000.	196,793.
	3 Gross income (line 1 minus line 2)	9,040.	4,400.		13,440.
	4 Cash prizes				
S	5 Noncash prizes	440.			440.
pense	6 Rent/facility costs	33,919.	4,832.		38,751.
Direct Expenses	7 Food and beverages	17,840.	10,893.		28,733.
Di	8 Entertainment 9 Other direct expenses	4,750. 46,687.	50,972.		4,750. 97,659.
	10 Direct expense summary. Add lines 4 through11 Net income summary. Subtract line 10 from line				170,333. -156,893.
Pa	Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a.				,
Revenue	\$13,000 0111 01111 990-L2, line oa.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1 Gross revenue				
ses	2 Cash prizes				
rect Expenses	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses	No.			
	6 Volunteer labor	Yes % No	Yes % No	Yes % No	
	7 Direct expense summary. Add lines 2 through	5 in column (d)			
	8 Net gaming income summary. Subtract line 7	from line 1, column (d)			
а	Enter the state(s) in which the organization conducts the organization licensed to conduct gaming act of "No," explain:	tivities in each of these	states?		Yes No
	Were any of the organization's gaming licenses re If "Yes," explain:		rminated during the tax y	rear?	Yes No

Schedule G (Form 990) (Rev. 12-2024)

432082 01-14-25

Sch	edule G (Form 990) (Rev. 12-2024) FOOD FORWARD, INC.	90-0	678872	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	□ No
40				NO
	Indicate the percentage of gaming activity conducted in:		l	
	The organization's facility		13a	<u>%</u>
	An outside facility		13b	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	ds:		
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	olf "Yes," enter the amount of gaming revenue received by the organization \$ and the am	ount		
	of gaming revenue retained by the third party \$			
c	Fig. If "Yes," enter the name and address of the third party:			
Ĭ	Too, onto the hame and address of the time party.			
	Name			
	Name			
	Address			
	Address			
16	Gaming manager information:			
	Name			
	0			
	Gaming manager compensation \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
	s the organization required under state law to make charitable distributions from the gaming proceeds to			
a			□ vaa	☐ No
	retain the state gaming license?		res	NO
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent i	n the		
D -	organization's own exempt activities during the tax year \$			
Pa	TT IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v)	and Part	t III, lines 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
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_				
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Schedule G	(Form 990) FOOD Supplemental Information	FORWARD,	INC.	90-0678872	Page 4
Part IV	Supplemental Information	n (continued)			
		,			
					-
-					
-					

Schedule G (Form 990)

SCHEDULE I (Form 990)

(Rev. December 2024)
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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization FOOD FORWARD, INC.						Employer identification number 90-0678872	
Part I General Information on Grants a	•						
 Does the organization maintain records to criteria used to award the grants or assist Describe in Part IV the organization's pro- 	stance? ocedures for monit	oring the use of grant	funds in the United	States.			X Yes No
Part II Grants and Other Assistance to I recipient that received more than \$\frac{1}{2}\$					anization answered "\	es" on Form 990, Part	: IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
THE FARMLINK PROJECT							
P.O. BOX 744772							
LOS ANGELES, CA 90074	85-1398171	501(C)(3)	0.	31,973,860.	FMV	PRODUCE	FRESH PRODUCE DONATION
BIENESTAR IS WELL BEING P.O. BOX 338	00 1055000	501 (Q) (Q)		15 465 502			
RANCHO CUCAMONGA, CA 91729	20-1855839	501(C)(3)	0.	15,465,723.	F'MV	PRODUCE	FRESH PRODUCE DONATION
MINISTERIO FARO DE LUZ 2202 CENTER ST. HUNTINGTON PARK, CA 90255	45-3414285	501(C)(3)	0.	11,065,228.	FMV	PRODUCE	FRESH PRODUCE DONATION
MONTE SION CENTER 4405 E OLYMPIC BLVD LOS ANGELES, CA 90023	95-4603541	501(C)(3)	0.	8,117,617.		PRODUCE	FRESH PRODUCE DONATION
YMCA 4301 W 3RD ST. LOS ANGELES, CA 90020	95-1644052	501(C)(3)	0.	8,081,170.	FMV	PRODUCE	FRESH PRODUCE DONATION
CHRISTIAN FOOD CENTER 1101 E WASHINGTON BLVD. LOS ANGELES, CA 90021	95-4049610	501(C)(3)	0.	7,332,472.	FMV	PRODUCE	FRESH PRODUCE DONATION
2 Enter total number of section 501(c)(3) at3 Enter total number of other organizations	-						

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

Schedule I (Form 990) (Rev. 12-2024)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIGH DESERT SECOND CHANCE							
16666 SMOKE TREE ST.							
HESPERIA, CA 92345	46-4690286	501(C)(3)	0.	7,086,872.	FMV	PRODUCE	FRESH PRODUCE DONATION
,				. , ,			
INLAND HARVEST							
317 FELISA COURT							
REDLANDS, CA 92372	33-0479589	501(C)(3)	0.	5,537,705.	FMV	PRODUCE	FRESH PRODUCE DONATION
THE DREAM CENTER							
2301 BELLEVUE AVE.							
LOS ANGELES, CA 90026	95-1803686	501(C)(3)	0.	4,915,822.	FMV	PRODUCE	FRESH PRODUCE DONATION
gnume							
CENTRO RESTAURADOR CRISTIANO INC. 200 2ND. ST.							
	87-1147089	501/C\/3\	0.	3 430 100	EM77	PRODUCE	FRESH PRODUCE DONATION
MCFARLAND, CA 90026	07-1147003	301(0/(3/	0.	3,430,109.	FHV	FRODUCE	FRESH FRODUCE DONATION
SEEDS OF HOPE							
840 ECHO PARK AVE.							
LOS ANGELES, CA 90026	31-1629166	501(C)(3)	0.	3,081,460.	FMV	PRODUCE	FRESH PRODUCE DONATION
,				, ,			
EL CAMINO A CRISTO ADVENTISTA DEL							
SEPTIMO DIA - 6300 STAFFORD AVE							
HUNTINGTON PARK, CA 90255	90-0615522	501(C)(3)	0.	2,945,668.	FMV	PRODUCE	FRESH PRODUCE DONATION
WATTS COMMUNITY CORE							
9501 CERRITOS AVE., UNIT 202							
ANAHEIM, CA 92804	84-3477018	501(C)(3)	0.	2,895,890.	FMV	PRODUCE	FRESH PRODUCE DONATION
MANAGE CALLINDA							
TEMPLO CALVARIO							
511 N FAIRVIEW ST.	95-3672630	501/C\/3\	0.	2,775,216.	EM77	PRODUCE	FRESH PRODUCE DONATION
SANTA ANA, CA 92703	33-3072030	301(0)(3)	· ·	2,113,210.	E EI V	FRODUCE	FRESH FRODUCE DONALION
GOD'S PANTRY							
250 E CENTER ST.							
POMONA, CA 91767	80-0902222	501(C)(3)	0.	2,611,980.	FMV	PRODUCE	FRESH PRODUCE DONATION
· · · · · · · · · · · · · · · · · · ·					1	•	_

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIAL JUSTICE LEARNING INSTITUTE							
600 CENTINELA AVE.							
INGLEWOOD, CA 90302	26-3413373	501(C)(3)	0.	2,595,014.	FMV	PRODUCE	FRESH PRODUCE DONATION
TRINITY HARVEST							
8851 E PEARBLOSSOM HWY.							
LITTLEROCK, CA 93543	30-0997331	501(C)(3)	0.	2,485,746.	FMV	PRODUCE	FRESH PRODUCE DONATION
UNITED HANDS MULTIPURPOSE CENTER							
1423 N WILMINGTON AVE.							
COMPTON, CA 90222	82-3694217	501(C)(3)	0.	2,295,990.	FMV	PRODUCE	FRESH PRODUCE DONATION
0011 1011, 011 10222	02 0031227			2,230,330.		1.02002	
AMERICAN HEART ASSOCIATION							
816 S. FIGUEROA ST.							
LOS ANGELES, CA 90017	13-5613797	501(C)(3)	0.	2,294,045.	FMV	PRODUCE	FRESH PRODUCE DONATION
HEART OF COMPASSION							
600 S MAPLE AVE.							
MONTEBELLO, CA 90640	42-1573926	501(C)(3)	0.	2,269,909.	FMV	PRODUCE	FRESH PRODUCE DONATION
HOLLYWOOD FOOD COALITION							
5939 HOLLYWOOD BLVD.							
LOS ANGELES, CA 90028	46-4079214	501(C)(3)	0.	2,170,895.	FMV	PRODUCE	FRESH PRODUCE DONATION
MEND							
10641 N SAN FERNANDO RD.							
PACOIMA, CA 91331	23-7306337	501(C)(3)	0.	2,170,371.	FMV	PRODUCE	FRESH PRODUCE DONATION
NORTH VALLEY CARING SERVICES							
15453 RAYEN ST.							
NORTH HILLS, CA 91343	95-4444561	501(C)(3)	0.	2,022,918.	FMV	PRODUCE	FRESH PRODUCE DONATION
MINICEPIOS MANANAIN							
MINISTERIOS MAHANAIM 2563 CLARENDON AVE.							
HUNTINGTON PARK, CA 90255	32-0179306	501 (C) (3)	0.	1,688,572.	FMV	PRODUCE	FRESH PRODUCE DONATION
TOTAL TAKE, CH 50255	32 01/3300	331(3)	· ·	1,000,572.	r v	F 110200E	TREET TROBUCE DOWNTON

