

Form **990**

## 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)

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

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

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>ATLANTA COMMUNITY FOOD BANK, INC.</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>3400 NORTH DESERT DRIVE</b> City or town, state or province, country, and ZIP or foreign postal code <b>ATLANTA, GA 30344</b> <b>F</b> Name and address of principal officer: <b>DEBRA SHOAF</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number <b>58-1376648</b> <b>E</b> Telephone number <b>404-892-9822</b> <b>G</b> Gross receipts \$ <b>231,459,991.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.ACFB.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
		<b>L</b> Year of formation: <b>1979</b>
		<b>M</b> State of legal domicile: <b>GA</b>

**Part I Summary**

	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>TO FIGHT HUNGER BY ENGAGING, EDUCATING, AND EMPOWERING OUR COMMUNITY.</b>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>Activities &amp; Governance</b>	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>24</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>24</b>
	<b>5</b>	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<b>197</b>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>1325</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
	<b>7b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>
	<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 156,296,721.
<b>9</b>		Program service revenue (Part VIII, line 2g)	3,351,823.	3,113,412.
<b>10</b>		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,977,882.	818,258.
<b>11</b>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	361,551.	445,370.
<b>12</b>		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	168,987,977.	231,326,752.
<b>13</b>		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	112,303,111.	175,765,691.
<b>14</b>		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
<b>Expenses</b>	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	12,919,214.	14,049,338.
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	782,332.	637,778.
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>4,018,061.</b>		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,539,735.	34,949,622.
	<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	140,544,392.	225,402,429.
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	28,443,585.	5,924,323.
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 97,925,385.	<b>End of Year</b> 106,263,342.
	<b>21</b>	Total liabilities (Part X, line 26)	6,608,338.	6,045,341.
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	91,317,047.	100,218,001.

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer <b>DEBRA SHOAF, CHIEF FINANCIAL OFFICER</b> Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>ADAM REPASY</b>	Preparer's signature <b>ADAM REPASY</b>
	Date <b>11/19/21</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P01689756</b>
	Firm's name ▶ <b>WARREN AVERETT, LLC</b>	Firm's EIN ▶ <b>45-4084437</b>
	Firm's address ▶ <b>SIX CONCOURSE PARKWAY, SUITE 600 ATLANTA, GA 30328</b>	Phone no. <b>770-396-1100</b>

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE MISSION OF THE ATLANTA COMMUNITY FOOD BANK IS TO ENGAGE, EDUCATE AND EMPOWER OUR COMMUNITY TO FIGHT HUNGER. OUR BOLD GOAL IS TO SEE THAT ALL PEOPLE IN OUR SERVICE AREA HAVE ACCESS TO THE NUTRITIOUS MEALS THEY NEED WHEN THEY NEED THEM.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 213,681,462. including grants of \$ 175,765,691. ) (Revenue \$ 3,113,412. ) PRODUCT COLLECTION, STORAGE AND DISTRIBUTION:

THE ATLANTA COMMUNITY FOOD BANK (THE FOOD BANK) SERVES AS THE CENTRAL DISTRIBUTION CENTER FOR NEARLY 700 NONPROFIT PARTNER AGENCIES THAT PROVIDE FOOD ASSISTANCE IN 29 METRO ATLANTA AND NORTH GEORGIA COUNTIES. THESE AGENCIES INCLUDE FOOD PANTRIES, SHELTERS, COMMUNITY KITCHENS AND OTHER ORGANIZATIONS OFFERING FOOD FOR PEOPLE WHO STRUGGLE WITH HUNGER, INCLUDING CHILDREN, WORKING FAMILIES AND SENIORS. IN AN EFFORT TO HELP ITS AGENCIES INCREASE THEIR ABILITY TO PROVIDE MORE FOOD AND REACH MORE PEOPLE, THE FOOD BANK ALSO CO-HOSTS MOBILE FOOD PANTRIES. IN ADDITION, THE FOOD BANK OPERATES SEVERAL PROGRAMS THAT FULFILL ITS MISSION INCLUDING EDUCATION OUTREACH, BENEFITS SCREENING AND MORE.

4b (Code: ) (Expenses \$ 153,181. including grants of \$ ) (Revenue \$ ) EDUCATION, ADVOCACY AND OUTREACH:

THE FOOD BANK OFFERS SEVERAL PROGRAMS, INCLUDING COMMUNITY EDUCATION OUTREACH, ADVOCACY FOR PUBLIC POLICIES THAT REDUCE FOOD INSECURITY, AND BENEFITS OUTREACH. EDUCATION OUTREACH IS AN INTRODUCTION TO HUNGER AND POVERTY ISSUES IN THE U.S. AND GEORGIA AND INCLUDES A CURRICULUM TO FACILITATE HUNGER EDUCATION. THE ADVOCACY PROGRAM IDENTIFIES EFFECTIVE STRATEGIES FOR COMBATING FOOD INSECURITY AND COORDINATES ADVOCACY EFFORTS TO REACH GOVERNMENT REPRESENTATIVES ABOUT ISSUES AFFECTING THOSE WHO STRUGGLE WITH HUNGER. BENEFITS OUTREACH WORKERS HELP FAMILIES AND INDIVIDUALS BY OFFERING SCREENINGS AND ENROLLMENT SUPPORT FOR PUBLIC BENEFITS TO HELP MAKE ENDS MEET.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

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

4e Total program service expenses 213,834,643.

**Part IV Checklist of Required Schedules**

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

**Part IV Checklist of Required Schedules** (continued)

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

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax filings, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	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.		
	<b>1a</b> 24		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
	<b>1b</b> 24		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	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?		X
<b>b</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
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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		X

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **GA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **DEBRA SHOAF - 404-892-9822**  
**3400 NORTH DESERT DRIVE, ATLANTA, GA 30344**

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES DALLAS CHAIR	0.50	X		X				0.	0.	0.
(2) MITCH HARRISON VICE CHAIR	0.50	X		X				0.	0.	0.
(3) F. JOHN CASE TREASURER	0.50	X						0.	0.	0.
(4) DERIN DICKERSON SECRETARY	0.50	X		X				0.	0.	0.
(5) TODD MCMULLEN DIRECTOR	0.50	X						0.	0.	0.
(6) MARTHA "MARTI" FESSENDEN DIRECTOR	0.50	X						0.	0.	0.
(7) SEAN HYSLOP DIRECTOR	0.50	X						0.	0.	0.
(8) ADAM NOYES DIRECTOR	0.50	X						0.	0.	0.
(9) ALTHEA BROUGHTON DIRECTOR	0.50	X						0.	0.	0.
(10) ANDREW CATHY DIRECTOR	0.50	X						0.	0.	0.
(11) CHRIS HELLMANN DIRECTOR	0.50	X						0.	0.	0.
(12) CONDACE PRESSLEY DIRECTOR	0.50	X						0.	0.	0.
(13) ERIC BUSKO DIRECTOR	0.50	X						0.	0.	0.
(14) GARY BRANTLEY DIRECTOR	0.50	X						0.	0.	0.
(15) IVAN SHAMMAS DIRECTOR	0.50	X						0.	0.	0.
(16) MARIO MONTAG DIRECTOR	0.50	X						0.	0.	0.
(17) MIKE NEWTON DIRECTOR	0.50	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MIKE STOGNER DIRECTOR	0.50	X					0.	0.	0.	
(19) NATOSHA REID RICE DIRECTOR	0.50	X					0.	0.	0.	
(20) RAGHU KAKARALA DIRECTOR	0.50	X					0.	0.	0.	
(21) ROBIN MORIARTY DIRECTOR	0.50	X					0.	0.	0.	
(22) RYAN OLIVER DIRECTOR	0.50	X					0.	0.	0.	
(23) STEPHEN CANNON DIRECTOR	0.50	X					0.	0.	0.	
(24) STEVEN MICHAELS DIRECTOR	0.50	X					0.	0.	0.	
(25) KYLE WAIDE CHIEF EXECUTIVE OFFICER	50.00	X		X			315,707.	0.	31,686.	
(26) DEBRA H SHOAF CHIEF FINANCIAL OFFICER	50.00			X			203,450.	0.	24,030.	
<b>1b Subtotal</b>							519,157.	0.	55,716.	
<b>c Total from continuation sheets to Part VII, Section A</b>							901,306.	0.	100,418.	
<b>d Total (add lines 1b and 1c)</b>							1,420,463.	0.	156,134.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **12**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
M. FELLINGER COMPANY P.O. BOX 198, STATE COLLEGE, PA 16804	LOGISTICS	2,312,716.
FEEDING AMERICA 1601 PAYSHERE CIRCLE, CHICAGO, IL 60674	LOGISTICS	2,157,910.
D.L. LEE & SONS P.O. BOX 206, ALMA, GA 31510	LOGISTICS	1,853,076.
PORT ROYAL SALES 95 FROEHLICH FARM BLVD, WOODBURY, NY 11797	LOGISTICS	1,555,049.
ROYAL FOOD IMPORT CORPORATION P.O. BOX 4110, DEPT 1980, WOBUM, MA 01888	LOGISTICS	1,550,997.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **45**

SEE PART VII, SECTION A CONTINUATION SHEETS



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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (check all that apply), (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes entries for Sarah Fonder-Kristy, Sheri Foster, Stacey Greene-Koehnke, Jonathan West, and Heather Jaime Trel Schlesinger.

Total to Part VII, Section A, line 1c ..... 901,306. 100,418.

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>	4,368,543.				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	94,832,218.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	127,748,951.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 98,215,597.				
	<b>h Total.</b> Add lines 1a-1f			226,949,712.			
Program Service Revenue	<b>2 a</b> SHARE MAINTENANCE	<b>Business Code</b>	624200	2,651,414.	2,651,414.		
	<b>b</b> PRODUCT SALES		624200	461,998.	461,998.		
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			3,113,412.			
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			244,699.		244,699.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real	5,260.			
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>		0.			
	<b>c</b> Rental income or (loss)	<b>6c</b>		5,260.			
	<b>d</b> Net rental income or (loss)			5,260.		5,260.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	573,559.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>		0.			
	<b>c</b> Gain or (loss)	<b>7c</b>		573,559.			
<b>d</b> Net gain or (loss)			573,559.		573,559.		
<b>8 a</b> Gross income from fundraising events (not including \$ 4,368,543. of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>		91,759.				
		<b>b</b> Less: direct expenses	<b>8b</b>	133,239.			
		<b>c</b> Net income or (loss) from fundraising events			-41,480.		-41,480.
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
		<b>b</b> Less: direct expenses	<b>9b</b>				
		<b>c</b> Net income or (loss) from gaming activities					
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>						
		<b>b</b> Less: cost of goods sold	<b>10b</b>				
		<b>c</b> Net income or (loss) from sales of inventory					
Miscellaneous Revenue	<b>11 a</b> OTHER REVENUE	<b>Business Code</b>	561000	431,590.		431,590.	
	<b>b</b> UNVESTED ANNUITY PAYBACK		561000	50,000.		50,000.	
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d			481,590.			
<b>12 Total revenue.</b> See instructions			231,326,752.	3,113,412.	0.	1,263,628.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	175,765,691.	175,765,691.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	1,759,387.	673,991.	550,846.	534,550.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	9,469,312.	6,481,126.	2,304,059.	684,127.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	576,359.	368,650.	160,052.	47,657.
<b>9</b> Other employee benefits	1,447,630.	1,058,038.	279,888.	109,704.
<b>10</b> Payroll taxes	796,650.	514,013.	198,405.	84,232.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	7,618.	195.	7,423.	
<b>c</b> Accounting	110,190.		110,190.	
<b>d</b> Lobbying	40,000.	40,000.		
<b>e</b> Professional fundraising services. See Part IV, line 17	637,778.			637,778.
<b>f</b> Investment management fees	41,633.		41,633.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	1,213,850.	105,565.	703,522.	404,763.
<b>12</b> Advertising and promotion	711,163.	593.	5,310.	705,260.
<b>13</b> Office expenses	947,316.	158,306.	436,876.	352,134.
<b>14</b> Information technology	665,578.	388,775.	135,209.	141,594.
<b>15</b> Royalties				
<b>16</b> Occupancy	2,219,581.	115,794.	2,103,156.	631.
<b>17</b> Travel	80,581.	14,356.	57,338.	8,887.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	33,457.	2,054.	26,102.	5,301.
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	546,961.	546,961.		
<b>23</b> Insurance	169,744.	57,093.	112,524.	127.
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>PURCHASED FOOD COSTS</b>	25,558,257.	25,558,257.		
<b>b</b> <b>PRODUCT SHIPPING/TRANS</b>	857,878.	857,878.		
<b>c</b> <b>OTHER EXPENSES</b>	852,105.	525,804.	292,756.	33,545.
<b>d</b> <b>EVENT EXPENSES</b>	455,825.	407,195.		48,630.
<b>e</b> All other expenses	437,885.	194,308.	24,436.	219,141.
<b>25</b> Total functional expenses. Add lines 1 through 24e	225,402,429.	213,834,643.	7,549,725.	4,018,061.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

**Part X Balance Sheet**

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

		(A)		(B)	
		Beginning of year		End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>		
	<b>2</b> Savings and temporary cash investments .....	32,591,953.	<b>2</b>	37,275,055.	
	<b>3</b> Pledges and grants receivable, net .....	9,015,018.	<b>3</b>	8,156,769.	
	<b>4</b> Accounts receivable, net .....	182,816.	<b>4</b>	230,253.	
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>		
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....	30,501,500.	<b>7</b>	32,324,762.	
	<b>8</b> Inventories for sale or use .....	3,886,316.	<b>8</b>	8,367,774.	
	<b>9</b> Prepaid expenses and deferred charges .....	327,822.	<b>9</b>	381,205.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 8,244,987.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 6,855,088.			
	<b>11</b> Investments - publicly traded securities .....	1,698,650.	<b>10c</b>	1,389,899.	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	12,706,964.	<b>11</b>	16,068,818.	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	1,677,406.	<b>12</b>	2,068,807.	
	<b>14</b> Intangible assets .....		<b>13</b>		
	<b>15</b> Other assets. See Part IV, line 11 .....	5,336,940.	<b>14</b>	0.	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	97,925,385.	<b>15</b>	106,263,342.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	4,674,593.	<b>17</b>	3,734,069.	
	<b>18</b> Grants payable .....		<b>18</b>		
	<b>19</b> Deferred revenue .....	1,933,745.	<b>19</b>	2,311,272.	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>		
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>		
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>		
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>		
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>25</b>		
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	6,608,338.	<b>26</b>	6,045,341.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>				
	<b>27</b> Net assets without donor restrictions .....	86,401,727.	<b>27</b>	96,160,587.	
	<b>28</b> Net assets with donor restrictions .....	4,915,320.	<b>28</b>	4,057,414.	
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>				
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>		
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>		
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>		
	<b>32</b> Total net assets or fund balances .....	91,317,047.	<b>32</b>	100,218,001.	
	<b>33</b> Total liabilities and net assets/fund balances .....	97,925,385.	<b>33</b>	106,263,342.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	231,326,752.
2	Total expenses (must equal Part IX, column (A), line 25)	2	225,402,429.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,924,323.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	91,317,047.
5	Net unrealized gains (losses) on investments	5	2,976,631.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	100,218,001.

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization ATLANTA COMMUNITY FOOD BANK, INC.
Employer identification number 58-1376648

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
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).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 An organization organized and operated exclusively to test for public safety.
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization.
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s).
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions).
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	140975072	139003432	159967107	156296721	226949712	823192044
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	140975072	139003432	159967107	156296721	226949712	823192044
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						109191836
<b>6 Public support.</b> Subtract line 5 from line 4.						714000208

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 .....	140975072	139003432	159967107	156296721	226949712	823192044
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	234,533.	243,983.	272,896.	268,974.	249,959.	1270345.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	347,190.	200,878.	222,756.	365,350.	481,590.	1617764.
<b>11 Total support.</b> Add lines 7 through 10						826080153
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	2,335,042.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	86.43 %
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....	<b>15</b>	84.45 %
<b>16a 33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ..... ►

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

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

**19a 33 1/3% support tests - 2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ►

**b 33 1/3% support tests - 2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ►

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ..... ►



**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described in line 11a above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove 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.</i>		
<b>1</b>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>2</b>		
<b>3</b> By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
<b>2a</b>		
<b>b</b> Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). See instructions.  
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		Current Year
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2020 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

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

Schedule A (Form 990 or 990-EZ) 2020

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

**SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**

**OTHER REVENUE**

2016 AMOUNT: \$ 321,690.

2017 AMOUNT: \$ 154,878.

2018 AMOUNT: \$ 191,756.

2019 AMOUNT: \$ 309,350.

2020 AMOUNT: \$ 431,590.

**UNVESTED ANNUITY PAYBACK**

2016 AMOUNT: \$ 25,500.

2017 AMOUNT: \$ 46,000.

2018 AMOUNT: \$ 31,000.

2019 AMOUNT: \$ 56,000.

2020 AMOUNT: \$ 50,000.

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Name of the organization

**ATLANTA COMMUNITY FOOD BANK, INC.**

Employer identification number

**58-1376648**

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

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

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

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

Name of organization  <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	Employer identification number  <b>58-1376648</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<hr/> <hr/> <hr/>	\$ <u>9,253,617.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	<hr/> <hr/> <hr/>	\$ <u>8,012,671.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	<hr/> <hr/> <hr/>	\$ <u>5,613,101.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	<hr/> <hr/> <hr/>	\$ <u>14,969,350.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	<hr/> <hr/> <hr/>	\$ <u>16,070,474.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	<hr/> <hr/> <hr/>	\$ <u>32,564,896.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	Employer identification number  <b>58-1376648</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>4,788,230.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>6,128,425.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>5,166,249.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ <u>6,433,820.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
11	<hr/> <hr/> <hr/>	\$ <u>11,414,786.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	Employer identification number <b>58-1376648</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>1</u>	FOOD INVENTORY _____ _____ _____	\$ <u>9,253,617.</u>	<u>06/30/21</u>
<u>2</u>	FOOD INVENTORY _____ _____ _____	\$ <u>8,012,671.</u>	<u>06/30/21</u>
<u>3</u>	FOOD INVENTORY _____ _____ _____	\$ <u>5,613,101.</u>	<u>06/30/21</u>
<u>4</u>	FOOD INVENTORY _____ _____ _____	\$ <u>14,969,350.</u>	<u>06/30/21</u>
<u>5</u>	FOOD INVENTORY _____ _____ _____	\$ <u>16,070,474.</u>	<u>06/30/21</u>
<u>6</u>	FOOD INVENTORY _____ _____ _____	\$ <u>32,564,896.</u>	<u>06/30/21</u>

Name of organization  <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	Employer identification number  <b>58-1376648</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD INVENTORY _____ _____ _____	\$ <u>4,788,230.</u>	<u>06/30/21</u>
8	FOOD INVENTORY _____ _____ _____	\$ <u>6,128,425.</u>	<u>06/30/21</u>
9	FOOD INVENTORY _____ _____ _____	\$ <u>5,166,249.</u>	<u>06/30/21</u>
10	FOOD INVENTORY _____ _____ _____	\$ <u>6,433,820.</u>	<u>06/30/21</u>
11	FOOD INVENTORY _____ _____ _____	\$ <u>11,414,786.</u>	<u>06/30/21</u>
	_____ _____ _____	\$ _____	

Name of organization  <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	Employer identification number  <b>58-1376648</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

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

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**  
▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	Employer identification number <b>58-1376648</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities .....

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....	153,181.													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....	153,181.													
<b>d</b> Other exempt purpose expenditures .....	221890349.													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....	222043530.													
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....	250,000.													
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....	0.													
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....	0.													
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
<b>c</b> Total lobbying expenditures	206,536.	191,413.	92,100.	153,181.	643,230.
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
<b>f</b> Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
<i>For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b> Other activities?			
<b>j</b> Total. Add lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
<b>a</b> Current year	<b>2a</b>
<b>b</b> Carryover from last year	<b>2b</b>
<b>c</b> Total	<b>2c</b>
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>
<b>5</b> Taxable amount of lobbying and political expenditures (See instructions)	<b>5</b>

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization ATLANTA COMMUNITY FOOD BANK, INC. Employer identification number 58-1376648

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor property and grant fund usage.

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

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes for land, habitat, open space, historic area, historic structure). 2. Conservation contribution details (2a-2d table). 3-7. Monitoring and enforcement details. 8-9. Reporting requirements.

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.

Form with sections 1a-1b and 2. 1a: Reporting on revenue and assets for public exhibition. 1b: Reporting on revenue and assets for public exhibition. 2: Reporting on revenue and assets for financial gain.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,949,292.	1,925,152.	1,774,035.	1,620,303.	1,343,279.
b Contributions					
c Net investment earnings, gains, and losses	525,946.	24,140.	151,117.	153,732.	277,024.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	2,475,238.	1,949,292.	1,925,152.	1,774,035.	1,620,303.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  \_\_\_\_\_ %
  - b Permanent endowment  33.4513 %
  - c Term endowment  66.5486 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes                      | No                                  |
|---|--------------------------|-------------------------------------|
| (i) Unrelated organizations   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		145,000.		145,000.
b Buildings		108,100.	8,033.	100,067.
c Leasehold improvements				
d Equipment		6,189,025.	5,347,560.	841,465.
e Other		1,802,862.	1,499,495.	303,367.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				<b>1,389,899.</b>



**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	234,816,725.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b> 2,976,631.		
<b>b</b>	Donated services and use of facilities	<b>2b</b> 554,975.		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	3,531,606.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	231,285,119.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b> 41,633.		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	41,633.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	231,326,752.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	225,915,771.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b> 554,975.		
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	554,975.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	225,360,796.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b> 41,633.		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	41,633.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	225,402,429.

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART V, LINE 4:**

FUNDS ARE FOR FUTURE PROGRAMMING AND EXPANSION, UPKEEP AND MAINTENANCE OF FACILITIES, UPKEEP AND MAINTENANCE OF FLEET OF VEHICLES, AND ITEMS IDENTIFIED THROUGH STRATEGIC PLANNING PROCESS.

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the organization <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	Employer identification number <b>58-1376648</b>
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**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  **Yes**  **No**
  
- 2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
  
- 3 **Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	INVESTMENT		1,705,455.
<b>3 a</b> Subtotal .....	0	0			1,705,455.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c</b> <b>Totals</b> (add lines 3a and 3b) .....	0	0			1,705,455.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 9 columns: (a) Name of organization, (b) IRS code section and EIN (if applicable), (c) Region, (d) Purpose of grant, (e) Amount of cash grant, (f) Manner of cash disbursement, (g) Amount of noncash assistance, (h) Description of noncash assistance, (i) Method of valuation (book, FMV, appraisal, other). The table contains 8 empty rows.

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
3 Enter total number of other organizations or entities

**Part III Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

<b>(a)</b> Type of grant or assistance	<b>(b)</b> Region	<b>(c)</b> Number of recipients	<b>(d)</b> Amount of cash grant	<b>(e)</b> Manner of cash disbursement	<b>(f)</b> Amount of noncash assistance	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* .....  Yes  No
  
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* .....  Yes  No
  
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* .....  Yes  No
  
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* .....  Yes  No
  
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* .....  Yes  No
  
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* .....  Yes  No



**SCHEDULE G**  
**(Form 990 or 990-EZ)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

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.

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

**ATLANTA COMMUNITY FOOD BANK, INC.**

Employer identification number

**58-1376648**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
ONE & ALL, INC. - P.O. BOX 93657, ATLANTA, GA 31193	PROFESSIONAL FUNDRAISING THROUGH DIRECT MAIL		X	7,612,669.	1,127,528.	6,485,141.
<b>Total</b>				7,612,669.	1,127,528.	6,485,141.

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.

GA, IL, MA



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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		HUNGER WALK	FOOD-A-THON	5	(add col. (a) through col. (c))	
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	1,111,756.	640,083.	2,708,463.	4,460,302.
	2	Less: Contributions	1,111,756.	640,083.	2,616,704.	4,368,543.
	3	Gross income (line 1 minus line 2)			91,759.	91,759.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	36,213.		97,026.	133,239.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				133,239.
	11	Net income summary. Subtract line 10 from line 3, column (d)				-41,480.

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

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

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

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

b If "No," explain: \_\_\_\_\_

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

b If "Yes," explain: \_\_\_\_\_





**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization **ATLANTA COMMUNITY FOOD BANK, INC.** Employer identification number **58-1376648**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
CALHOUN SEVENTH DAY ADVENTIST CHURCH - 1411 ROME ROAD SW - CALHOUN, GA 30701	58-1541794 3		0.	41,468.	OTHER	FOOD	SEE PART IV
CHRIST CHAPEL SHARE & CARE MISSION 323 INMAN STREET RINGGOLD, GA 30736	58-0566245 3		0.	105,741.	OTHER	FOOD	SEE PART IV
FANNIN COUNTY FAMILY CONNECTION 101 INDUSTRIAL PARK ROAD BLUE RIDGE, GA 30513	58-2356316 3		0.	217,264.	OTHER	FOOD	SEE PART IV
HOPE HOUSE MINISTRIES OF LAKEVIEW 140 NASON STREET ROSSVILLE, GA 30741	58-0809394 3		0.	3,264.	OTHER	FOOD	SEE PART IV
GILMER COMMUNITY FOOD PANTRY 5273 HWY. 52 E ELLIJAY, GA 30536	58-2599399 3		0.	210,617.	OTHER	FOOD	SEE PART IV
HERE I AM, INC/ THE CARE MISSION 105 NORTH CHATTANOOGA STREET LAFAYETTE, GA 30728	38-3653368 3		0.	193,461.	OTHER	FOOD	SEE PART IV

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... ▶ **689.**

**3** Enter total number of other organizations listed in the line 1 table ..... ▶ **0.**

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

Schedule I (Form 990) 2020

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HELPING HANDS FOOD PANTRY - CHATSWORTH - 4540 US-411 - EATON, GA 30724	27-0887376	3	0.	3,487.	OTHER	FOOD	SEE PART IV
BATTLEFIELD COMMUNITY SDA CHURCH 96 HILLMAN LANE RINGGOLD, GA 30736	52-0643036	3	0.	35,074.	OTHER	FOOD	SEE PART IV
COMMUNITY HOUSING RESOURCE 704 GIST PLACE DALTON, GA 30721	45-4506597	3	0.	43,669.	OTHER	FOOD	SEE PART IV
COMMUNITY RESOURCE CENTER OF CHATTOOGA, - 103 7TH ST - SUMMERVILLE, GA 30747	81-4224565	3	0.	68,170.	OTHER	FOOD	SEE PART IV
SOUL STATION MINISTRIES INC. 3517 CHATTANOOGA ROAD TUNNEL HILL, GA 30755	26-1613552	3	0.	52,245.	OTHER	FOOD	SEE PART IV
PROVIDENCE MINISTRIES 711 SOUTH HAMILTON STREET DALTON, GA 30720	58-1592141	3	0.	23,112.	OTHER	FOOD	SEE PART IV
SALVATION ARMY - DALTON 1109 NORTH THORNTON AVENUE DALTON, GA 30720	58-0660607	3	0.	76,421.	OTHER	FOOD	SEE PART IV
THE SALVATION ARMY-MURRAY FOOD CENTERS - 211 W FORT STREET - CHATSWORTH, GA 30705	58-0660607	3	0.	37,830.	OTHER	FOOD	SEE PART IV
TRI STATE FOOD PANTRY 2026 HWY 136 WEST TRENTON, GA 30752	20-3427202	3	0.	303,171.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VARNELL UNITED METHODIST CHURCH 3485 HWY 2 COHUTTA, GA 30721	64-0920498 3		0.	51,268.	OTHER	FOOD	SEE PART IV
ROCK BRIDGE COMMUNITY CHURCH-MURRAY - 40 BOWTIE BLVD. - CHATSWORTH, GA 30705	01-0592028 3		0.	65,392.	OTHER	FOOD	SEE PART IV
ASHBURY HARRIS EPWORTH TOWERS 3033 CONTINENTAL COLONY PARKWAY SW ATLANTA, GA 30331	58-0909393 3		0.	41,474.	OTHER	FOOD	SEE PART IV
CONCERNED CITIZENS OF ATLANTA, INC. - 3201 M.L.K. JR DR SW - ATLANTA, GA 30311	58-1457907 3		0.	20,187.	OTHER	FOOD	SEE PART IV
AHEPA ONE APARTMENTS 2025 LUDOVIE LANE DECATUR, GA 30033	58-2170955 3		0.	34,828.	OTHER	FOOD	SEE PART IV
FULTON ATLANTA COMMUNITY ACTION AUTHORIT - 1690 CHANTILLY DR. - ATLANTA, GA 30324	58-1926185 3		0.	20,387.	OTHER	FOOD	SEE PART IV
COVINGTON SQUARE 2101 WASHINGTON STREET COVINGTON, GA 30014	58-1354973 3		0.	20,258.	OTHER	FOOD	SEE PART IV
CONYERS HOUSING AUTHORITY 1214 SUMMER CIR NW CONYERS, GA 30012	58-6014209 3		0.	20,093.	OTHER	FOOD	SEE PART IV
CIRCLE OF LOVE INC. 5522 NEW PEACHTREE RD ATLANTA, GA 30341	58-2187664 3		0.	20,637.	OTHER	FOOD	SEE PART IV