Part II Continuation of Grants and Other		mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa		rage i
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROYECTO PASTORAL							
170 S GLESS ST.							
LOS ANGELES, CA 90033	95-3213958	501(C)(3)	0.	1,651,287.	FMV	PRODUCE	FRESH PRODUCE DONATION
ALIANZA NACIONAL DE CAMPESINA							
319 LAMBERT ST.							
OXNARD, CA 93036	47-3486630	501(C)(3)	0.	1,626,582.	FMV	PRODUCE	FRESH PRODUCE DONATION
COMMUNITY ACTION OF VENTURA COUNTY							
621 RICHMOND AVE.							
OXNARD, CA 93030	95-2408644	501(C)(3)	0.	1,582,564.	FMV	PRODUCE	FRESH PRODUCE DONATION
LOVE COMMUNITY OUTREACH							
1920 W CHESTNUT AVE.							
SANTA ANA, CA 92703	95-4575842	501(C)(3)	0.	1,426,089.	FMV	PRODUCE	FRESH PRODUCE DONATION
LOVE MISSION							
417 E 106 ST.							
LOS ANGELES, CA 90003	35-2558496	501(C)(3)	0.	1,424,312.	FMV	PRODUCE	FRESH PRODUCE DONATION
FOOTHILL UNITY CENTER							
790 W CHESTNUT AVE.							
MONROVIA, CA 91016	95-4310817	501(C)(3)	0.	1,236,461.	FMV	PRODUCE	FRESH PRODUCE DONATION
COMMUNITY'S CHILD							
18807 CRENSHAW PL.							
TORRANCE, CA 90504	20-2871854	501(C)(3)	0.	1,145,506.	FMV	PRODUCE	FRESH PRODUCE DONATION
,							
VENICE FAMILY CLINIC							
2509 W PICO BLVD							
SANTA MONICA, CA 90405	95-2769432	501(C)(3)	0.	1,131,527.	FMV	PRODUCE	FRESH PRODUCE DONATION
Tool Tool Guillan							
FOOD FOR CHRIST							
8071 WHITAKER ST.	30-0403036	501(0)(3)		1 074 007	EM7	PRODUCE	EDECH DOUDING DONAMION
BUENA PARK, CA 90621	30-0482826	POT(C)(3)	0.	1,074,097.	L LI A	EVODOCE.	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
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ANTELOPE VALLEY PARTNERS FOR							
HEALTH - 44226 10TH ST. W -							
LANCASTER, CA 93534	47-0957404	501(C)(3)	0.	1,072,251.	EM7	PRODUCE	FRESH PRODUCE DONATION
EMCROTER, CA 95554	47 0337404	301(0)(3)	· · ·	1,072,231.	I IIV	RODUCE	TRIBIT TROBUCE BONNITON
FOOD HELP							
10909 NEW ST.							
DOWNEY, CA 90241	95-1803687	501(C)(3)	0.	1,035,991.	FMV	PRODUCE	FRESH PRODUCE DONATION
·							
IMMANUEL PRESBYTERIAN CHURCH							
663 S BERENDO ST.							
LOS ANGELES, CA 90005	95-1643330	501(C)(3)	0.	1,006,049.	FMV	PRODUCE	FRESH PRODUCE DONATION
CLARENCE E. MCCLENDON MINISTRIES:							
THE PLACE OF GRACE - 2543 WEST							
MANCHESTER BLVD INGLEWOOD, CA							
90305	45-3153533	501(C)(3)	0.	995,362.	FMV	PRODUCE	FRESH PRODUCE DONATION
TOLEGES GNIVEDED SOMPLESS DE DEOG							
IGLESIA CALVARIO ASAMBLEAS DE DIOS							
2955 SEQUOIA DR SOUTH GATE, CA 90280	47-3591333	501 (C) (3)	0.	962,597.	EMT7	PRODUCE	FRESH PRODUCE DONATION
SOUTH GATE, CA 90200	47-3391333	301(0/(3/	0.	302,337.	FMV	PRODUCE	FRESH FRODUCE DONATION
SPIRIT OF SANTA PAULA							
1498 E HARVARD							
SANTA PAULA, CA 93060	27-0005506	501(C)(3)	0.	941,912.	FMV	PRODUCE	FRESH PRODUCE DONATION
•				,			
HOLY ROSARY CHURCH							
7800 VINELAND AVE.							
SUN VALLEY, CA 91353	95-1916435	501(C)(3)	0.	938,374.	FMV	PRODUCE	FRESH PRODUCE DONATION
GREAT SHEPHERD OUTREACH							
964 E BADILLO							
COVINA, CA 91724	95-4208415	501(C)(3)	0.	931,128.	FMV	PRODUCE	FRESH PRODUCE DONATION
avii ppin'a ai ivia on lova pri							
CHILDREN'S CLINIC OF LONG BEACH							
701 E 28TH ST.	05 1642222	E01/G\/3\		005 610	EW7	DRODUCE	EDECH DRODUCE DONATION
LONG BEACH, CA 90806	95-1643332	DOT(C)(3)	0.	905,619.	L m ∧	PRODUCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	Tago i
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MINISTERIO EL EVANGELIO ETERNO							
1121 E MERCED AVE.							
WEST COVINA, CA 91790	95-4394527	501(C)(3)	0.	904,545.	FMV	PRODUCE	FRESH PRODUCE DONATION
UMMA							
7821 S AVALON ST.							
LOS ANGELES, CA 90003	95-4666712	501(C)(3)	0.	900,302.	FMV	PRODUCE	FRESH PRODUCE DONATION
HANDS OF LOVE							
2801 LOS FLORES BLVD.							
LYNWOOD, CA 90262	36-4959562	501(C)(3)	0.	883,982.	FMV	PRODUCE	FRESH PRODUCE DONATION
UNITED FARM WORKERS							
2240 S UNION AVE.							
BAKERSFIELD, CA 93307	94-1448579	501(C)(3)	0.	815,915.	FMV	PRODUCE	FRESH PRODUCE DONATION
LA-MAS							
2806 CLEARWATER ST.							
LOS ANGELES, CA 90039	38-3886677	501(C)(3)	0.	813,104.	FMV	PRODUCE	FRESH PRODUCE DONATION
LOVE MORE							
1616 S FLOWER ST.							
LOS ANGELES, CA 90015	84-2433645	501(C)(3)	0.	811,027.	FMV	PRODUCE	FRESH PRODUCE DONATION
HOUSTON FOOD BANK							
535 PORTWALL ST.	74-2181456	E01/G\/2\	0.	803,202.	EM7	PRODUCE	FRESH PRODUCE DONATION
HOUSTON, TX 77029	74-2181456	301(C)(3)	0.	803,202.	FMV	PRODUCE	FRESH PRODUCE DONATION
HUNGER RELIEF NETWORK							
7318 S VERMONT AVE.							
LOS ANGELES, CA 90049	87-3048025	501(C)(3)	0.	800,766.	FMV	PRODUCE	FRESH PRODUCE DONATION
ACCION COMUNITARIA							
913 CYPRESS AVE.				765 401	EW7	DRODUCE	EDEGH DRODUCE DOWNEROW
LOS ANGELES, CA 90065			0.	765,491.	r m v	PRODUCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	Tago i
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LABOR COMMUNITY SERVICES OF LOS							
ANGELES - 2130 JAMES M WOOD BLVD -							
LOS ANGELES, CA 90006	95-4147259	501(C)(3)	0.	757,745.	FMV	PRODUCE	FRESH PRODUCE DONATION
	76 1117.267		•	707,710.		11.02002	
LONG BEACH COMMUNITY TABLE							
3166 OSTROM AVE.							
LONG BEACH, CA 90808	83-1361910	501(C)(3)	0.	735,080.	FMV	PRODUCE	FRESH PRODUCE DONATION
STUDENT LUNCHBOX							
681 E. 36TH ST.							
LOS ANGELES, CA 90011	85-2482031	501(C)(3)	0.	720,788.	FMV	PRODUCE	FRESH PRODUCE DONATION
DWELLING PLACE ANAHEIM							
5340 LA PALMA AVE.	05 0445005	504 (5) (0)		=10.11			
ANAHEIM, CA 92807	95-3447927	501(C)(3)	0.	719,145.	FMV	PRODUCE	FRESH PRODUCE DONATION
SEMBRADO Y RESTAURANDO CHURCH							
14101 ARCHWOOD ST.							
VAN NUYS, CA 91405	82-0927194	501(C)(3)	0.	641,477.	FMV	PRODUCE	FRESH PRODUCE DONATION
<u>viii. No15, Cir 31103</u>	02 032/131	301(0)(3)	•	011,177.		T NODGED	TREE TREE CONTINUE
BRIGHTER BITES							
PO BOX 25456							
HOUSTON, TX 77265	47-4070026	501(C)(3)	0.	612,828.	FMV	PRODUCE	FRESH PRODUCE DONATION
LONG BEACH CENTER FOR ECONOMIC							
INCLUSION - 6509 GUNDRY AVE							
LONG BEACH, CA 90805	84-4693859	501(C)(3)	0.	607,109.	FMV	PRODUCE	FRESH PRODUCE DONATION
WATTS LABOR COMMUNITY ACTION							
COMMITTEE (WLCAC) - 10950 S							
CENTRAL AVE LOS ANGELES, CA							
90059	95-2412869	501(C)(3)	0.	570,006.	FMV	PRODUCE	FRESH PRODUCE DONATION
ORDER OF MALTA MOBILE MINISTRIES							
1039 N BROADWAY	04 2720221	E01/G\/3\		EEE 034	TIME Z	DDODUGE	EDEGLI DRODUGE DONATION
LOS ANGELES, CA 90012	84-3738231	DOT(C)(2)	0.	555,934.	L III A	PRODUCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other	•	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa		rage
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALVATION ARMY							
5600 RICKENBACKER RD.							
BELL, CA 90201	94-1156347	501(C)(3)	0.	543,688.	FMV	PRODUCE	FRESH PRODUCE DONATION
SBCC THRIVE LA							
540 N. MARINE AVE.							
WILMINGTON, CA 90744	23-7360521	501(C)(3)	0.	512,647.	FMV	PRODUCE	FRESH PRODUCE DONATION
ANTELOPE VALLEY DREAM CENTER							
43145 BUSINESS CENTER PKWY							
LANCASTER , CA 93535	36-4764965	501(C)(3)	0.	512,111.	FMV	PRODUCE	FRESH PRODUCE DONATION
LOS ANGELES CITY COLLEGE							
FOUNDATION, INC 855 N VERMONT AVE LOS ANGELES, CA 90029	95-6207819	501(C)(3)	0.	480,134.	EW7	PRODUCE	FRESH PRODUCE DONATION
MVI. LOD MNOLLED, CM 30023	33 0207013	301(0)(3)	· ·	100,134.	I IIV	RODUCE	TREST TROBUCE BONNITON
DESIGNATED EXCEPTIONAL SERVICES							
FOR INDEPENDENCE - 4779 WHITTIER							
BLVD - LOS ANGELES, CA 90022	90-0775966	501(C)(3)	0.	423,229.	FMV	PRODUCE	FRESH PRODUCE DONATION
HODE ON INTON INTERED INTERED TO							
HOPE ON UNION: UNITED UNIVERSITY CHURCH - 2208 S UNION AVE LOS							
ANGELES, CA 90007	95-3775859	501(C)(3)	0.	410,995.	FMV	PRODUCE	FRESH PRODUCE DONATION
				,			
SEVA COLLECTIVE							
2530 W WARNER AVE.							
SANTA ANA, CA 92704	86-1998980	501(C)(3)	0.	402,215.	FMV	PRODUCE	FRESH PRODUCE DONATION
MUSIC CHANGING LIVES							
PO BOX 5160							
MORENO VALLEY, CA 92554	58-2672644	501(C)(3)	0.	382,028.	FMV	PRODUCE	FRESH PRODUCE DONATION
NORTHWEST HARVEST							
1968 W. J. ST.	91_0826027	501(C)(3)	0.	361 621	EW7	PRODUCE	EDECH DOUDING DONAUTON
YAKIMA, WA 98901	91-0826037	bor(c)(2)	<u> </u>	361,631.	L™∧	FYODOCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other		nestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	Tago T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PURE LAND FOUNDATION							
2279 EAGLE GLEN PKWY							
CORONA, CA 92883	37-1906969	501 (C) (3)	0.	333,939.	FMV	PRODUCE	FRESH PRODUCE DONATION
eckenii, dii 32000	3, 1300303	301(0)(3)	•	333,333.		T NODGED	TREE TREESE SOMITION
VICTORY OUTREACH CHURCH							
3037 ROSWELL ST.							
LOS ANGELES, CA 90065	95-4690639	501(C)(3)	0.	330,739.	FMV	PRODUCE	FRESH PRODUCE DONATION
,				,			
THE HACK FOUNDATION							
8605 SANTA MONICA BLVD.							
LOS ANGELES, CA 90069	81-2908499	501(C)(3)	0.	314,895.	FMV	PRODUCE	FRESH PRODUCE DONATION
FOOD BANK OF SOUTHERN CALIFORNIA							
1444 SAN FRANCISCO AVE.							
LONG BEACH, CA 90813	95-3557056	501(C)(3)	0.	305,173.	FMV	PRODUCE	FRESH PRODUCE DONATION
API FORWARD MOVEMENT							
1315 SPRING ST.							
LOS ANGELES, CA 90012	95-1716914	501(C)(3)	0.	301,538.	FMV	PRODUCE	FRESH PRODUCE DONATION
JEWISH FAMILY SERVICE OF LOS							
ANGELES - 6605 ODESSA AVE VAN	05 1601013	F01/a)/2)		006 050		220222	
NUYS, CA 91406	95-1691013	501(C)(3)	0.	286,879.	F.W.	PRODUCE	FRESH PRODUCE DONATION
CALIFORNIA STATE UNIVERSITY							
NORTHRIDGE FOUNDATION - 18111							
NORDHOFF ST NORTHRIDGE, CA 91330	95-6196006	E01/a)/3)	0.	202 164	TIME 7	PRODUCE	EDEGII DDODUGE DONATION
91330	95-6196006	501(C)(3)	0.	283,164.	r m v	PRODUCE	FRESH PRODUCE DONATION
ST FRANCIS CENTER							
1835 S HOPE ST.							
LOS ANGELES, CA 90015	95-4479271	501(C)(3)	0.	282,071.	FMV	PRODUCE	FRESH PRODUCE DONATION
	30 24/32/1		· ·	202,071.			INDER TROBUGE BOWNION
HELP ME HELP YOU							
620 W 16TH ST.							
LONG BEACH, CA 90813	71-0898124	501(C)(3)	0.	281,168.	FMV	PRODUCE	FRESH PRODUCE DONATION
		<u> </u>		,	1	1	0-11-1-1/5