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST SENIOR CENTER 7116 PEACHTREE INDUSTRIAL BLVD NORCROSS, GA 30071	58-2187664 3		2,500.	142,385.	OTHER	FOOD	SEE PART IV
DECATUR HOUSING INITIATIVES 1450 COMMERCE DR DECATUR, GA 30030	20-8593714 3		0.	36,614.	OTHER	FOOD	SEE PART IV
FRIENDSHIP TOWER APARTMENTS 35 NORTHSIDE DRIVE SW ATLANTA, GA 30313	58-1324092 3		0.	33,497.	OTHER	FOOD	SEE PART IV
GRIFFIN HOUSING AUTHORITY 518 NINE OATS DR. GRIFFIN, GA 30224	58-6002549 3		0.	23,929.	OTHER	FOOD	SEE PART IV
CHAMBLEE SENIOR RESIDENCES 3381 MALONE DR CHAMBLEE, GA 30341	56-1993872 3		0.	20,146.	OTHER	FOOD	SEE PART IV
MERCY PARK 5124 PEACHTREE RD CHAMBLEE, GA 30341	56-1993872 3		0.	22,155.	OTHER	FOOD	SEE PART IV
REYNOLDSTOWN SENIOR RESIDENCES 695 FIELD ST SE ATLANTA, GA 30316	56-1993872 3		0.	24,586.	OTHER	FOOD	SEE PART IV
ALLEGRE POINT SENIOR RESIDENCES 3391 FLAT SHOALS RD DECATUR, GA 30034	56-1993872 3		0.	19,708.	OTHER	FOOD	SEE PART IV
ADAMSVILLE GREEN SENIOR APARTMENTS 3537 MARTIN LUTHER KING JR DR ATLANTA, GA 30331	56-1993872 3		0.	19,535.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ATRIUM AT COLLEGETOWN 435 JOSEPH E. LOWERY BLVD SE ATLANTA, GA 30310	56-1993872 3		0.	37,440.	OTHER	FOOD	SEE PART IV
RENAISSANCE AT PARK PLACE 240 AMAL DR SW ATLANTA, GA 30315	56-1993872 3		0.	29,339.	OTHER	FOOD	SEE PART IV
MERCY HOUSING/HILLS AT FAIRINGTON 5959 FAIRINGTON RD STONECREST, GA 30038	56-1993872 3		0.	21,116.	OTHER	FOOD	SEE PART IV
PHILIPS TOWER 218 E TRINITY PLACE DECATUR, GA 30030	58-1112549 3		0.	26,717.	OTHER	FOOD	SEE PART IV
ROCKDALE COUNTY SENIOR SERVICES 1240 DOGWOOD DR SW CONYERS, GA 30012	58-6000882 3		0.	29,271.	OTHER	FOOD	SEE PART IV
TRINITY TOWERS 2611 SPRINGDALE RD SW ATLANTA, GA 30315	20-2308665 3		0.	47,814.	OTHER	FOOD	SEE PART IV
ATLANTA HARM REDUCTION COALITION 1233 JOSEPH E BOONE BLVD ATLANTA, GA 30314	58-2227958 3		0.	11,349.	OTHER	FOOD	SEE PART IV
ELLENWOOD OAKS COMMUNITY CHURCH 1234 PANOLA ROAD ELLENWOOD, GA 30294	46-2230569 3		2,500.	55,545.	OTHER	FOOD	SEE PART IV
A HIGHER CALLING, INC. 305A LOUISE LANE GRIFFIN, GA 30223	58-2653789 3		0.	32,829.	OTHER	FOOD	SEE PART IV



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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A HIGHER CALLING, INC. 305 LOUISE LANE GRIFFIN, GA 30223	58-2653789 3		0.	195,124.	OTHER	FOOD	SEE PART IV
A FRIENDS HOUSE 111 HENRY PKWY MCDONOUGH, GA 30253	58-2130097 3		2,500.	1,063.	OTHER	FOOD	SEE PART IV
ABUNDANT LIFE ASSEMBLY OF GOD 751 DEAN PATRICK RD. LOCUST GROVE, GA 30248	44-0577787 3		0.	43,645.	OTHER	FOOD	SEE PART IV
AREA IN NEED MISSIONARY HOUSE INC. 681 HWY 138 SW RIVERDALE, GA 30274	47-5342177 3		0.	66,303.	OTHER	FOOD	SEE PART IV
ADAIR PARK NEIGHBORHOOD RESOURCE CENTER - 719 PEARCE ST. SW - ATLANTA, GA 30310	90-0130275 3		0.	18,928.	OTHER	FOOD	SEE PART IV
ADAIRSVILLE-N. BARTOW COMM. SERVICES - 2397 HALL STATION ROAD - ADAIRSVILLE, GA 30103	58-1735316 3		0.	177,470.	OTHER	FOOD	SEE PART IV
ALLATOONA RESOURCE CENTER 6503 GLADE RD. ACWORTH, GA 30102	47-5563205 3		0.	40,552.	OTHER	FOOD	SEE PART IV
ATLANTA CONSULTANTS AFTERCARE 2240 SPRINGDALE RD ATLANTA, GA 30315	58-2423052 3		0.	8,096.	OTHER	FOOD	SEE PART IV
ANTIOCH URBAN MINISTRIES, INC. 540 CM ALEXANDER BLVD. NW ATLANTA, GA 30318	58-1972467 3		20,500.	3,075,912.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANTIOCH AME CHURCH-RUBY HOKE WMS 4730 ELAM RD STONE MOUNTAIN, GA 30083	58-6111749 3		0.	1,090,873.	OTHER	FOOD	SEE PART IV
THE ABBA HOUSE 4590 ARBOR WALK COURT STONE MOUNTAIN, GA 30083	06-1673042 3		0.	22,541.	OTHER	FOOD	SEE PART IV
THE ABBA HOUSE - ROWLAND ROAD 730 ROWLAND ROAD STONE MOUNTAIN, GA 30083	06-1673042 3		0.	12,010.	OTHER	FOOD	SEE PART IV
ANDREWS CHAPEL UNITED METHODIST CHURCH - 122 WATTERSON STREET - JONESBORO, GA 30236	58-1274243 3		0.	82,111.	OTHER	FOOD	SEE PART IV
NEW CITY CHURCH FAIRBURN-CITY BRIDGES FO - 3355 OLD JONESBORO ROAD - FAIRBURN, GA 30213	58-1337931 3		0.	756,034.	OTHER	FOOD	SEE PART IV
NEW CITY CHURCH PEACHTREE-CITY BRIDGES F - 320 DIVIDEND DR - PEACHTREE CITY, GA 30269	58-1337931 3		0.	157,527.	OTHER	FOOD	SEE PART IV
ABUNDANT LIFE SOUP KITCHEN-ST.GEORGE EPI - 132 WEST CHERRY STREET - GRIFFIN, GA 30224	59-3762964 3		0.	8,979.	OTHER	FOOD	SEE PART IV
THE KING'S WAY BAPT CHURCH DBA ATLANTA C - 316 PETERS ST. - ATLANTA, GA 30313	58-1175609 3		0.	116,017.	OTHER	FOOD	SEE PART IV
ATLANTA GENERAL EDUCATION CENTER INC. - 2211 BEAVER RUIN RD - NORCROSS, GA 30071	06-1692099 3		0.	76,366.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ATLANTA UNION MISSION-MEN-SHEPHERD'S INN - 156 MILLS STREET - ATLANTA, GA 30313	58-0572430	3	0.	93,532.	OTHER	FOOD	SEE PART IV
ATLANTA UNION MISSION-MY SISTER'S HOUSE - 921 HOWELL MILL RD. - ATLANTA, GA 30318	58-0572430	3	0.	34,024.	OTHER	FOOD	SEE PART IV
ATLANTA INTERNATIONAL CHRISTIAN PRAISE C - 3480 GREENBRIAR PKWY - ATLANTA, GA 30331	58-2615334	3	0.	13,737.	OTHER	FOOD	SEE PART IV
ALYSSA AND BROTHERS, INC.-ROWLEY RESIDEN - 4552 DORSET CIRCLE - DECATUR, GA 30035	41-2095998	3	0.	7,689.	OTHER	FOOD	SEE PART IV
LEAADS FOUNDATION 4554 ANNISTOWN RD SNELLVILLE, GA 30039	83-2702898	3	0.	9,739.	OTHER	FOOD	SEE PART IV
HOPE ATLANTA/ACTION MINISTRIES 4025 WELCOME ALL ROAD, STE 160 EASTPOINT, GA 30349	58-2070427	3	0.	85,397.	OTHER	FOOD	SEE PART IV
ACTION MINISTRIES CARROLLTON 1400 CEDAR ST CARROLLTON, GA 30117	58-2070427	3	0.	476,066.	OTHER	FOOD	SEE PART IV
ACTION MINISTRIES- FEED THE HUNGRY NEWTO - 4025 WELCOME ALL ROAD, STE 160 - EAST POINT, GA 30349	58-2070427	3	0.	46,974.	OTHER	FOOD	SEE PART IV
AMBASSADORS LIFE CENTER INC. 125 ROCK QUARRY RD STOCKBRIDGE, GA 30281	46-1384160	3	30,000.	795,435.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACWORTH UNITED METHODIST CHURCH 4340 COLLINS CIR ACWORTH, GA 30101	58-1540352 3		0.	1,386,197.	OTHER	FOOD	SEE PART IV
BELVEDERE SEVENTH DAY ADVENTIST 3567 COVINGTON HIGHWAY DECATUR, GA 30032	52-0643036 3		0.	77,503.	OTHER	FOOD	SEE PART IV
BIBLE WAY MINISTRIES INTERNATIONAL, INC. - 894 CONSTITUTION RD SE - ATLANTA, GA 30315	13-2942986 3		250.	440,835.	OTHER	FOOD	SEE PART IV
BRIGHT FUTURES, INC. 748 GARY ROAD ATLANTA, GA 30318	43-1988942 3		0.	6,102.	OTHER	FOOD	SEE PART IV
BUFORD FAMILY SDA CHURCH 4042 FRIENDSHIP ROAD BUFORD, GA 30518	58-0692294 3		0.	18,879.	OTHER	FOOD	SEE PART IV
BEREAN OUTREACH MINISTRY 312 HAMILTON E. HOLMES DR NW ATLANTA, GA 30318	82-1426447 3		0.	2,329,644.	OTHER	FOOD	SEE PART IV
BEREAN OUTREACH MINISTRY 312 HAMILTON E. HOLMES DRIVE ATLANTA, GA 30318	82-1426447 3		25,500.	364,064.	OTHER	FOOD	SEE PART IV
BETHEL UMC FOOD CO-OP 245 FAIRVIEW ROAD STOCKBRIDGE, GA 30281	58-1527241 3		0.	67,371.	OTHER	FOOD	SEE PART IV
BEULAH URBAN OUTREACH, INC-COC 2901 WESLEY CHAPEL RD DECATUR, GA 30034	58-2103318 3		0.	341,600.	OTHER	FOOD	SEE PART IV

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

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BEN HILL UNITED METHODIST CHURCH 2099 FAIRBURN ROAD SW ATLANTA, GA 30331	58-2523966 3		2,500.	112,170.	OTHER	FOOD	SEE PART IV
BELMONT BAPTIST CHURCH 3275 IRIS DRIVE SE CONYERS, GA 30013	58-0566245 3		0.	5,027.	OTHER	FOOD	SEE PART IV
CHRIST PLACE CHURCH 3489 ATLANTA HWY FLOWERY BRANCH, GA 30542	58-1529610 3		0.	94,599.	OTHER	FOOD	SEE PART IV
BUTLER ST. CME CHURCH 3120 SOUTH MARTIN STREET EAST POINT, GA 30344	58-1050926 3		0.	33,485.	OTHER	FOOD	SEE PART IV
REAL LIFE CENTER-BRAELINN 975 -74 NORTH TYRONE, GA 30290	58-2410375 3		0.	832,173.	OTHER	FOOD	SEE PART IV
BRIDGING THE GAP 19 1ST. AVE NEWNAN, GA 30263	45-3482143 3		500.	1,243,031.	OTHER	FOOD	SEE PART IV
BLAKE HOUSE 60 WACO SCHOOL RD BREMEN, GA 30110	47-4600795 3		0.	81,052.	OTHER	FOOD	SEE PART IV
BACKPACK BUDDIES OF GEORGIA INC. 96 WERZ INDUSTRIAL BLVD NEWNAN, GA 30263	45-4212164 3		0.	54,892.	OTHER	FOOD	SEE PART IV
BREAD OF LIFE DEVELOPMENT MINISTRIES INC - 2533 STANTON RD SE - CONYERS, GA 30094	20-8369872 3		0.	137,554.	OTHER	FOOD	SEE PART IV

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

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BROTHERHOOD OF THE CROSS AND STAR CENTRA - 345 BLAIR VILLA DR - ATLANTA, GA 30354	20-5143083	3	0.	233,732.	OTHER	FOOD	SEE PART IV
BEAVER RUIN ROAD BAPTIST CHURCH 1200 BEAVER RUIN RD NORCROSS, GA 30093	58-0566245	3	0.	358,130.	OTHER	FOOD	SEE PART IV
THE BRIDGE COMMUNITY COG 2026 BRASELTON HWY BUFORD, GA 30519	20-5908995	3	0.	42,173.	OTHER	FOOD	SEE PART IV
THE BELOVED COMMUNITY DEVELOPMENT CORP - 1113 IRA ST SW, - ATLANTA, GA 30310	82-1653301	3	25,500.	285,050.	OTHER	FOOD	SEE PART IV
BRIARCLIFF OAKS INC. 2982 BRIARCLIFF RD NE ATLANTA, GA 30329	26-3359065	3	0.	106,289.	OTHER	FOOD	SEE PART IV
COLUMBIA DRIVE UNITED METHODIST CHURCH - 2067 COLUMBIA DRIVE - DECATUR, GA 30032	23-7105663	3	0.	83,355.	OTHER	FOOD	SEE PART IV
LIFE TOOLS COMMUNITY DEVELOPMENT CORP. - 9633 HWY 5 - DOUGLASVILLE, GA 30135	27-0070164	3	31,000.	1,136,706.	OTHER	FOOD	SEE PART IV
LIFE TOOLS -MOBILE PANTRY 5357 CHAPEL HILL RD DOUGLASVILLE, GA 30135	27-0070164	3	0.	22,348.	OTHER	FOOD	SEE PART IV
LIFE TOOLS-ATLANTA MOBILE PANTRY 4330 WASHINGTON RD ATLANTA, GA 30344	27-0070164	3	0.	339,445.	OTHER	FOOD	SEE PART IV

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

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LIFE TOOLS - ATLANTA MOBILE 2 4330 WASHINGTON RD ATLANTA, GA 30344	27-0070164 3		0.	27,577.	OTHER	FOOD	SEE PART IV
CITY OF HOPE COMMUNITY DEVELOPMENT 182 HUNTER STREET NORCROSS, GA 30071	31-1683907 3		0.	26,369.	OTHER	FOOD	SEE PART IV
CHRISTIAN OUTREACH EVANGELISTIC CHURCH - 6120 HIGHWAY 85 - RIVERDALE, GA 30274	58-2066273 3		0.	40,210.	OTHER	FOOD	SEE PART IV
CASCADE UNITED METHODIST CHURCH 3144 CASCADE ROAD SW ATLANTA, GA 30311	58-6002416 3		0.	241,087.	OTHER	FOOD	SEE PART IV
COMMUNITY ALERT INC.-JOSEPH STORE HOUSE - 6788 ROCKBRIDGE ROAD - STONE MOUNTAIN, GA 30087	58-2159104 3		0.	73,941.	OTHER	FOOD	SEE PART IV
CARING FOR OTHERS INC 3537 BROWNS MILL ROAD SUITE 2 ATLANTA, GA 30354	16-1622195 3		0.	1,096,301.	OTHER	FOOD	SEE PART IV
VISION 21 CONCEPTS INC. 12591 VETERANS MEMORIAL DOUGLASVILLE, GA 30134	36-4579342 3		0.	23,207.	OTHER	FOOD	SEE PART IV
CARROLL COUNTY SOUP KITCHEN 345 BEULAH CHURCH ROAD CARROLLTON, GA 30117	58-2194611 3		0.	518,065.	OTHER	FOOD	SEE PART IV
CONYERS SEVENTH DAY ADVENTIST CHURCH - 3001 OLD SALEM ROAD SE - CONYERS, GA 30013	52-0643036 3		2,500.	439,145.	OTHER	FOOD	SEE PART IV

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MORGAN MADISON THE CARING PLACE 1140 MONTICELLO ROAD SUITE 400 MADISON, GA 30650	16-1782014 3		0.	196,200.	OTHER	FOOD	SEE PART IV
CROSS POINTE THE CHURCH AT GWINNETT CTR - 1800 SATELLITE BLVD. - DULUTH, GA 30097	62-0535346 3		35,000.	1,126,945.	OTHER	FOOD	SEE PART IV
COMMUNITY HELPING PLACE INC 1127 GEORGIA 52 DAHLONEGA, GA 30533	37-1554432 3		0.	268,794.	OTHER	FOOD	SEE PART IV
CONTRIBUTE 2AMERICA FOOD COOPERATIVE - 1366 N DRUID HILLS RD. - ATLANTA, GA 30319	30-0523998 3		0.	14,394.	OTHER	FOOD	SEE PART IV
COLLINS FOOD PANTRY INC 2220 BOLTON ROAD ATLANTA, GA 30318	85-0738677 3		0.	1,552,774.	OTHER	FOOD	SEE PART IV
ATLANTA INNER- CITY MINISTRY INC 1966 LAKEWOOD TERRACE, SE ATLANTA, GA 30315	74-3101988 3		0.	42,421.	OTHER	FOOD	SEE PART IV
CUMMING FIRST UNITED METHODIST CHURCH - 770 CANTON HIGHWAY - CUMMING, GA 30040	58-1172867 3		0.	53,967.	OTHER	FOOD	SEE PART IV
COMMUNITY FOOD PANTRY 615 OAK STREET GAINESVILLE, GA 30501	38-3828815 3		0.	10,178.	OTHER	FOOD	SEE PART IV
CREATE YOUR DREAMS 887 WEST MARIETTA ST NW ATLANTA, GA 30318	58-2133252 3		0.	9,038.	OTHER	FOOD	SEE PART IV

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CARTERSVILLE CHURCH OF GOD- CH. AT LIBE - 2001 LIBERTY SQUARE DR NE - CARTERSVILLE, GA 30121	62-0484177 3		28,000.	260,956.	OTHER	FOOD	SEE PART IV
CHRIS 180 1976 FLATSHOALS RD ATLANTA, GA 30316	58-1430183 3		0.	546,970.	OTHER	FOOD	SEE PART IV
COMMUNITY SUPPORT SERVICES INC. 2967 METROPOLITAN PARKWAY ATLANTA, GA 30015	45-4475513 3		0.	20,705.	OTHER	FOOD	SEE PART IV
CHOSEN VESSELS OF GOD MINISTRIES 193 S. MARIETTA PKWY SW MARIETTA, GA 30064	36-4573463 3		0.	56,943.	OTHER	FOOD	SEE PART IV
CASA VIDA, INC. 2020 LAWRENCEVILLE-SUWANEE RD SUWANEE, GA 30024	27-2663761 3		0.	111,850.	OTHER	FOOD	SEE PART IV
CITY ON A HILL 1645 DAHLONEGA HIGHWAY CUMMING, GA 30040	58-1796434 3		0.	91,639.	OTHER	FOOD	SEE PART IV
CHURCH OF THE ASCENSION FOOD PANTRY - 201 WEST CHEROKEE AVE - CARTERSVILLE, GA 30120	58-0572411 3		500.	230,107.	OTHER	FOOD	SEE PART IV
CENTER HELPING OBESITY IN CHILDREN END S - 125 ELLIS ST NE - ATLANTA, GA 30303	01-0693398 3		0.	170,832.	OTHER	FOOD	SEE PART IV
CEDARTOWN SDA-GOOD NEIGHBOR CENTER 71 WOODALL ROAD CEDARTOWN, GA 30125	52-0643036 3		0.	94,857.	OTHER	FOOD	SEE PART IV

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THE CHURCH OF GOD FOR ALL NATIONS 2295 BOULDERCREST ROAD SE ATLANTA, GA 30316	30-0224295 3		0.	209,488.	OTHER	FOOD	SEE PART IV
CENTRAL SPANISH SDA 5241 ASH STREET FOREST PARK, GA 30297	58-6002263 3		0.	121,894.	OTHER	FOOD	SEE PART IV
CENTRAL UNITED METHODIST CHURCH 501 MARTIN LUTHER KING JR DR SW ATLANTA, GA 30314	58-1090751 3		0.	57,848.	OTHER	FOOD	SEE PART IV
ODYSSEY III- COMMUNITY CONCERNS 276 DECATUR ST. ATLANTA, GA 30312	58-1811114 3		0.	1,453.	OTHER	FOOD	SEE PART IV
CEDAR LAKE CHRISTIAN CENTER 1890 ROME HWY CEDARTOWN, GA 30125	58-1471421 3		0.	82,513.	OTHER	FOOD	SEE PART IV
CHRISTIAN CITY HOME FOR CHILDREN 7501 RED OAK RD UNION CITY, GA 30291	58-1880688 3		0.	7,807.	OTHER	FOOD	SEE PART IV
CLARKSTON COMMUNITY CENTER FOOD PANTRY - 3701 COLLEGE AVENUE - CLARKSTON, GA 30021	58-2127610 3		0.	2,073.	OTHER	FOOD	SEE PART IV
COVINGTON FIRST UMC 1113 CONYERS ST SW COVINGTON, GA 30014	58-0673184 3		0.	1,211,484.	OTHER	FOOD	SEE PART IV
CHATTANOOGA AREA FOOD BANK-NW GEORGIA BR - 1111 S. HAMILTON - DALTON, GA 30702	62-0867645 3		0.	41,316.	OTHER	FOOD	SEE PART IV

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COVENANT CONNECTIONS CHURCH 5818 ATLANTA HIGHWAY FLOWERY BRANCH, GA 30542	26-4586705 3		0.	80,148.	OTHER	FOOD	SEE PART IV
CLIFTON SANCTUARY MINISTRIES, INC. 369 CONNECTICUT AVE NE ATLANTA, GA 30307	58-2398005 3		0.	855.	OTHER	FOOD	SEE PART IV
CITY OF REFUGE, INC. 180 KITCHEN 1300 JOSEPH E. BOONE BLVD ATLANTA, GA 30318	58-2194642 3		0.	8,635.	OTHER	FOOD	SEE PART IV
CLAYTON COUNTY COMMUNITY SERVICES 1000 MAIN ST, FOREST PARK, GA 30297	58-0965193 3		0.	30,008.	OTHER	FOOD	SEE PART IV
CENTER FOR PAN-ASIAN COMMUNITY SERVICES - 3510 SHALLOWFORD ROAD NE - ATLANTA, GA 30341	58-1437980 3		0.	42,491.	OTHER	FOOD	SEE PART IV
SWEETWATER MISSION INC 6130 HOTEL STREET AUSTELL, GA 30168	58-1992771 3		0.	2,258,988.	OTHER	FOOD	SEE PART IV
COMMUNITY ASSISTANCE CENTER 8607 ROSWELL ROAD SANDY SPRINGS, GA 30350	58-1825565 3		0.	665,486.	OTHER	FOOD	SEE PART IV
COMMUNITY CHURCH OF GOD 850 CASCADE AVENUE SW ATLANTA, GA 30311	58-0959940 3		32,000.	8,391.	OTHER	FOOD	SEE PART IV
COMMUNITY FRIENDSHIP - O'HEARN HOUSE - 16 WILLIAM HOLMES BORDERS DR. - ATLANTA, GA 30312	58-1408716 3		0.	242,241.	OTHER	FOOD	SEE PART IV

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NEWTON COUNTY COMMUNITY FOOD PANTRY, INC - 7125 TURNER LAKE CIRCLE SW - COVINGTON, GA 30014	46-3559120	3	28,000.	30,082.	OTHER	FOOD	SEE PART IV
CHAMPIONS CHRISTIAN ACADEMY 1125 SOUTH HAIRSTON ROAD STONE MOUNTAIN, GA 30088	46-4941981	3	0.	7,811.	OTHER	FOOD	SEE PART IV
CHURCH OF THE HOLY CROSS 3175 HATHAWAY COURT ATLANTA, GA 30341	53-0196617	3	0.	338,452.	OTHER	FOOD	SEE PART IV
ENOUGH TO SHARE 560 FAYETTEVILLE RD SE ATLANTA, GA 30316	81-2970193	3	0.	180,418.	OTHER	FOOD	SEE PART IV
CLARKSTON FIRST BAPT.-FOOD PROGRAM 3983 CHURCH STREET CLARKSTON, GA 30021	58-1552679	3	0.	4,307.	OTHER	FOOD	SEE PART IV
CEDARTOWN UNITED FUND INC. 445 S. COLLEGE ST CEDARTOWN, GA 30125	58-0566153	3	250.	39,314.	OTHER	FOOD	SEE PART IV
COMMUNITY CHRISTIAN COUNCIL 734 BOWDON ST TALLAPOOSA, GA 30176	81-4159696	3	15,500.	571,436.	OTHER	FOOD	SEE PART IV
ROCKDALE COUNTY EMERGENCY RELIEF FUND, I - 350 TALL OAKS DRIVE - CONYERS, GA 30013	51-0195410	3	2,500.	65,269.	OTHER	FOOD	SEE PART IV
COMMUNITY OUTREACH IN ACTION, INC. 7681 SOUTHLAKE PARKWAY JONESBORO, GA 30236	45-5578239	3	0.	327,020.	OTHER	FOOD	SEE PART IV