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISLAMIC CENTER OF SOUTHERN							
CALIFORNIA - 434 S VERMONT AVE							
LOS ANGELES, CA 90020	95-3502914	501(C)(3)	0.	273,064.	FMV	PRODUCE	FRESH PRODUCE DONATION
NEWSTORY CHURCH							
150 W JEFFERSON BLVD							
LOS ANGELES, CA 90007	91-2172342	501(C)(3)	0.	270,743.	FMV	PRODUCE	FRESH PRODUCE DONATION
EL CAMINO COMMUNITY COLLEGE							
DISTRICT FOUNDATION - 16007							
CRENSHAW BLVD TORRANCE, CA							
90506	95-3874302	501(C)(3)	0.	249,634.	FMV	PRODUCE	FRESH PRODUCE DONATION
HOUSE OF VANIEW							
HOUSE OF YAHWEH							
4046 MARINE AVE. LAWNDALE, CA 90260	95-3879208	501 (C) (3)	0.	232,523.	EW7	PRODUCE	FRESH PRODUCE DONATION
LAWNDALE, CA 90200	93-3079200	301(C/(3/	0.	232,323.	r m v	FRODUCE	FRESH FRODUCE DONATION
IGLESIAS EL NUEVO NACIMIENTO							
1600 S BROADWAY 1B							
LOS ANGELES, CA 90015	26-0195641	501(C)(3)	0.	216,570.	FMV	PRODUCE	FRESH PRODUCE DONATION
CHURCH OF RESURRECTION							
3324 OPAL ST.REET							
LOS ANGELES, CA 90023	95-4559663	501(C)(3)	0.	211,617.	FMV	PRODUCE	FRESH PRODUCE DONATION
CALLADA CHADEL							
CALVARY CHAPEL 12808 WOODRUFF AVE.							
DOWNEY, CA 90242	51-0200281	501 (C) (3)	0.	169,079.	FMV	PRODUCE	FRESH PRODUCE DONATION
DONNELL, CA 30242	31 0200201	301(0)(3)	· ·	103,073.	I IIV	RODUCE	TREBUTION DOMITTON
CORNUCOPIA SERVICES							
21515 HAWTHORNE BLVD							
TORRANCE, CA 90503	34-1991587	501(C)(3)	0.	157,494.	FMV	PRODUCE	FRESH PRODUCE DONATION
GARDEN SCHOOL FOUNDATION							
2055 W 24TH ST.							
LOS ANGELES, CA 90018	20-3023426	501(C)(3)	0.	154,714.	FMV	PRODUCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other	r Assistance to Dor	nestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	Tugo T
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FOODCYCLE LA							
1949 N. WILTON PL.							
LOS ANGELES, CA 90068	47-1615623	501(C)(3)	0.	150,993.	FMV	PRODUCE	FRESH PRODUCE DONATION
,							
UNION DE VECINOS							
E 2ND ST. & S CHICAGO ST.							
LOS ANGELES, CA 90033	52-2076978	501(C)(3)	0.	148,964.	FMV	PRODUCE	FRESH PRODUCE DONATION
HUNGER ACTION LA							
961 S MARIPOSA AVE. LOS ANGELES, CA 90006	20-5142259	E01/G\/3\	0.	139,011.	EW7	PRODUCE	FRESH PRODUCE DONATION
LOS ANGELES, CA 30000	20-3142239	301(0)(3)	0.	139,011.	r m v	FRODUCE	FRESH FRODUCE DONATION
DAYS LONG BEACH							
1230 E WARDLOW RD							
LONG BEACH, CA 90807	33-0851176	501(C)(3)	0.	138,639.	FMV	PRODUCE	FRESH PRODUCE DONATION
NATIONAL DAY LABORER ORGANIZING							
NETWORK - 500 N LAKE AVE							
PASADENA, CA 91101	20-8802586	501(C)(3)	0.	135,424.	FMV	PRODUCE	FRESH PRODUCE DONATION
WANTING THE WARDEN							
MAKING IT HAPPEN 11120 ORO VISTA AVE.							
SUNLAND, CA 91040	38-3922699	501(C)(3)	0.	134,667.	FMV	PRODUCE	FRESH PRODUCE DONATION
BONDERD, ON STOTE	30 3322033	301(0)(3)	•	131,007.		1102002	TREST TRESCE SOMITION
UNION RESCUE MISSION							
545 SAN PEDRO ST.							
LOS ANGELES, CA 90013	95-1709293	501(C)(3)	0.	133,196.	FMV	PRODUCE	FRESH PRODUCE DONATION
FRIENDS OUTSIDE IN LOS ANGELES							
711 E HYDE PARK BLVD	05 2555020	F01 (@) (3)		106 025		DD 0 D 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
INGLEWOOD, CA 90302	95-3557032	DUI(C)(3)	0.	126,835.	F.W.A	PRODUCE	FRESH PRODUCE DONATION
ADELANTE COMUNIDAD CONEJO							
1000 E JANSS RD							
THOUSAND OAKS, CA 91360	83-4279835	501(C)(3)	0.	122,729.	FMV	PRODUCE	FRESH PRODUCE DONATION
	1			, .	1	ı	0-11-1-1/5000\