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CARRIE STEELE-PITTS HOME, INC. 667 FAIRBURN ROAD, NW ATLANTA, GA 30331	58-0607078 3		0.	6,901.	OTHER	FOOD	SEE PART IV
CHRIST FIRST COMUNITY CHURCH 4576 LENORA CHURCH RD SNELLVILLE, GA 30039	58-0566245 3		3,500.	1,449,781.	OTHER	FOOD	SEE PART IV
CHRIST FIRST COMUNITY CHURCH-MFP @WOODS - 5665 OLD NATIONAL HIGHWAY - COLLEGE PARK, GA 30349	58-0566245 3		0.	19,657.	OTHER	FOOD	SEE PART IV
CHRIST FELLOWSHIP CHURCH OF DAWSON INC - 139 HIGHTOWER PKWY SUITE 100 - DAWSONVILLE, GA 30534	58-2081401 3		0.	494,222.	OTHER	FOOD	SEE PART IV
COVENANT HOUSE GEORGIA 1559 JOHNSON RD. NW ATLANTA, GA 30318	13-3523561 3		0.	10,621.	OTHER	FOOD	SEE PART IV
CLAIRMONT OAKS 441 CLAIREMONT AVENUE, DECATUR, GA 30030	23-7336582 3		0.	22,452.	OTHER	FOOD	SEE PART IV
CREEKSIDE UNITED METHODIST CHURCH 673 PEACHTREE PARKWAY CUMMING, GA 30041	58-2241483 3		0.	1,295.	OTHER	FOOD	SEE PART IV
CORNERSTONE COMMUNITY BAPTIST CHURCH - 4895 CAMPBELLTON ROAD, SW - ATLANTA, GA 30331	76-0826794 3		0.	33,136.	OTHER	FOOD	SEE PART IV
CONGREGATION B'NAI TORAH-BACK PACK PROGR - 700 MOUNT VERNON HWY - ATLANTA, GA 30328	58-1419696 3		0.	542,035.	OTHER	FOOD	SEE PART IV

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CHIEF CORNERSTONE COMMUNITY CHURCH 2900 SALEM RD SE CONYERS, GA 30013	46-2744405 3		2,500.	44,159.	OTHER	FOOD	SEE PART IV
CROSSROAD CHRISTIAN CHURCH INC. 3545 N HENRY BLVD STOCKBRIDGE, GA 30281	27-2994803 3		0.	152,538.	OTHER	FOOD	SEE PART IV
HELPING HANDS PANTRY INC. 334 CARVER ROAD GRIFFIN, GA 30224	46-5376613 3		0.	14,566.	OTHER	FOOD	SEE PART IV
LIFE TOOLS MOBILE PANTRY AT MARVELOUS LI - 2160 LEE ROAD - LITHIA SPRINGS, GA 30122	27-0070164 3		0.	177,599.	OTHER	FOOD	SEE PART IV
LIFE TOOLS -DOUGLAS HS MOBILE PANTRY - 8705 CAMPBELLTON STREET - DOUGLASVILLE, GA 30154	27-0070164 3		0.	57,839.	OTHER	FOOD	SEE PART IV
LIFE TOOLS MOBILE PANTRY AT CHAPEL HILL - 5357 CHAPEL HILL ROAD - DOUGLASVILLE, GA 30135	27-0070164 3		0.	88,070.	OTHER	FOOD	SEE PART IV
CROSSROADS BAPTIST CHURCH OF NEWNAN, INC - 2564 154 - NEWNAN, GA 30263	58-1926575 3		0.	1,168.	OTHER	FOOD	SEE PART IV
DEEPER LIFE CHRISTIAN CENTER 1860 HIGHWAY 113 CARROLLTON, GA 30117	58-2357227 3		0.	203,408.	OTHER	FOOD	SEE PART IV
DOROTHY'S HELPING HANDS INC 2685 BARGE RD ATLANTA, GA 30331	46-3888339 3		0.	161,212.	OTHER	FOOD	SEE PART IV

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CHURCH OF GOD OF PROPHECY--DECATUR 3333 COVINGTON DRIVE DECATUR, GA 30032	58-1795989 3		0.	550,801.	OTHER	FOOD	SEE PART IV
DECATUR COOP MINISTRY-FOOD CO OP #1 - 1523 CHURCH ST - DECATUR, GA 30030	58-1082247 3		0.	48,521.	OTHER	FOOD	SEE PART IV
DECATUR EMERGENCY ASSISTANCE MINISTRY - 515 E. PONCE DE LEON AVENUE - DECATUR, GA 30030	58-1549537 3		2,500.	45,606.	OTHER	FOOD	SEE PART IV
DECATUR SEVENTH DAY ADVENTIST CHURCH - 2365 CANDLER RD. - DECATUR, GA 30032	58-6002263 3		0.	84,701.	OTHER	FOOD	SEE PART IV
DEVELOPMENTAL DISABILITIES MINISTRIES, I - 6320 AMHERST COURT - NORCROSS, GA 30092	58-2469479 3		0.	7,252.	OTHER	FOOD	SEE PART IV
DIVINE FAITH MINISTRIES, INC.-JOSEPH'S W - 9800 TARA BLVD. - JONESBORO, GA 30238	58-1915166 3		0.	107,598.	OTHER	FOOD	SEE PART IV
DIVINE FAITH MINISTRIES, INC. - SUWANEE - 4169 SILVER PEAK PARKWAY - SUWANEE, GA 30024	58-1915166 3		0.	16,615.	OTHER	FOOD	SEE PART IV
NEW LIFE CHURCH OF GOD - BACKPACK BUDDIE - 1508 HWY 53 E - DAWSONVILLE, GA 30534	58-1593323 3		0.	30,924.	OTHER	FOOD	SEE PART IV
DAMASCUS ROAD RECOVERY, INC. 270 ELKS CLUB RD. COVINGTON, GA 30015	42-1560164 3		0.	168,506.	OTHER	FOOD	SEE PART IV

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DREAMS COME TRUE INTERNATIONAL 8206 DURALEE LANE DOUGLASVILLE, GA 30134	81-1644998 3		0.	173,496.	OTHER	FOOD	SEE PART IV
DECATUR ALL NATIONS COMMUNITY CHURCH - 3840 KENSINGTON RD. - DECATUR, GA 30032	58-6068437 3		0.	234,028.	OTHER	FOOD	SEE PART IV
DREAMS COME TRUE INTERNATIONAL FOUNDATIO - 193 S. MARIETTA PKWY - MARIETTA, GA 30060	81-1644998 3		0.	139,394.	OTHER	FOOD	SEE PART IV
DELIVERANCE TABERNACLE OF PRAISE INC. - 8631 KENDRICK RD - JONESBORO, GA 30238	01-0566773 3		0.	57,641.	OTHER	FOOD	SEE PART IV
CROSSROADS CHURCH 5960 STEWART PARKWAY DOUGLASVILLE, GA 30135	58-2650475 3		0.	187,981.	OTHER	FOOD	SEE PART IV
CROSSROADS CHURCH- UPPER ELEM MOBILE PAN - 1621 BANKHEAD HWY - CARROLLTON, GA 30116	58-2650475 3		0.	183,229.	OTHER	FOOD	SEE PART IV
DULUTH COOPERATIVE MINISTRY, INC. 3395 FOX ST NW. DULUTH, GA 30096	58-2061640 3		0.	91,275.	OTHER	FOOD	SEE PART IV
EAST ATLANTA KIDS CLUB 602 BROWNWOOD AVENUE SE ATLANTA, GA 30316	91-2130691 3		0.	135,116.	OTHER	FOOD	SEE PART IV
EBENEZER BAPTIST CHURCH 407 AUBURN AVENUE ATLANTA, GA 30312	58-0836255 3		2,500.	183,062.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)



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EMBRY HILLS UMC - SNAX SAX FOR KIDS - 3304 HENDERSON MILL ROAD - CHAMBLEE, GA 30341	36-2167731 3		0.	3,160.	OTHER	FOOD	SEE PART IV
EAST GRIFFIN BAPTIST CHURCH 999 HIGH FALLS ROAD GRIFFIN, GA 30223	58-0566245 3		25,000.	55,882.	OTHER	FOOD	SEE PART IV
EMMAUS HOUSE 1017 HANK AARON DRIVE ATLANTA, GA 30315	58-0572411 3		25,000.	151,052.	OTHER	FOOD	SEE PART IV
EPISCOPAL CHURCH OF THE HOLY CROSS 2005 S. COLUMBIA PLACE DECATUR, GA 30032	58-0572411 3		0.	93,624.	OTHER	FOOD	SEE PART IV
CARES, INC. 89 CARES DRIVE JASPER, GA 30143	20-1056579 3		500.	752,508.	OTHER	FOOD	SEE PART IV
EMMA'S PLACE INC. 1651 PHOENIX BLVD. COLLEGE PARK, GA 30349	81-2704613 3		0.	434,250.	OTHER	FOOD	SEE PART IV
END SLAVERY GEORGIA INC., JOURNEY FOOD B - 15 REDMOND CT NW - ROME, GA 30165	81-1224055 3		2,500.	247,711.	OTHER	FOOD	SEE PART IV
EL GRAN TESTIMONIO DE DIO 4340 N HENRY BLVD STOCKBRIDGE, GA 30281	45-5058279 3		0.	185,310.	OTHER	FOOD	SEE PART IV
EMMANUEL COMMUNITY CHURCH 1400 HWY 212 CONYERS, GA 30094	58-0566245 3		2,500.	553,361.	OTHER	FOOD	SEE PART IV

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

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FOOD SECURITY FOR AMERICA - WALTON RESER - 1500 WALTON RESERVE BLVD - AUSTELL, GA 30168	30-0720156	3	0.	89,689.	OTHER	FOOD	SEE PART IV
FOOD SECURITY FOR AMERICA - WALTON VILLA - 1570 ROBERTA DRIVE, SW - MARIETTA, GA 30008	30-0720156	3	0.	74,964.	OTHER	FOOD	SEE PART IV
FOOD SECURITY FOR AMERICA - WALTON LEGAC - 1570 ROBERTA DRIVE SW - MARIETTA, GA 30008	30-0720156	3	0.	74,451.	OTHER	FOOD	SEE PART IV
FOOD SECURITY FOR AMERICA - WALTON RIDEN - 1425 RIDENOUR BOULEVARD - KENNESAW, GA 30152	30-0720156	3	0.	46,275.	OTHER	FOOD	SEE PART IV
FOOD SECURITY FOR AMERICA - WALTON CROSS - 1820 MULKEY ROAD - AUSTELL, GA 30106	30-0720156	3	0.	43,728.	OTHER	FOOD	SEE PART IV
FOOD SECURITY FOR AMERICA- PAWKIDS 1643 DONALD LEE HOLLOWELL PKWY NW ATLANTA, GA 30318	30-0720156	3	0.	43,205.	OTHER	FOOD	SEE PART IV
FAVOR HOUSE INC. 1926 JOHN CALVIN AVE COLLEGE PARK, GA 30337	56-2554334	3	2,500.	147,287.	OTHER	FOOD	SEE PART IV
FREEDOM COMMUNITY MINISTRIES INC. 6928 COMMERCIAL DR MORROW, GA 30260	45-2218718	3	0.	1,829.	OTHER	FOOD	SEE PART IV
FAITH UNITED METHODIST CHURCH 501 GRASSDALE ROAD CARTERSVILLE, GA 30121	25-1673723	3	0.	148,814.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