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	rage
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EAST LA BOYS AND GIRLS CLUB							
324 N. MCDONNELL AVE.							
LOS ANGELES, CA 90022	95-1865996	501(C)(3)	0.	121,098.	FMV	PRODUCE	FRESH PRODUCE DONATION
EMBRACE CHURCH							
135 W BIRCH ST.							
OXNARD, CA 93010	62-1401488	501(C)(3)	0.	116,957.	FMV	PRODUCE	FRESH PRODUCE DONATION
LUNDQUIST INSTITUTE SOUTH LOS ANGELES HEALTH PROJECTS - 250 E MANCHESTER AVE LOS ANGELES, CA							
90003	95-2138184	501(C)(3)	0.	115,810.	FMV	PRODUCE	FRESH PRODUCE DONATION
GIRLS CLUB LOS ANGELES 2057 W CENTURY BLVD LOS ANGELES, CA 90047	23-7203822	501(c)(3)	0.	109,585.	FMV	PRODUCE	FRESH PRODUCE DONATION
GREATER LONG BEACH MUTUAL AID NETWORK - 425 ATLANTIC AVE LONG BEACH, CA 90802			0.	104,245.	FMV	PRODUCE	FRESH PRODUCE DONATION
A PLACE CALLED HOME 2830 S CENTRAL AVE. LOS ANGELES, CA 90011	95-4427291	501(C)(3)	0.	102,625.	FMV	PRODUCE	FRESH PRODUCE DONATION
PEOPLE ORGANIZED FOR WESTSIDE RENEWAL - 4959 W ADAMS BLVD LOS ANGELES, CA 90017	65-1208274		0.	96,831.		PRODUCE	FRESH PRODUCE DONATION
	03 1200274	301(0)(3)	0.	50,031.	FHV	FRODUCE	PRESIL PRODUCE DONATION
CHICAS VERDES 4131 S. VERMONT AVE. LOS ANGELES, CA 90037	85-0907771	501(C)(3)	0.	93,213.	FMV	PRODUCE	FRESH PRODUCE DONATION
BROTHERHOOD, INC 50802 280TH ST. W	46-4511895	501(C)(3)	0	90 639	IPM\(\tau\)	PRODUCE	FRESH PRODUCE DONATION
LANCAST.ER, CA 93536	46-4511895	501(C)(3)	0.	90,638.	FMV	PRODUCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	
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ST. CHARLES BORROMEO SERVICE CENTER - 10825 MOORPARK ST NORTH HOLLYWOOD, CA 91602	95-1644617	501(C)(3)	0.	90,362.	FMV	PRODUCE	FRESH PRODUCE DONATION
RUBEN CASTRO CHARITIES 5700 CONDOR DR MOORPARK, CA 93021	47-2176562	501(C)(3)	0.	88,538.	FMV	PRODUCE	FRESH PRODUCE DONATION
UTAH FOOD BANK 3150 S 900 W SALT LAKE CITY, UT 84119	87-0212453	501(C)(3)	0.	83,918.	FMV	PRODUCE	FRESH PRODUCE DONATION
STARS ILLUMINATE EDUCATION 500 E VILLA ST. PASADENA, CA 91101	95-4847950	501(C)(3)	0.	80,571.	FMV	PRODUCE	FRESH PRODUCE DONATION
GROW2 ZERO FARMS 2851 SANTA FE AVE. LOS ANGELES, CA 90810	85-4311030	501(C)(3)	0.	79,753.	FMV	PRODUCE	FRESH PRODUCE DONATION
THE PEOPLE CONCERN 1101 W. MARTIN LUTHER KING BLVD. LOS ANGELES, CA 90044	95-6143865	501(C)(3)	0.	78,424.	FMV	PRODUCE	FRESH PRODUCE DONATION
UCI4COLA 6264 ADOBE CIRCLE RD S IRVINE, CA 92617		GOVT	0.	77,350.	FMV	PRODUCE	FRESH PRODUCE DONATION
METROPOLITAN COMMUNITY CHURCH OF LOS ANGELES - 4607 PROSPECT AVE LOS ANGELES, CA 90027	95-2742102	501(C)(3)	0.	74,897.	FMV	PRODUCE	FRESH PRODUCE DONATION
VIDA LIFE 11608 CEDAR AVE. BLOOMINGTON, CA 92316	47-1281964	501(C)(3)	0.	74,740.	FMV	PRODUCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other A	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
COMMUNITY PARTNERS									
3301 EAGLE ROCK BLVD									
LOS ANGELES, CA 90031	95-4302067	501 (C) (3)	0.	66,460.	EM7	PRODUCE	FRESH PRODUCE DONATION		
LOD IMCLEDE, CN 90031	33 4302007	301(0)(3)	· ·	00,400.	I IIV	ROBUCE	TREST TROBUCE BONNITON		
SOUTH COUNTY OUTREACH									
7 WHATNEY									
IRVINE, CA 92618	33-0330233	501(C)(3)	0.	65,692.	FMV	PRODUCE	FRESH PRODUCE DONATION		
TIKVAH-ETTA & LAZEAR ISRAEL CENTER				,					
FOR THE DEVELOPMENTALLY DISABLED -									
13034 SATICOY ST LOS ANGELES,									
CA 91605	95-4308644	501(C)(3)	0.	63,493.	FMV	PRODUCE	FRESH PRODUCE DONATION		
BETTER FOOD FOUNDATION									
2208 S UNION AVE.									
LOS ANGELES, CA 90007	81-4537521	501(C)(3)	0.	56,600.	FMV	PRODUCE	FRESH PRODUCE DONATION		
CAMARILLO SEVENTH DAY ADVENTIST									
CHURCH - 3975 LAS POSAS RD -	05 2000215	E01/G)/2)		E2 460	EW7	PROPILICE	EDEGII DRODUGE DONAETON		
CAMARILLO, CA 93010	95-3008315	501(0)(3)	0.	53,468.	FMV	PRODUCE	FRESH PRODUCE DONATION		
ST. ELISABETHS CHURCH									
6640 CEDROS AVE.									
VAN NUYS, CA 91405	95-1661063	501(C)(3)	0.	52,376.	FMV	PRODUCE	FRESH PRODUCE DONATION		
VIII. 11012, 011 32100	30 200200		•	02,070.		1.02002			
HELP OF OJAI									
108 S. MONTGOMERY									
OJAI, CA 93023	95-2872549	501(C)(3)	0.	48,968.	FMV	PRODUCE	FRESH PRODUCE DONATION		
BIG SUNDAY									
611 MELROSE AVE.									
LOS ANGELES, CA 90038	42-1765317	501(C)(3)	0.	48,462.	FMV	PRODUCE	FRESH PRODUCE DONATION		
GRASS ROOTS NEIGHBORS									
6804 VISTA DEL MAR LANE			_						
PL.AYA DEL REY, CA 90293	84-1784513	501(C)(3)	0.	43,748.	F.W∧	PRODUCE	FRESH PRODUCE DONATION		