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FIRST AFRICAN CDC-BIG MILLER 3800 BIG MILLER GROVE WAY LITHONIA, GA 30038	58-2645073 3		0.	2,498,165.	OTHER	FOOD	SEE PART IV
FIRST AFRICAN CDC-BEREAN CHRISTIAN CHURC - 2201 YOUNG RD - STONE MOUNTAIN, GA 30088	58-2645073 3		0.	1,539,268.	OTHER	FOOD	SEE PART IV
FIRST AFRICAN CDC-NEW PINEY GROVE 2580 SNAPPFINGER ROAD DECATUR, GA 30034	58-2645073 3		0.	260,808.	OTHER	FOOD	SEE PART IV
FAMILY LIFE MINISTRIES 612 COLLEGE ST HAPEVILLE, GA 30354	58-1495252 3		0.	27,716.	OTHER	FOOD	SEE PART IV
FIVE LOAVES AND TWO FISH PANTRY 412 WEST SLATON AVE GRIFFIN, GA 30223	27-3276308 3		0.	365,896.	OTHER	FOOD	SEE PART IV
AGE WELL FORSYTH 595 DAHLONEGA STREET CUMMING, GA 30040	20-8235119 3		0.	39,777.	OTHER	FOOD	SEE PART IV
FAITH DELIVERANCE CHRISTIAN CHURCH 2018 LAKE HARBIN RD MORROW, GA 30260	31-1710727 3		0.	20,395.	OTHER	FOOD	SEE PART IV
FIRST ST. PETER AME CHURCH 1074 S. INDIAN CREEK DRIVE STONE MOUNTAIN, GA 30083	58-2479285 3		0.	30,421.	OTHER	FOOD	SEE PART IV
FIRST BAPTIST CHURCH NEWNAN 70 MADISON STREET NEWNAN, GA 30263	58-1867510 3		0.	284,712.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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FIRST CHRISTIAN CHURCH OF MARIETTA 569 FRASIER ST. SE MARIETTA, GA 30060	58-6120485 3		0.	207,440.	OTHER	FOOD	SEE PART IV
FIRST DAY OUTREACH RESOURCE CENTER INC. - 696 BREEDLOVE DRIVE SUITE D - MONROE, GA 30655	81-2432281 3		2,500.	331,536.	OTHER	FOOD	SEE PART IV
FIRST BAPTIST CHURCH OF FAIRBURN 23 MALONE STREET, SE FAIRBURN, GA 30213	58-0632078 3		2,500.	164,645.	OTHER	FOOD	SEE PART IV
FIRST ST. PAUL AME CHURCH 2699 KLONDIKE ROAD LITHONIA, GA 30058	32-0298340 3		0.	127,813.	OTHER	FOOD	SEE PART IV
FLIPPER TEMPLE AME CHURCH 580 ATLANTA STUDENT MOVEMENT BLVD ATLANTA, GA 30314	58-1406162 3		0.	97,346.	OTHER	FOOD	SEE PART IV
FLAT SHOALS UNITED METHODIST CHURCH - 2400 FLAT SHOALS RD. - DECATUR, GA 30032	36-2167731 3		0.	201,615.	OTHER	FOOD	SEE PART IV
FORT STREET UNITED METHODIST CHURCH - 562 BOULEVARD NE - ATLANTA, GA 30308	58-1274243 3		0.	4,659.	OTHER	FOOD	SEE PART IV
FIRST BAPTIST- FOREST PARK 634 MAIN STREET FOREST PARK, GA 30297	58-0655358 3		0.	36,246.	OTHER	FOOD	SEE PART IV
REACH COMMUNITY DEVELOPMENT CENTER INC - 6212 MEMORIAL DRIVE - STONE MOUNTAIN, GA 30083	41-2189470 3		0.	139,775.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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FOR HIS BROTHERS FOOD PANTRY 1600 CONLEY ROAD CONLEY, GA 30288	46-5588540	3	0.	15,112.	OTHER	FOOD	SEE PART IV
FULLERVILLE MISSION LTD 531 ROCKMART ROAD VILLA RICA, GA 30180	58-2396774	3	0.	17,026.	OTHER	FOOD	SEE PART IV
FAMILY LIFE RESTORATION CENTER INC. - 6105 MABLETON PARKWAY - MABLETON, GA 30126	75-2995341	3	0.	333,802.	OTHER	FOOD	SEE PART IV
FAMILY CHOICES, INC. 6345 QUEENS ROAD DOUGLASVILLE, GA 30135	27-0042244	3	0.	4,558.	OTHER	FOOD	SEE PART IV
FIRST BAPTIST CHURCH OF BLAIRSVILLE - 296 BLUERIDGE STREET - BLAIRSVILLE, GA 30514	58-0566245	3	0.	43,140.	OTHER	FOOD	SEE PART IV
FRANKLIN HOUSING & REDEVELOPMENT INC. - 1191 FRANKLIN PARKWAY - FRANKLIN, GA 30217	58-2649691	3	0.	62,528.	OTHER	FOOD	SEE PART IV
FEEDING FAMILIES 2514 WEST POINT AVE ATLANTA, GA 30337	81-4028052	3	27,500.	435,056.	OTHER	FOOD	SEE PART IV
FRIENDSHIP BAPTIST CHURCH OF DULUTH INC. - 3375 CHURCH LANE - DULUTH, GA 30096	58-2382808	3	0.	632,588.	OTHER	FOOD	SEE PART IV
FIRST UNITED METHODIST CHURCH OF MARIETT - 56 WHITLOCK AVE NW - MARIETTA, GA 30064	58-0603143	3	0.	65,302.	OTHER	FOOD	SEE PART IV

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FAMILIES ADVOCATING FOR VOICES OF RESILI - 798 RAYS RD, SUITE 94 - STONE MOUNTAIN, GA 30083	27-3304380 3		2,500.	204,938.	OTHER	FOOD	SEE PART IV
FIRST BAPTIST CHURCH OF VILLA RICA 1483 W. HIGHWAY 78 VILLA RICA, GA 30180	58-0669987 3		0.	22,789.	OTHER	FOOD	SEE PART IV
FRIENDSHIP BAPTIST CHURCH 194 POPLAR ROAD NEWNAN, GA 30263	26-2700619 3		0.	371,577.	OTHER	FOOD	SEE PART IV
FAITH IN SERVING HUMANITY 700 S. MADISON AVENUE MONROE, GA 30655	58-2113889 3		0.	2,475,522.	OTHER	FOOD	SEE PART IV
FAMILY SUPPORT CIRCLE 109 SOUTH LEE ST STOCKBRIDGE, GA 30281	23-3077910 3		0.	111,061.	OTHER	FOOD	SEE PART IV
FEEDING FAMILIES WEST GEORGIA 102 DIXIE ST CARROLLTON, GA 30117	85-0670704 3		0.	21,805.	OTHER	FOOD	SEE PART IV
FRANCIS BONGAY MINISTRY 4764 HAMMERMILL ROAD, SUITE B TUCKER, GA 30084	82-4240710 3		0.	26,402.	OTHER	FOOD	SEE PART IV
FOREVER FED, INC. 4474 TOWNE LAKE PARKWAY WOODSTOCK, GA 30189	27-3437899 3		0.	1,421,149.	OTHER	FOOD	SEE PART IV
FIRST AFRICAN CDC-MOBILE PANTRY 3800 BIG MILLER GROVE WAY LITHONIA, GA 30038	58-2645073 3		0.	754,435.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

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GOD'S FAITH PAVILION DELIVERANCE MIN INC - 2230 LITHONIA INDUSTRIAL BLVD - LITHONIA, GA 30058	65-1191392 3		0.	46,260.	OTHER	FOOD	SEE PART IV
GOLDEN BRIDGES FOOD PANTRY 1175 GREEN ST SE CONYERS, GA 30012	84-5046881 3		0.	24,048.	OTHER	FOOD	SEE PART IV
GOOD SAMARITAN CENTER OF DOUGLAS COUNTY - 8366 GRADY ST - DOUGLASVILLE, GA 30134	58-1516735 3		39,000.	2,294,990.	OTHER	FOOD	SEE PART IV
GREATER WORKS MISS. BAPTIST CHURCH 285 MORROW ROAD FOREST PARK, GA 30297	20-4972593 3		0.	41,294.	OTHER	FOOD	SEE PART IV
GATEWAY CENTER 275 PRYOR ST SW ATLANTA, GA 30303	26-1193832 3		0.	296,667.	OTHER	FOOD	SEE PART IV
EVOLUTION CENTER 1135 JEFFERSON ST NW ATLANTA, GA 30318	26-1193832 3		0.	2,818.	OTHER	FOOD	SEE PART IV
GREATER FELLOWSHIP OUTREACH & DEVELOPME - 3075 RAINBOW CIR. - DECATUR, GA 30034	16-1624453 3		0.	147,719.	OTHER	FOOD	SEE PART IV
GLENLOCH BAPTIST CHURCH 2807 GLENLOCH ROAD FRANKLIN, GA 30217	47-2383634 3		28,000.	135,775.	OTHER	FOOD	SEE PART IV
URBAN RECIPE- CO-OP #1 970 JEFFERSON STREET NW ATLANTA, GA 30318	27-0000606 3		0.	462,307.	OTHER	FOOD	SEE PART IV

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

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URBAN RECIPE - CO-OP #2 970 JEFFERSON ST NW ATLANTA, GA 30318	27-0000606	3	0.	237,391.	OTHER	FOOD	SEE PART IV
GEORGIA AVENUE CO-OP - JONESBORO ROAD - 1297 JONESBORO ROAD - ATLANTA, GA 30315	27-0000606	3	0.	94,985.	OTHER	FOOD	SEE PART IV
URBAN RECIPE-GIDEONS 897 WELCH STREET, SW ATLANTA, GA 30310	27-0000606	3	0.	101,561.	OTHER	FOOD	SEE PART IV
URBAN RECIPE-LAKE FOREST 5920 SANDY SPRINGS CIRCLE SANDY SPRINGS, GA 30328	27-0000606	3	0.	114,968.	OTHER	FOOD	SEE PART IV
URBAN RECIPE-BRADFORD APARTMENTS 100 CASTOR DRIVE NORCROSS, GA 30071	27-0000606	3	0.	43,069.	OTHER	FOOD	SEE PART IV
URBAN RECIPE-CLIFTON GLEN 640 ABBERLEY WAY STONE MOUNTAIN, GA 30086	27-0000606	3	0.	35,800.	OTHER	FOOD	SEE PART IV
GRACE COMMUNITY FELLOWSHIP CHURCH 4215 WENDELL DRIVE / SUITES E & F ATLANTA, GA 30336	58-2489345	3	2,500.	362,444.	OTHER	FOOD	SEE PART IV
MEALS BY GRACE INC 3540 KEITH BRIDGE RD. CUMMING, GA 30041	46-2706835	3	0.	587,538.	OTHER	FOOD	SEE PART IV
GOOD SAMARITAN FOOD BANK 1220 MCEVER ROAD GAINESVILLE, GA 30504	58-6014094	3	0.	1,828,822.	OTHER	FOOD	SEE PART IV

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THE GREATER PINEY GROVE COMMUNITY DEVELO - 1879 GLENWOOD AVENUE - ATLANTA, GA 30316	58-2193247 3		0.	60,038.	OTHER	FOOD	SEE PART IV
AFTER SCHOOL ALL STARS 1 PARK PLACE SOUTH ATLANTA, GA 30303	58-6033185 3		0.	12,113.	OTHER	FOOD	SEE PART IV
GREENFOREST BAPTIST CHURCH 3250 RAINBOW DR. DECATUR, GA 30034	58-2157986 3		0.	171,522.	OTHER	FOOD	SEE PART IV
GREATER COMMUNITY CHURCH OF GOD IN CHRIS - 406 ROSWELL ST NE - MARIETTA, GA 30060	58-2089385 3		0.	38,768.	OTHER	FOOD	SEE PART IV
GOD LIFE AND LIVING H C OF JESUS CHRIST - 3837 LINECREST ROAD - ELLENWOOD, GA 30294	58-2054488 3		0.	19,775.	OTHER	FOOD	SEE PART IV
GREATER ST. STEPHEN MINISTRIES DBA CHAN - 3350 GREENBRIAR PKWY SW - ATLANTA, GA 30331	72-6024232 3		0.	727,050.	OTHER	FOOD	SEE PART IV
G Y MINISTRIES INC. 62 KRANNERT DRIVE ROME, GA 30165	14-1979832 3		0.	133,817.	OTHER	FOOD	SEE PART IV
GATEWAY HOUSE CONFIDENTIAL GAINESVILLE, GA 30506	58-1447674 3		0.	4,468.	OTHER	FOOD	SEE PART IV
THE EDGE CHURCH OF THE NAZARENE DBA SHOP - 3430 E. PONCE DE LEON AVE - SCOTSDALE, GA 30079	47-5170818 3		0.	28,825.	OTHER	FOOD	SEE PART IV

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GREATER ST. PETER CHILDCARE CENTER 9540 FAYETTEVILLE ROAD JONESBORO, GA 30238	53-0204696 3		0.	3,111.	OTHER	FOOD	SEE PART IV
GLORIOUS HANDS OUTREACH MINISTRIES, INC. - 1094 GARIBALDI ST - ATLANTA, GA 30310	81-5341285 3		0.	670,316.	OTHER	FOOD	SEE PART IV
GEORGIA STATE UNIVERSITY FOUNDATION-PANT - 140 DECATUR ST - ATLANTA, GA 30303	58-6033185 3		2,500.	18,395.	OTHER	FOOD	SEE PART IV
GREATER BETHEL AME CHURCH 2455 LAKEWOOD AVE SW ATLANTA, GA 30315	01-0907877 3		27,750.	227,597.	OTHER	FOOD	SEE PART IV
GOOD NEWS ATLANTA CHURCH 11000 ROGERS CIRCLE JOHNS CREEK, GA 30097	20-1656044 3		0.	11,268.	OTHER	FOOD	SEE PART IV
GOOD SAMARITAN - BRIGHT STAR UMC MOBILE - 3715 BRIGHT STAR RD - DOUGLASVILLE, GA 30135	58-1516735 3		0.	135,904.	OTHER	FOOD	SEE PART IV
GOOD SAM - LAWRENCEVILLE SDA 508 GRAYSON HWY LAWRENCEVILLE, GA 30046	58-1516735 3		0.	68,870.	OTHER	FOOD	SEE PART IV
GOOD SAMARITAN CTR - EPHEPUS BC MOBILE P - 8445 EPHEPUS CHURCH RD - VILLA RICA, GA 30180	58-1516735 3		0.	200,471.	OTHER	FOOD	SEE PART IV
GOOD SAMARITAN CTR- NEW JERUSALEM MOBILE - 4152 MIDWAY RD - DOUGLASVILLE, GA 30134	58-1516735 3		0.	203,626.	OTHER	FOOD	SEE PART IV

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GOOD SAM - NEWNAN FIRST SEVENTH-DAY ADVE - 265 YEAGER RD - NEWNAN, GA 30265	58-1516735 3		0.	127,464.	OTHER	FOOD	SEE PART IV
HERITAGE PRESBYTERIAN CHURCH 5323 BELLS FERRY ROAD ACWORTH, GA 30102	23-6393377 3		0.	747,307.	OTHER	FOOD	SEE PART IV
HERITAGE PRES/WOODSTOCK HIGH SCHOOL - 2010 TOWN LAKE SOUTH DRIVE - WOODSTOCK, GA 30102	23-6393377 3		0.	5,137.	OTHER	FOOD	SEE PART IV
HERITAGE PRES/ETOWAH HIGH SCHOOL 6565 PUTNAM FORD RD WOODSTOCK, GA 30102	23-6393377 3		0.	6,150.	OTHER	FOOD	SEE PART IV
HERITAGE PRES/CLARK CREEK ELEM 3219 HUNT RD ACWORTH, GA 30101	23-6393377 3		0.	4,709.	OTHER	FOOD	SEE PART IV
HAMILTON MILL UNITED METHODIST 1450 PINE RD DACULA, GA 30019	58-2283292 3		35,750.	1,478,590.	OTHER	FOOD	SEE PART IV
HAMPTON UMC - FOOD PANTRY 10 WEST MAIN STREET HAMPTON, GA 30228	31-1813333 3		0.	8,816.	OTHER	FOOD	SEE PART IV
HEARTS TO NOURISH HOPE, INC. 640 HIGHWAY 138 SW RIVERDALE, GA 30274	58-2164638 3		0.	3,418,784.	OTHER	FOOD	SEE PART IV
HOLY TRINITY LUTHERAN CHURCH 2922 SANDY PLAINS RD MARIETTA, GA 30066	41-1568278 3		0.	8,467.	OTHER	FOOD	SEE PART IV

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HELPING HANDS OF PAULDING CO. 228 WEST SPRING STREET DALLAS, GA 30132	58-1896151 3		25,000.	1,391,900.	OTHER	FOOD	SEE PART IV
HILLSIDE PRESBYTERIAN CHURCH 1879 COLUMBIA DRIVE DECATUR, GA 30032	23-6393377 3		0.	49,533.	OTHER	FOOD	SEE PART IV
HELPING IN HIS NAME MINISTRIES INC. - 85 BELLAMY PLACE, SUITE A - STOCKBRIDGE, GA 30281	58-1960667 3		0.	2,336,484.	OTHER	FOOD	SEE PART IV
HOPEWELL BAPTIST CHURCH 5086 POPLAR SPRINGS RD. GAINESVILLE, GA 30507	58-0566245 3		0.	4,371.	OTHER	FOOD	SEE PART IV
HIRAM UNITED METHODIST-FOOD FOR FRIENDS - 324 HIRAM DOUGLASVILLE HIGHWAY - HIRAM, GA 30141	36-2167731 3		0.	66,573.	OTHER	FOOD	SEE PART IV
AGAPE BEHAVIORAL HEALTHCARE 3830 OLD GORDON RD ATLANTA, GA 30336	37-1476534 3		0.	45,086.	OTHER	FOOD	SEE PART IV
H. P. TAYLOR BROTHERHOOD 679 GLENDALE RD SCOTSDALE, GA 30079	27-3573047 3		0.	241,945.	OTHER	FOOD	SEE PART IV
HOUSE OF PRAYER/COTTAGE FOOD BANK - BLA - 1441 PAT COLWELL ROAD - BLAIRSVILLE, GA 30514	58-1721845 3		0.	312,755.	OTHER	FOOD	SEE PART IV
HIGHTOWER BAPTIST ASSOCIATION, INC. - 8630 WALLACE TATUM ROAD - CUMMING, GA 30028	58-0566245 3		0.	256,566.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOPE FOR THE HARVEST 2075 HWY 212 COVINGTON, GA 30016	58-2611804 3		0.	10,622.	OTHER	FOOD	SEE PART IV
HOUSE OF HOPE, NG, INC. 11954 CUMMING HWY CANTON, GA 30115	58-0566245 3		0.	343,616.	OTHER	FOOD	SEE PART IV
HELPING HANDS ENDING HUNGER INC.-KEMP - 1090 MCDONOUGH RD - HAMPTON, GA 30228	81-3382807 3		0.	50,226.	OTHER	FOOD	SEE PART IV
HELPING HANDS ENDING HUNGER INC.- EAST C - 1502 DEAN AVE SE - ROME, GA 30161	81-3382807 3		0.	3,743.	OTHER	FOOD	SEE PART IV
HELPING HANDS ENDING HUNGER INC-FOREST P - 5452 PHILLIPS DR, - FOREST PARK, GA 30297	81-3382807 3		0.	112,711.	OTHER	FOOD	SEE PART IV
HELPING HANDS ENDING HUNGER INC.- PERRY - 137 SPRING ST - JONESBORO, GA 30236	81-3382807 3		0.	7,436.	OTHER	FOOD	SEE PART IV
HELPING HANDS ENDING HUNGER INC.-RIVERDA - 6253 GARDEN WALK BLVD - RIVERDALE, GA 30274	81-3382807 3		0.	3,171.	OTHER	FOOD	SEE PART IV
HELPING HANDS ENDING HUNGER INC. ROME HI - 990 VETERANS MEMORIAL HIGHWAY - ROME, GA 30161	81-3382807 3		0.	3,587.	OTHER	FOOD	SEE PART IV
HEART OF CHRIST CHURCH INC. 2459 ROOSEVELT HWY COLLEGE PARK, GA 30337	47-2258695 3		0.	18,768.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

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HEARTS AGAINST HUNGER INC. 530 HIGHLAND STATION DR SUWANEE, GA 30024	82-3114888 3		0.	60,835.	OTHER	FOOD	SEE PART IV
HIGHEST PRAISE CHURCH OF GOD 3771 FLOYD RD. AUSTELL, GA 30106	62-0484177 3		0.	20,175.	OTHER	FOOD	SEE PART IV
HEALING FOR THE SOUL MINISTRIES, INC - 1683 SOUTH HAIRSTON RD - STONE MOUNTAIN, GA 30088	20-8951742 3		0.	256,003.	OTHER	FOOD	SEE PART IV
HERITAGE SDA CHURCH 6969 HIGHWAY 5 DOUGLASVILLE, GA 30135	52-0643036 3		0.	6,268.	OTHER	FOOD	SEE PART IV
THE HELP OF AN ANGEL 2470 BRUCE ST LITHONIA, GA 30058	83-4697637 3		0.	37,004.	OTHER	FOOD	SEE PART IV
HELPING HANDS OF GEORGIA METRO INC. - 377 VALLEY HILL RD - RIVERDALE, GA 30274	83-3727946 3		0.	2,921.	OTHER	FOOD	SEE PART IV
HOPE 4 HAVEN FOUNDATION 2962 EMBER DR DECATUR, GA 30317	47-5269937 3		2,500.	12,199.	OTHER	FOOD	SEE PART IV
HUNGER NO MORE OUTREACH 4815 COURTNEY DRIVE FORREST PARK, GA 30297	27-5084421 3		0.	30,387.	OTHER	FOOD	SEE PART IV
HIGHLANDS ASSOCIATED REFORMED PRESBYTERI - 830 GRAYSON PARKWAY - GRAYSON, GA 30017	57-6030380 3		5,000.	15,757.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

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IN HIS IMAGE MINISTRY DAY CARE 630 KURT DRIVE MARIETTA, GA 30008	58-1695377 3		0.	11,430.	OTHER	FOOD	SEE PART IV
ISKCON OF ATLANTA 1287 S. PONCE DE LEON AVE ATLANTA, GA 30306	23-7366824 3		0.	38,547.	OTHER	FOOD	SEE PART IV
IMPACT CHURCH 3594 CENTERVILLE HWY SNELLVILLE, GA 30078	58-2144128 3		0.	8,939.	OTHER	FOOD	SEE PART IV
INTOWN COLLABORATIVE MINISTRIES INC. FOO - 1026 PONCE DE LEON AVE NE - ATLANTA, GA 30306	27-0852084 3		0.	297,681.	OTHER	FOOD	SEE PART IV
INTOWN COLLABORATIVE MINISTRIES BACK PAC - 1660 N. DECATUR ROAD - ATLANTA, GA 30307	27-0852084 3		0.	81,372.	OTHER	FOOD	SEE PART IV
MINISTERIO SHALOM INC. 3865 LAWRENCEVILLE HIGHWAY LAWRENCEVILLE, GA 30044	20-1223794 3		0.	34,207.	OTHER	FOOD	SEE PART IV
INTERNATIONAL CHRISTIAN FELLOWSHIP 3076 HUMPHRIES DRIVE SE ATLANTA, GA 30354	58-1828198 3		25,000.	109,761.	OTHER	FOOD	SEE PART IV
ITS YOUR HEALTH INC. 3350 GREENBRIAR PARKWAY ATLANTA, GA 30331	46-1505617 3		0.	6,244.	OTHER	FOOD	SEE PART IV
THE INVESTORS ACADEMY INC 122 HOWELL DR SW ATLANTA, GA 30331	82-2621762 3		5,000.	28,045.	OTHER	FOOD	SEE PART IV

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

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IMPACT CHRISTIAN MINISTRIES 115 W SOLOMAN ST GRIFFIN, GA 30223	75-6050443 3		0.	303,213.	OTHER	FOOD	SEE PART IV
ICNA RELIEF USA PROGRAMS INC. 6200 MEMORIAL DR STONE MOUNTAIN, GA 30083	04-3810161 3		0.	168,871.	OTHER	FOOD	SEE PART IV
JUNIOR LEAGUE OF HALL COUNTY 2029 CALVARY CHURCH RD GAINESVILLE, GA 30507	58-6003789 3		0.	4,923.	OTHER	FOOD	SEE PART IV
JUNIOR LEAGUE OF HALL COUNTY - GAINESVIL - 830 CENTURY PLACE - GAINESVILLE, GA 30501	58-6003789 3		0.	1,403.	OTHER	FOOD	SEE PART IV
JOSHUA'S PLACE 114 DUFFEY RD. JACKSON, GA 30233	58-2595226 3		0.	158,582.	OTHER	FOOD	SEE PART IV
JODECO ROAD UNITED METHODIST 1500 JODECO ROAD STOCKBRIDGE, GA 30281	58-1925003 3		0.	2,716.	OTHER	FOOD	SEE PART IV
JESUS SET THE CAPTIVES FREE 871 DILL AVE ATLANTA, GA 30310	02-0634502 3		0.	14,323.	OTHER	FOOD	SEE PART IV
BEN HILL - TRI-CITIES FOOD CO-OP - JESUS - 4099 SUNSET DRIVE - ATLANTA, GA 30331	58-2344207 3		0.	192,400.	OTHER	FOOD	SEE PART IV
JONESBORO FIRST UMC FOOD CO OP 142 SOUTH MAIN STREET JONESBORO, GA 30236	27-0919798 3		0.	156,918.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)



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JUST US MINISTRIES, INC. 904 YOUNGS FARM RD. CEDARTOWN, GA 30125	47-2915989 3		0.	961,333.	OTHER	FOOD	SEE PART IV
JUBILEE CHURCH OF ATLANTA INC. 260 PARKWAY 575 WOODSTOCK, GA 30188	51-0594742 3		0.	7,278.	OTHER	FOOD	SEE PART IV
JESUS NAME APOSTOLIC CHURCH 77 HUGH STOWERS ROAD DAWSONVILLE, GA 30534	58-1495489 3		0.	557,983.	OTHER	FOOD	SEE PART IV
JEWISH FAMILY SERVICES-FOOD PANTRY 4549 CHAMBLEE DUNWOODY ROAD ATLANTA, GA 30338	58-1479212 3		0.	59,986.	OTHER	FOOD	SEE PART IV
JOY COMMUNITY KITCHEN, INC. 329 GRAYSON HIGHWAY LAWRENCEVILLE, GA 30046	46-0579887 3		0.	870.	OTHER	FOOD	SEE PART IV
KINGDOM LIFE CHURCH WORLDWIDE MINISTRIES - 2360 MELLON CT. - DECATUR, GA 30035	46-1130519 3		0.	176,072.	OTHER	FOOD	SEE PART IV
KOREAN AMERICAN SENIOR CITIZENS LEAGUE - 5900 BROOK HOLLOW PKWY - NORCROSS, GA 30071	30-0272720 3		0.	610,283.	OTHER	FOOD	SEE PART IV
KSU FOUNDATION 585 COBB AVE NW KENNESAW, GA 30144	23-7034345 3		0.	7,549.	OTHER	FOOD	SEE PART IV
KEEPERS MOVEMENT INC. DBA K.E.P.T OUTREA - 10409 E VETERANS MEMORIAL HWY SUITE 104 - LITHIA SPRINGS, GA 30122	47-2937735 3		0.	126,923.	OTHER	FOOD	SEE PART IV

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KINGDOM OF CHRIST CHURCH MINISTRIES INC. - 4485 FULTON INDUSTRIAL BLVD SW - ATLANTA, GA 30336	80-0340102 3		0.	21,984.	OTHER	FOOD	SEE PART IV
THE KINGDOM OF GOD EVANGELISTIC OUTREACH - 4590 WELCOME ALL RD SW, - ATLANTA, GA 30349	58-1979659 3		0.	1,932.	OTHER	FOOD	SEE PART IV
KINGDOM BUILDERS COVENANT CHURCH 1151 FLAT SHOALS ROAD CONYERS, GA 30013	58-2082395 3		0.	103,509.	OTHER	FOOD	SEE PART IV
LIBERTY GROUP SENIOR SERVICES DBA SENIOR - 1879 GLENWOOD AVENUE - ATLANTA, GA 30316	46-3315989 3		0.	86,846.	OTHER	FOOD	SEE PART IV
FAMILY PROMISE OF HALL COUNTY INC 3606 MCEVER ROAD OAKWOOD, GA 30566	27-5544034 3		0.	9,981.	OTHER	FOOD	SEE PART IV
LAWRENCEVILLE CO-OP MINISTRY 52 GWINNETT DR LAWRENCEVILLE, GA 30046	58-2193039 3		35,000.	889,922.	OTHER	FOOD	SEE PART IV
LUTHERAN TOWERS 727 JUNIPER ST. NE ATLANTA, GA 30308	23-7092822 3		2,500.	28,451.	OTHER	FOOD	SEE PART IV
LIGHT OF HOPE & LOVE MINISTRIES 3117 MACEDONIA CT. POWDER SPRINGS, GA 30127	56-2396094 3		0.	2,375.	OTHER	FOOD	SEE PART IV
LITHONIA FIRST UMC 3099 STONE MOUNTAIN STREET LITHONIA, GA 30058	58-1353680 3		0.	101,367.	OTHER	FOOD	SEE PART IV