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa T	ırt II.) T	Τ
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEOPLES GROCERY PROGRAM/MERCADO							
LIBRE DEL PUEBLO - 1206 E 17TH ST.							
- SANTA ANA, CA 92701			0.	41,356.	FMV	PRODUCE	FRESH PRODUCE DONATION
				,			
LOS ANGELES LEADERSHIP ACADEMY							
2670 GRIFFIN AVE.							
LOS ANGELES, CA 90031	47-5136561	501(C)(3)	0.	41,118.	FMV	PRODUCE	FRESH PRODUCE DONATION
PACIFIC BLUE ORGANICS 5730 CAHUENGA BLVD							
NORTH HOLLYWOOD, CA 91601	85-3444326	501 (C) (3)	0.	40,608.	EW7	PRODUCE	FRESH PRODUCE DONATION
MORITI HOLLIWOOD, CA 91001	03 3444320	301(0/(3/	· ·	40,000.	PHV	RODUCE	FRESH FRODUCE DONATION
CALVARY COMMUNITY CHURCH							
5495 VIA ROCAS							
WESTLAKE VILLAGE, CA 91362	95-3222271	501(C)(3)	0.	38,817.	FMV	PRODUCE	FRESH PRODUCE DONATION
LINCOLN AVE BAPTIST CHURCH							
1180 N. LINCOLN AVE.							
PASADENA, CA 91103	95-3256809	501(C)(3)	0.	38,315.	FMV	PRODUCE	FRESH PRODUCE DONATION
GE MIGUIGETNE DEFORMATION							
ST. AUGUSTINE REFORMATION							
COMMUNITY CHURCH - 3850 JASMINE AVE CULVER CITY, CA 90232	95-4725770	501 (C) (3)	0.	35,143.	EW7	PRODUCE	FRESH PRODUCE DONATION
AVE. CONVEX CITT, CA 30232	33 4723770	501(0/(5/	· ·	33,143.	PHV	RODUCE	PRESIL PRODUCE DONATION
LOVE MY NEIGHBOR FOUNDATION							
620 E 7TH ST.							
LOS ANGELES, CA 90021	47-2840545	501(C)(3)	0.	34,331.	FMV	PRODUCE	FRESH PRODUCE DONATION
BIENESTAR HUMAN SERVICES							
5326 E. BEVERLY BLVD.							
LOS ANGELES, CA 90022	95-4505737	501(C)(3)	0.	34,315.	FMV	PRODUCE	FRESH PRODUCE DONATION
CDOWING WORK CARPENG							
GROWING HOPE GARDENS							
2033 VIRGINIA AVE. SANTA MONICA, CA 90404	83-4524045	501 (C) (3)	0.	34,310.	EW7	PRODUCE	FRESH PRODUCE DONATION
DIMITI HONICA, CA 70404	05 4524045	001(0/(0/	1 0.] 34,310.	T 7.1 A	LUDDOCE	I KLIDII I KODOCE DONATION

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- rage
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LA LGBT CENTER							
1602 IVAR AVE.							
LOS ANGELES, CA 90028	95-3567895	501(C)(3)	0.	34,020.	FMV	PRODUCE	FRESH PRODUCE DONATION
NOURISH LA							
3200 SAWTELLE BLVD							
LOS ANGELES, CA 90066	85-3528222	501(C)(3)	0.	33,480.	FMV	PRODUCE	FRESH PRODUCE DONATION
FINCA TACHIBANA							
768 S. BOYLE AVE.							
LOS ANGELES, CA 90023	85-0878455	501(C)(3)	0.	33,293.	FMV	PRODUCE	FRESH PRODUCE DONATION
LUCHA - PODER POPULAR							
1008 HILLSIDE DR	05 2400070	F01/G)/2)		20 761	77.67	PROPILEE	TREAT PROPUSE ROWNEROW
SANTA PAULA, CA 93060	95-3400870	501(C)(3)	0.	32,761.	FMV	PRODUCE	FRESH PRODUCE DONATION
SILVERLAKE COMMUNITY CHURCH							
2930 HYPERION AVE.							
LOS ANGELES, CA 90027	23-6393377	501(C)(3)	0.	31,981.	FMV	PRODUCE	FRESH PRODUCE DONATION
FOOD NOT BOMBS LOS ANGELES							
1069 SANBORN AVE. LOS ANGELES, CA 90029	45-4549583	501/C\/3\	0.	30,180.	EM77	PRODUCE	FRESH PRODUCE DONATION
LOS ANGELES, CA 90029	45-4545565	301(C)(3)	0.	30,180.	FMV	PRODUCE	FRESH PRODUCE DONATION
CREATIVE HOUSING & SERVICES - ECS							
1433 E D ST.							
ONTARIO, CA 91764	33-0204306	501(C)(3)	0.	28,902.	FMV	PRODUCE	FRESH PRODUCE DONATION
NOHO HOME ALLIANCE							
11031 CAMARILLO ST.							
NORTH HOLLYWOOD, CA 91602	82-4768699	501(C)(3)	0.	28,843.	FMV	PRODUCE	FRESH PRODUCE DONATION
MALIKAH (LA CHAPTER)							
2033 VIRGINIA AVE.							
SANTA MONICA, CA 90404	47-1277862	501(C)(3)	0.	28,677.	FMV	PRODUCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	
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FOR THE LOVE OF OUR VETERANS							
700 N BULLIS RD.							
COMPTON, CA 90221	46-3955040	501(C)(3)	0.	28,197.	FMV	PRODUCE	FRESH PRODUCE DONATION
DISABILITY COMMUNITY RESOURCE							
CENTER - 12901 VENICE BLVD - LOS							
ANGELES, CA 90066	95-3013310	501(C)(3)	0.	26,863.	FMV	PRODUCE	FRESH PRODUCE DONATION
THE KARSH CENTER							
3750 W 6TH ST.							
LOS ANGELES, CA 90020	81-2974850	501(C)(3)	0.	26,345.	FMV	PRODUCE	FRESH PRODUCE DONATION
LOVE-EVAN							
17700 PLUMMER ST.	05 4154710	E01/Q\/3\	0.	24 446	TIME Z	PROPILICE	EDEGII DDODUGE DONAMION
NORTHRIDGE, CA 91325	85-4154719	501(0)(3)	0.	24,446.	FMV	PRODUCE	FRESH PRODUCE DONATION
CATHOLIC CHARITIES OF LOS ANGELES							
612 SPRING RD							
MOORPARK, CA 93021	95-1690973	501(C)(3)	0.	24,044.	FMV	PRODUCE	FRESH PRODUCE DONATION
CERRITOS COLLEGE FOUNDATION AND							
INSTITUTIONAL ADVANCEMENT - 11110							
ALONDRA BLVD - NORWALK, CA 90650	95-3387108	501(C)(3)	0.	21,546.	FMV	PRODUCE	FRESH PRODUCE DONATION
,				,			
ELYSIAN SCHOOL GARDEN FUND							
1562 BAXTER ST.							
LOS ANGELES, CA 90026	88-2044102	501(C)(3)	0.	21,067.	FMV	PRODUCE	FRESH PRODUCE DONATION
THE RIVER COMMUNITY CHURCH							
859 E SANTA CLARA ST.							
VENTURA, CA 93001	86-2734233	501(C)(3)	0.	20,577.	FMV	PRODUCE	FRESH PRODUCE DONATION
•				, ,			
GARMENT WORKER CENTER							
309 E 8TH ST.							
LOS ANGELES, CA 90014	81-0622327	501(C)(3)	0.	18,800.	FMV	PRODUCE	FRESH PRODUCE DONATION

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TESTIMONY MINISTRIES INC.							
1001 N WILMINGTON AVE.							
WILMINGTON, CA 90744	85-2440406	501(C)(3)	0.	18,713.	FMV	PRODUCE	FRESH PRODUCE DONATION
				,			
FRIENDS OF FIELDWORKERS							
148 WILD OAK ST.							
OJAI, CA 93023	47-4817644	501(C)(3)	0.	18,674.	FMV	PRODUCE	FRESH PRODUCE DONATION
an							
ST. JOSEPH CENTER 204 HAMPTON DR.							
	95-3874381	501/C\/3\	0.	18,624.	EM77	PRODUCE	FRESH PRODUCE DONATION
VENICE, CA 90291	93-3074301	301(0/(3/	0.	10,024.	FHV	PRODUCE	FRESH FRODUCE DONATION
FIRST BAPTIST CHURCH GLENDALE							
209 N. LOUISE ST.							
GLENDALE, CA 91206	95-1690992	501(C)(3)	0.	18,524.	FMV	PRODUCE	FRESH PRODUCE DONATION
SAN FERNANDO VALLEY INTERFAITH							
COUNCIL INC - 13300 VICTORY BLVD.,							
SUITE 354 - VAN NUYS, CA 91401	95-2653387	501(C)(3)	0.	18,201.	FMV	PRODUCE	FRESH PRODUCE DONATION
VALLEY VINEYARD CHURCH FOOD PANTRY							
6642 RESEDA BLVD	05 0440506	504 (5) (0)		4= 60=			
RESEDA, CA 91335	95-3419526	501(C)(3)	0.	17,635.	FMV	PRODUCE	FRESH PRODUCE DONATION
CONGREGATIONAL CHURCH OF							
CHATSWORTH / FISH FOOD PANTRY - 20440 LASSEN ST CHATSWORTH, CA							
91311	95-2535871	501/C)/3)	0.	17,039.	EM77	PRODUCE	FRESH PRODUCE DONATION
51311	75 2555071	301(0/(3/	· · ·	17,035.	r riv	I RODUCE	FRESH FRODUCE DONATION
BP FAMILY FOUNDATION ORG							
18700 SHERMAN WAY							
RESEDA, CA 91335	27-4644330	501(C)(3)	0.	16,735.	FMV	PRODUCE	FRESH PRODUCE DONATION
				,			
TURNING POINT FOUNDATION							
557 E THOMPSON BLVD.							
VENTURA, CA 93001	77-0213467	501(C)(3)	0.	16,570.	FMV	PRODUCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	Tage
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORNERSTONE OF HOPE							
1931 MATEO ST.							
LOS ANGELES, CA 90021	87-4674104	501(C)(3)	0.	16,383.	FMV	PRODUCE	FRESH PRODUCE DONATION
SHEPHERD'S PANTRY							
657 E ARROW HWY							
GLENDORA, CA 91740	20-8277679	501(C)(3)	0.	15,494.	FMV	PRODUCE	FRESH PRODUCE DONATION
FRIENDS OF PUVUNGNA							
1877 NO. BRITTON DR.	07 0206125	F01/G)/3)		15 202	77.67	PROPILEE	TREEL PROPUGE POWERTON
LONG BEACH, CA 90815	87-2306135	501(C)(3)	0.	15,303.	FMV	PRODUCE	FRESH PRODUCE DONATION
FOOD SHARE							
4156 SOUTHBANK RD							
OXNARD, CA 93036	77-0018162	501(C)(3)	0.	15,086.	FMV	PRODUCE	FRESH PRODUCE DONATION
ommb, on 33030	77 0010102	301(0)(3)	· ·	13,000.	1 11 V	ROBUCE	TREE TROPECT POMITION
THE FID GROUP							
444 E WASHINGTON BLVD							
PASADENA, CA 91114	95-1644608	501(C)(3)	0.	14,149.	FMV	PRODUCE	FRESH PRODUCE DONATION
				, -			
FOOD BANK OF SANTA BARBARA COUNTY							
4554 HOLLISTER AVE.							
SANTA BARBARA, CA 93110	77-0169214	501(C)(3)	0.	13,869.	FMV	PRODUCE	FRESH PRODUCE DONATION
SECOND SAMOAN CONGREGATIONAL							
CHURCH - 655 CEDAR AVE LONG							
BEACH, CA 90802	95-3502347	501(C)(3)	0.	12,781.	FMV	PRODUCE	FRESH PRODUCE DONATION
CABRILLO ECONOMIC DEVELOPMENT							
CORPORATION (CEDC) - 702 COUNTY							
SQUARE DR VENTURA, CA 93003	95-3681521	501(C)(3)	0.	12,626.	FMV	PRODUCE	FRESH PRODUCE DONATION
LOS ANGELES COMMUNITY ACTION							
NETWORK - 838 EAST 6TH ST LOS	00 0551555	501 (a) (a)		40.40			TREET PROPERTY.
ANGELES, CA 90021	02-0661629	POT(G)(3)	0.	12,181.	F.W∧	PRODUCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other	•	nestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IGLESIA DE CRISTO ELIM SAN GABRIEL							
VALLEY - 550 S HOLLENBECK AVE							
COVINA, CA 91723	95-4610680	501(C)(3)	0.	12,052.	FMV	PRODUCE	FRESH PRODUCE DONATION
EL NIDO FAMILY CENTERS							
2179 E CENTURY BL.							
LOS ANGELES, CA 90002	95-3186429	501(C)(3)	0.	11,944.	FMV	PRODUCE	FRESH PRODUCE DONATION
ST THOMAS AQUINAS CHURCH							
185 ST. THOMAS DR.							
OJAI, CA 93023	95-3700729	501(C)(3)	0.	11,357.	FMV	PRODUCE	FRESH PRODUCE DONATION
	30 0,00,123			22,007.		1.02002	
LOV KITCHEN INC							
W 5TH ST.							
LOS ANGELES, CA 90013	87-1798268	501(C)(3)	0.	11,209.	FMV	PRODUCE	FRESH PRODUCE DONATION
MISSION LA / SERVE LA							
4903 FOUNTAIN AVE.							
LOS ANGELES, CA 90029	83-2869960	501(C)(3)	0.	9,667.	FMV	PRODUCE	FRESH PRODUCE DONATION
EEED MY DOOD INC							
FEED MY POOR INC 504 N ROXBURY DR							
BEVERLY HILLS, CA 90210	86-1673036	501(C)(3)	0.	9,218.	FMV	PRODUCE	FRESH PRODUCE DONATION
21/21/21 11/22 , 011 50/20	00 20,000			7,220.		1.02002	
SHEPHERD OF THE VALLEY LUTHERAN							
CHURCH - 4191 COCHRAN ST SIMI							
VALLEY, CA 93063	95-2649424	501(C)(3)	0.	9,072.	FMV	PRODUCE	FRESH PRODUCE DONATION
VEGGIE RESCUE							
3630 SAGUNTO ST. SUITE C-1							
SANTA YNEZ, CA 93460	45-1797788	501(C)(3)	0.	8,668.	FMV	PRODUCE	FRESH PRODUCE DONATION
UNCOMMON GOOD							
211 W FOOTHILL BLVD							
CLAREMONT, CA 91711	95-4792792	501(C)(3)	0.	8,260.	FMV	PRODUCE	FRESH PRODUCE DONATION
	1 23 1/32/32		٠.	0,200.	r ·	F-11-2002	THESE TROBUCE BORRESTON

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	rage
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALEXANDRIA HOUSE							
426 S ALEXANDRIA AVE.							
LOS ANGELES, CA 90020	95-4809755	501(C)(3)	0.	8,049.	FMV	PRODUCE	FRESH PRODUCE DONATION
HOPE THE MISSION							
16641 ROSCOE PL.							
NORTH HILLS, CA 91343	27-2053273	501(C)(3)	0.	7,963.	FMV	PRODUCE	FRESH PRODUCE DONATION
COMMUNITY OUTREACH CENTER							
11350 SATICOY ST.							
SUN VALLEY, CA 91352	47-3697694	501(C)(3)	0.	7,919.	FMV	PRODUCE	FRESH PRODUCE DONATION
RESTORE VENTURA							
572 N VENTURA AVE.							
VENTURA, CA 93001	45-3010479	501(C)(3)	0.	7,624.	FMV	PRODUCE	FRESH PRODUCE DONATION
CHILD DEVELOPMENT INSTITUTE							
7260 OWENSMOUTH AVE.	95-4545540	E01/G\/2\	0.	7,594.	EW7	PRODUCE	EDECH DRODUCE DONATION
CANOGA PARK, CA 91303	95-4545540	301(C)(3)	0.	7,394.	FMV	PRODUCE	FRESH PRODUCE DONATION
NOEL COMMUNITY ORGANIZATION							
1919 E COMPTON BLVD.							
COMPTON, CA 90802	93-1416607	501(C)(3)	0.	7,072.	FMV	PRODUCE	FRESH PRODUCE DONATION
PRINCE OF PEACE EPISCOPAL CHURCH							
5700 RUDNICK AVE.							
LOS ANGELES, CA 91367	95-3349988	501(C)(3)	0.	6,856.	FMV	PRODUCE	FRESH PRODUCE DONATION
VEGAN OUTREACH (LA CHAPTER)							
4340 11TH AVE.	86-0736818	E01/G\/2\		F 070	EW7	DRODUCE	EDECH DRODUCE DONAUTON
LOS ANGELES, CA 90008	00-0/30818	901(C)(3)	0.	5,979.	t n A	PRODUCE	FRESH PRODUCE DONATION
LOS ANGELES VALLEY COLLEGE							
5800 FULTON AVE.							
VAN NUYS, CA 91401	23-7349231	501(C)(3)	0.	5,920.	FMV	PRODUCE	FRESH PRODUCE DONATION

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
NORTH HOLLYWOOD INTERFAITH FOOD PANTRY - 11634 MOORPARK ST ST.UDIO CITY, CA 91604	84-3216434	501(C)(3)	0.	5,812.	FMV	PRODUCE	FRESH PRODUCE DONATION				
ARMENIAN CULTURAL FOUNDATION 740 E WASHINGTON BLVD. PASADENA, CA 91104	93-0660517		0.	5,798.		PRODUCE	FRESH PRODUCE DONATION				
THE FIRST CHURCH OF THE NAZARENE OF PASADENA - 3700 E SIERRA MADRE											
BLVD - PASADENA, CA 91107 UCLA / COMMUNITY PROGRAMS 220 WESTWOOD PLAZA STUDENT ACTIVITIES CENTER - LOS ANGELES,	95-1729619		0.	5,555.		PRODUCE	FRESH PRODUCE DONATION				
CA 90095 SATICOY FOOD HUB 1297 LOS ANGELES AVE.	95-6006143	501(C)(3)	0.	5,329.	FMV	PRODUCE	FRESH PRODUCE DONATION				
VENTURA, CA 93004	87-4418028	501(C)(3)	0.	5,289.	FMV	PRODUCE	FRESH PRODUCE DONATION				

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	90, 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
Part IV Supplemental Information. Provide the information req	<u>I</u> uired in Part I. lin	e 2: Part III. column	(b): and any other ac	l Iditional information	
PART I, LINE 2:	a c a c c c c c c c	<u> </u>	(b), and any other ac	artional information.	
FOR ANY GRANTS AND ASSISTANCE PROV					
DUE DILIGENCE TO ENSURE THAT THE DO					
CHARITABLE PURPOSE TO DISTRIBUTE PI	RODUCE FR	EE OF CHAP	RGE TO COMM	UNITY	
MEMBERS.					

SCHEDULE J (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation Information

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

FOOD FORWARD, INC.

Part I Questions Regarding Compensation

 $Employer\ identification\ number \\ 90-0678872$

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

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

Schedule J (Form 990) (Rev. 12-2024)

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-MIS0 compensation	C and/or 1099-NEC	(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) RICHARD NAHMIAS	(i)	226,646.	311.	0.	43,167.	11,773.	281,897.	0.
FOUNDER/CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KRISTEN JOHNSON	(i)	190,226.	308.	0.	5,552.	6,871.	202,957.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JENNIFER COX	(i)	160,807.	332.	0.	4,840.	11,784.	177,763.	0.
CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JODI JACOBSEN	(i)	128,781.	329.	0.	3,959.	37,292.	170,361.	0.
DIRECTOR OF HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DIANE HELFREY	(i)	136,797.	572.	0.	4,129.	14,222.	155,720.	0.
DIRECTOR OF FINANCE & ACCOUNTING	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
_	(ii)							
	(i)							
_	(ii)							
	(i)							
	(ii)							
	(i)							
_	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 4B:
PARTICIPANT: RICHARD NAHMIAS, CEO. IN DECEMBER 2023, THE BOARD OF DIRECTORS
ESTABLISHED A 457(F) DEFERRED COMPENSATION PLAN AS PART OF AN EXECUTIVE
EMPLOYMENT AGREEMENT. THE AGREEMENT OUTLINES THE CEO'S DUTIES,
COMPENSATION, BENEFITS, ALLOWABLE EXPENSES, AND ANNUAL EVALUATIONS. THE
AGREEMENT ALSO OUTLINES ANY IMPACTS TO PLAN BENEFITS IF THE EMPLOYER OR
EMPLOYEE TERMINATES THE AGREEMENT FOR CAUSE, DEATH, DISABILITY, OR OTHER
REASON.
CONTRIBUTIONS THAT ARE SUBJECT TO A FUTURE VESTING CONDITION OR EVENT ARE
REPORTED AS "RETIREMENT AND DEFERRED COMPENSATION" ON SCHEDULE J, PART II,
COLUMN (C). CONTRIBUTIONS THAT ARE IMMEDIATELY VESTED ARE REPORTED AS
"BONUS & INCENTIVE COMPENSATION" ON SCHEDULE J, PART II, COLUMN (B)(II).
RICHARD NAHMIAS: \$36,346
PART I, LINE 7:
DISCRETIONARY BONUSES WERE DETERMINED BY THE CEO AND COO AND APPROVED BY
THE BOARD OF DIRECTORS.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30. Attach to Form 990.

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

FOOD FORWARD, INC. Employer identification number 90-0678872

Pai	rt I Types of Property	,						
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de			
		applicable	items contributed	Form 990, Part VIII, line 1	noncash contribu	ition amo	unts	
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	3	83,021	FMV			
10	Securities - Closely held stock			03,022	, <u> </u>			
11	Securities - Partnership, LLC, or							
•••	and the second s							
12	O Marrie							
13	Qualified conservation contribution -							
10								
14	Qualified conservation contribution - Other							
15								
16	Real estate - Residential Real estate - Commercial							
17	Real estate - Other							
18								
19	Collectibles Food inventory	Х	1,427	185 331 972	FAIR VALUE	- GAZ	ΔP	
20	Drugs and medical supplies		1,12,	100/001/07	TITEL VILLOL			
21	Taxidermy							
22	ARCHITECTURE A							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (SUPPLIES)	х	11	72,985	FMV			
26	Other (SOFTWARE SUBS)	X	37	10,134				
27	Other (OFF. EQUIPMENT)	X	4	2,301				
28	Other (TOOLS AND EQUIP)	X	1		FMV			
29	Number of Forms 8283 received by the organiz	ı	1		, 4 11 4			
25	for which the organization completed Form 828	-					0	
	for which the organization completed form ozi	50, 1 ait v, L	once Acknowledg			v	es	No
30a	During the year, did the organization receive by	, contributio	n any property rep	orted on Part I lines 1 thro	igh 28, that it		03	140
oou	must hold for at least 3 years from the date of							
	exempt purposes for the entire holding period?		•	or ising required to be used		30a		Х
h	If "Yes," describe the arrangement in Part II.					Joan		
31	Does the organization have a gift acceptance p	oolicy that re	equires the review o	of any nonstandard contribu	ıtions?	31	x	
	Does the organization hire or use third parties					<u> </u>	+	
UZd			_	•		32a		Х
h	contributions? If "Yes," describe in Part II.					JZa		
33	If the organization didn't report an amount in c	olump (c) for	r a type of property	for which column (a) is ch	acked			
33	describe in Part II.	Oldffill (C) 101	a type of property	TOT WITHOUT COMMITTEE (a) IS CHE	onou,			
	utound III Fall II.							

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

Schedule M (Form 990) 2024

is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE M, PART I, COLUMN (B):
THE NUMBER OF CONTRIBUTIONS REPRESENTS THE NUMBER OF DONORS.
SCHEDULE M, PART I, LINE 19, COLUMN (C):
THE DONATED FOOD IS RECORDED AT THE INDUSTRY STANDARD RATE OF \$1.97 PER
POUND. THE INDUSTRY STANDARD RATE IS EVALUATED AND REVISED ANNUALLY BY
FEEDING AMERICA, THE NATION'S LARGEST DOMESTIC HUNGER-RELIEF
ORGANIZATION, AND IS BASED ON ANALYSIS OF DATA COLLECTED FROM USDA AND
OTHER PUBLICLY AVAILABLE SOURCES.
OTHER FORDICHI AVAIDADLE SOURCES.
-

432142 01-18-25

SCHEDULE O (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

FOOD FORWARD, INC.

Employer identification number 90-0678872

FORM 990 PART III LINE 1: ONE IN FIVE HOUSEHOLDS IN CALIFORNIA IS FOOD INSECURE. AΤ THE SAME THE CROSSROADS THROUGH WHICH MUCH OF THE NATION'S LOS ANGELES IS PRODUCE PASSES, TO ONE OF NORTH AMERICA'S LARGEST WHOLESALE AS HOME NATION'S THE PRODUCE MARKETS, ONE OF BUSIEST INTERNATIONAL PORTS, WEEKLY FARMERS MARKETS ACROSS THE REGION. BUT THE REALITY IS THATMUCH THIS PERFECTLY GOOD PRODUCE IS LEFT TO BECOME WASTE INLANDFILLS; 38% OF THE FOOD PRODUCED INTHE U.S. IS UNSOLD OR ASTOUNDING UNEATEN. FOOD FORWARD'S LARGE-SCALE PRODUCE RECOVERY AND DISTRIBUTION OPERATION SOLUTION THAT MOVES SURPLUS FRUITS AND VEGETABLES AN IMPORTANT OUICKLY AND EFFICIENTLY TO PEOPLE EXPERIENCING FOOD

IN 2024, FOOD FORWARD RECOVERED AND DISTRIBUTED MORE THAN 94 MILLION 532 POUNDS OF PRODUCE-EQUIVALENT TO MILLION SERVINGS-TO HUNDREDS PARTNER ORGANIZATIONS THAT SERVE PEOPLE EXPERIENCING FOOD INSECURITY. THIS REFLECTS SOCIAL IMPACT \$185 AN ESTIMATED VALUE OF MILLION FOR VALUE OF PRODUCE DISTRIBUTED, AN IMPRESSIVE RETURN ON INVESTMENT FOR FOOD FORWARD DISTRIBUTED FOOD FORWARD'S LEAN OPERATING COSTS. ACROSS THE REGION, INCLUDING TO 13 CALIFORNIA COUNTIES (CONTRA COSTA FRESNO, KERN, LOS ANGELES, MONTEREY, ORANGE, RIVERSIDE, SAN BERNARDINO, SAN DIEGO SANTA BARBARA, SOLANO, TULARE, VENTURA) AND SIX ADDITIONAL STATES AND TRIBAL LANDS. ALONG WITH THE BENEFITS OF IMPROVING ACCESS TO HEALTHIER FOOD KEEPING THIS PRODUCE FROM GOING TO LANDFILLS ALSO THE EMISSIONS OF MORE THAN 83,000 METRIC TONS OF PREVENTED FOOD FORWARD CURRENTLY DISTRIBUTES **ENOUGH SURPLUS** CO2-EQUIVALENT. FRUITS AND VEGETABLES EACH DAY TO MEET THE DAILY RECOMMENDED SERVINGS FOR MORE THAN 310,000 PEOPLE

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

THE FORM 990 IS REVIEWED BY THE DIRECTOR OF FINANCE AND ACCOUNTING, THE CEO, COO, CDO, AND AUDIT COMMITTEE. A COPY IS SHARED WITH BOARD MEMBERS FOR REVIEW BEFORE FILING.

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

FOOD FORWARD'S CONFLICT OF INTEREST POLICY APPLIES TO ITS DIRECTORS AND DESIGNATED COMMITTEE MEMBERS KEY EMPLOYEES, AND CREATES AFFIRMATIVE OBLIGATION TO PROMPTLY AND FULLY DISCLOSE ANY ACTUAL, APPARENT POTENTIAL CONFLICTS OF INTEREST, THATNO SENIOR LEADERS VOTE ON OTHERWISE ATTEMPT TO UNDULY INFLUENCE ANY DECISION BY FOOD FORWARD INCONFLICT OF MATTERS IN WHICH THEY HAVE A INTEREST THAT FOOD FORWARD FOLLOW DISCIPLINED, DOCUMENTED PROCESS IN MAKING DECISIONS ABOUT SUCH MATTERS AND THAT FOOD FORWARD COMPLY WITH ALL APPLICABLE LEGAL REQUIREMENTS RELATING TO SUCH MATTERS. BOARD MEMBERS, C-LEVEL, KEY EMPLOYEES AND OTHER ARE REQUIRED TO REVIEW THE POLICY ON AN ANNUAL BASIS AND CONFIRM AND COMPLIANCE WITH, UNDERSTANDING OF THE POLICY.

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

THE CEO AND KEY EMPLOYEES OF THE ORGANIZATION COMPENSATION FOR IS PROPOSED IN WRITING BY THE CEO BASED ON ANNUAL EMPLOYEE EVALUATIONS ANDAN ASSESSMENT OF THE CURRENT MARKET. THE PROPOSED COMPENSATION IS INITIALLY COMMITTEE OF THE BOARD THEN BY THE EXECUTIVE THE FULL BOARD OF DIRECTORS TO **ENSURE** THE PROPOSED COMPENSATION IS FAIR AND REASONABLE.

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

Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Schedule O (Form 990) 2024 Page 2 Name of the organization **Employer identification number** 90-0678872 FOOD FORWARD, INC. EVALUATE THE REASONABLENESS OF COMPENSATION THE BOARD OF DIRECTORS RELIES ON COMPENSATION COMPARABILITY DATA AGGREGATED BY THE GUIDESTAR NONPROFIT COMPENSATION REPORT WHICH SOURCES ITS DATA FROM THE FORM 990S FILED BY LOCAL AND NATIONAL FOOD AID ORGANIZATIONS AND LOCAL HUMAN SERVICES ORGANIZATIONS. THE BOARD THEN DOCUMENTS ITS ACTION ON THE PROPOSED COMPENSATION VIA BOARD RESOLUTION OR MINUTES. FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AND BY REQUEST. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: LOSS ON UNCOLLECTIBLE PLEDGES -12,000.