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LUMPKIN COUNTY BACKPACK BUDDIES 44 SCHOOL DRIVE DAHLONEGA, GA 30533	74-3144389 3		0.	45,919.	OTHER	FOOD	SEE PART IV
FBCM FOOD PANTRY-FIRST BAPTIST CHURCH OF - 5385 CHURCH ST - MABLETON, GA 30126	58-0903222 3		0.	9,790.	OTHER	FOOD	SEE PART IV
LUTHERAN CHURCH OF THE GOOD SHEPHERD - 3099 CHAPEL HILL RD - DOUGLASVILLE, GA 30135	41-1568278 3		0.	33,261.	OTHER	FOOD	SEE PART IV
LAKEVIEW SEVENTH- DAY ADVENTIST CHURCH - 4001 MACEDONIA ROAD - POWDER SPRINGS, GA 30127	52-0643036 3		0.	586,062.	OTHER	FOOD	SEE PART IV
LIGHT OF THE WORLD CHRISTIAN CHURCH - 5883 HWY 155 NORTH - STOCKBRIDGE, GA 30281	58-1934490 3		0.	1,835.	OTHER	FOOD	SEE PART IV
LIGHTHOUSE SEVENTH DAY ADVENTIST 3895 ANVIL BLOCK RD ELLENWOOD, GA 30294	51-0545763 3		0.	14,213.	OTHER	FOOD	SEE PART IV
LILBURN COOPERATIVE MINISTRY 5329 FIVE FORKS TRICKUM RD SW LILBURN, GA 30047	58-2173956 3		0.	234,326.	OTHER	FOOD	SEE PART IV
LIGHTHOUSE FOOD PANTRY 294 W/I PARKWAY DALLAS, GA 30132	20-5505287 3		0.	170,100.	OTHER	FOOD	SEE PART IV
LOVE OUTREACH MISSION - WORLD OUTREACH M - 1294 BRASELTON HIGHWAY - LAWRENCEVILLE, GA 30043	58-1690109 3		0.	49,357.	OTHER	FOOD	SEE PART IV

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PRESBYTERIAN CHURCH OF THE RESURRECTION - 3676 HIGHWAY 20 NE - CONYERS, GA 30012	58-0685034 3		0.	234,111.	OTHER	FOOD	SEE PART IV
LITHONIA SEVENTH DAY ADVENTIST CHURCH - 3533 RAGSDALE ROAD - LITHONIA, GA 30058	58-6002263 3		0.	542,944.	OTHER	FOOD	SEE PART IV
LIVING FAITH TABERNACLE 5880 OLD DIXIE ROAD FORREST PARK, GA 30297	58-1899834 3		0.	422,718.	OTHER	FOOD	SEE PART IV
LOVEJOY BAPTIST CHURCH 436 BRANHAM AVENUE ROME, GA 30161	58-2189799 3		0.	132,474.	OTHER	FOOD	SEE PART IV
LEAP 2 GROW, INC - LEAPFROG EARLY LEARNI - 3740 FLAT SHOALS ROAD - UNION CITY, GA 30291	27-4715476 3		2,500.	12,650.	OTHER	FOOD	SEE PART IV
LITE HOUSE PARTNERS, INC. 120 CARNEGIE PLACE FAYETTEVILLE, GA 30214	20-1396670 3		0.	3,190.	OTHER	FOOD	SEE PART IV
LANDING TRACTS FOR ADVANCED LIVING, INC. - 2865 DONALD LEE HOLLOWELL PKWY NW - ATLANTA, GA 30318	47-2579055 3		0.	153,387.	OTHER	FOOD	SEE PART IV
LANDING TRACTS CSFP ADD'L ADDRESS 2451 DONALD LEE HOLLOWELL PARKWAY ATLANTA, GA 30318	47-2579055 3		0.	1,546.	OTHER	FOOD	SEE PART IV
LANDING TRACTS CSFP ADD'L DEL. ADDRESS - 840 CENTER HILL AVE. - ATLANTA, GA 30318	47-2579055 3		0.	1,546.	OTHER	FOOD	SEE PART IV

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LOVE INVOLVES FAMILY EVERYDAY, INC 107 HIGHLAND HILLS RD FAYETTEVILLE, GA 30214	58-2396558	3	0.	86,097.	OTHER	FOOD	SEE PART IV
THE LOVE OF GIVING INC. 512 GRANT ST ATLANTA, GA 30312	45-5232581	3	0.	18,067.	OTHER	FOOD	SEE PART IV
LATTER RAIN CHURCH OF JESUS CHRIST APOST - 4633 COVINGTON HWY - DECATUR, GA 30035	90-0528248	3	0.	67,891.	OTHER	FOOD	SEE PART IV
MARANATHA COMMUNITY SERVICES FOOD PANTRY - 2730 BROWNS MILL RD SE - ATLANTA, GA 30354	58-6002263	3	0.	338,553.	OTHER	FOOD	SEE PART IV
MY GRANNY'S HOUSE, INC 511 ROWLAND RD. STONE MOUNTAIN, GA 30083	58-2472151	3	0.	14,085.	OTHER	FOOD	SEE PART IV
THE M.I.M.S INC. 996 MT. ZION RD MORROW, GA 30260	82-4060407	3	0.	16,776.	OTHER	FOOD	SEE PART IV
MUST MINISTRIES-SAVE IT FORWARD 1280 FIELD PKWY MARIETTA, GA 30066	58-2034725	3	0.	413,404.	OTHER	FOOD	SEE PART IV
MUST MINISTRIES INC.- MARIETTA PROGRAM S - 1407 COBB PKWY N - MARIETTA, GA 30062	58-2034725	3	0.	196,824.	OTHER	FOOD	SEE PART IV
MUST MINISTRIES SMYRNA PROGRAM SERVICES - 460 PAT MELL RD SE - SMYRNA, GA 30080	58-2034725	3	0.	94,761.	OTHER	FOOD	SEE PART IV

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MUST MINISTRIES-DISTRIBUTION CENTER/SENI - 1280 FIELD PARKWAY - MARIETTA, GA 30066	58-2034725 3		0.	531,812.	OTHER	FOOD	SEE PART IV
MT. OLIVE OUTREACH - 12 BASKETS FOOD PAN - 470 MT. OLIVE ROAD - STOCKBRIDGE, GA 30281	26-3885231 3		0.	48,586.	OTHER	FOOD	SEE PART IV
LIFELINE MISSION 3915 CARROLLTON-VILLA RICA HWY VILLA RICA, GA 30180	45-4235795 3		500.	296,400.	OTHER	FOOD	SEE PART IV
MT. ZION AME CHURCH 4163 WADE GREEN ROAD KENNESAW, GA 30144	53-0204696 3		0.	26,865.	OTHER	FOOD	SEE PART IV
MINISTRY IN ACTION OUTREACH, INC. 100 ELEANOR DR COVINGTON, GA 30016	27-4696499 3		0.	1,283.	OTHER	FOOD	SEE PART IV
EAST POINT FIRST MALLALIEU UMC 2651 CHURCH STREET EAST POINT, GA 30344	64-0920498 3		0.	18,017.	OTHER	FOOD	SEE PART IV
MENDING THE GAP INC 585 OLD NORCROSS RD LAWRENCEVILLE, GA 30046	80-0680633 3		0.	5,248.	OTHER	FOOD	SEE PART IV
MAKING A WAY HOUSING INC. 377 WESTCHESTER BLVD. ATLANTA, GA 30314	16-1644159 3		0.	116,057.	OTHER	FOOD	SEE PART IV
MINISTERIO INTERNACIONAL EL REY JESUS GE - 4350 PEACTREE INDUSTRIAL BLVD., STE. 500D - PEACHTREE CORNER, GA 30071	32-0240063 3		3,500.	77,181.	OTHER	FOOD	SEE PART IV

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MSG FOUNDATION 2210 GOLDMINE DRIVE CUMMING, GA 30040	58-2594166 3		0.	14,882.	OTHER	FOOD	SEE PART IV
METROPOLITAN UNITED METHODIST 700 BROAD ST ROME, GA 30161	31-1813333 3		0.	21,681.	OTHER	FOOD	SEE PART IV
LIFE LEARNING COMMUNITY CENTER 1083 ALLGOOD ROAD MARIETTA, GA 30062	26-3289551 3		0.	1,182,680.	OTHER	FOOD	SEE PART IV
COBB VINEYARD /VINEYARD CHRISTIAN FELLOW - 3206 OLD HIGHWAY 41 - KENNESAW, GA 30144	58-2002407 3		0.	501,562.	OTHER	FOOD	SEE PART IV
MY SISTER'S KEEPER 7431 PETUNIA DRIVE RIVERDALE, GA 30296	63-0634270 3		0.	4,778.	OTHER	FOOD	SEE PART IV
MILFORD BAPTIST CHURCH 1030 MILFORD CHURCH ROAD MARIETTA, GA 30060	58-0877079 3		0.	776,316.	OTHER	FOOD	SEE PART IV
WEST END SDA - WE-SERVE COMMUNITY OUTREA - 1191 DONNELLY AVENUE - ATLANTA, GA 30310	32-0371712 3		0.	51,771.	OTHER	FOOD	SEE PART IV
MANNA FROM ABOVE, INC. 2757A OLD ATLANTA RD. GRIFFIN, GA 30223	80-0949957 3		11,000.	23,851.	OTHER	FOOD	SEE PART IV
MANNA FROM ABOVE (BACKPACK PROGRAM) - 113C N 16TH ST, - GRIFFIN, GA 30223	80-0949957 3		0.	4,839.	OTHER	FOOD	SEE PART IV

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MORROW PRESBYTERIAN CHURCH 6171 HUIE DRIVE MORROW, GA 30260	23-6393377 3		0.	276,328.	OTHER	FOOD	SEE PART IV
MOUNT PLEASANT BAPTIST CHURCH 17 MELDON AVENUE ATLANTA, GA 30315	58-1885449 3		5,000.	149,315.	OTHER	FOOD	SEE PART IV
MOUNT PLEASANT BAPTIST CHURCH CSFP ADD'L - 2611 SPRINGDALE RD - ATLANTA, GA 30315	58-1885449 3		0.	6,817.	OTHER	FOOD	SEE PART IV
METRO ATLANTA URBAN FARM IN COLLEGE PARK - 3271 MAIN ST. - COLLEGE PARK, GA 30337	45-2500753 3		27,500.	233,492.	OTHER	FOOD	SEE PART IV
MOTHERS REBUILDING AMERICA, INC. 7302 CONYERS ST LITHONIA, GA 30058	35-2449920 3		0.	50,535.	OTHER	FOOD	SEE PART IV
MOUNT PROSPECT BAPTIST CHURCH 133 THOMAS DORSEY DRIVE VILLA RICA, GA 30180	58-1772613 3		0.	143,323.	OTHER	FOOD	SEE PART IV
MT. MORIAH BAPTIST CHURCH 200 JOSEPH E. LOWERY BLVD SW ATLANTA, GA 30314	31-0723399 3		0.	239,239.	OTHER	FOOD	SEE PART IV
MOUNTAINSIDE SDA CHURCH 3936 RAINBOW DRIVE DECATUR, GA 30034	52-0643036 3		0.	27,333.	OTHER	FOOD	SEE PART IV
MURPHY-HARPST CHILDREN'S CENTERS 740 FLETCHER ST. CEDARTOWN, GA 30125	58-1543388 3		0.	737,066.	OTHER	FOOD	SEE PART IV

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MT. PLEASANT BAPTIST CHURCH-MANNA HOUSE - 403 MANDEVILLE AVENUE - CARROLLTON, GA 30116	58-0566245 3		0.	274,256.	OTHER	FOOD	SEE PART IV
MEALS ON WHEELS OF COWETA INC. 8 SAVANNAH ST NEWNAN, GA 30263	58-1274374 3		2,500.	27,872.	OTHER	FOOD	SEE PART IV
MM HOPE HOUSE INC. 466 SIMPSON ST. MCDONOUGH, GA 30253	76-0773657 3		0.	4,478.	OTHER	FOOD	SEE PART IV
MARGIE'S HOUSE 304 FAIRBURN INDUSTRIAL BLVD FAIRBURN, GA 30213	47-5677172 3		0.	661,305.	OTHER	FOOD	SEE PART IV
MARGIES HOUSE -CSFP ADD'L DEL. ADD. - 375 AUBURN AVE NE - ATLANTA, GA 30312	47-5677172 3		0.	32,165.	OTHER	FOOD	SEE PART IV
MARGIES HOUSE -CSFP ADD'L DEL. ADDRESS - 5151 THOMPSON RD - FAIRBUN, GA 30213	47-5677172 3		0.	28,255.	OTHER	FOOD	SEE PART IV
MARGIE HOUSE CSFP ADD'L DEL. ADDRESS - 5095 SOUTHWOOD RD. - FAIRBURN, GA 30213	47-5677172 3		0.	38,255.	OTHER	FOOD	SEE PART IV
MARGIES HOUSE CSFP ADD'L DEL. ADDRESS - 3724 M.L.K. JR. DR. SW - ATLANTA, GA 30331	47-5677172 3		0.	21,458.	OTHER	FOOD	SEE PART IV
MARGIES HOUSE - CSFP ADD'L DEL. ADDRESS - 954 JAMES JACKSON PARKWAY NW - ATLANTA, GA 30318	47-5677172 3		0.	29,267.	OTHER	FOOD	SEE PART IV

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAXIMUM IMPACT LOVE INC. 5315 TULANE DR SW ATLANTA, GA 30336	36-4685861 3		2,500.	419,509.	OTHER	FOOD	SEE PART IV
MARGIES HOUSE - MOBILE PANTRY ACCOUNT - 304 FAIRBURN INDUSTRIAL BLVD - FAIRBURN, GA 30213	47-5677172 3		0.	155,414.	OTHER	FOOD	SEE PART IV
MANNA FROM ABOVE - ST. PHILIP AME 831 N HILL ST. GRIFFIN, GA 30223	80-0949957 3		0.	19,058.	OTHER	FOOD	SEE PART IV
GOOD SAM/MIDWAY UNITED METHODIST 1930 MIDWAY RD DOUGLASVILLE, GA 30135	58-1516735 3		0.	32,026.	OTHER	FOOD	SEE PART IV
NORTH CENTRAL/THERE'S HOPE-COBB 1230 SAMPLES INDUSTRIAL DRIVE CUMMING, GA 30041	58-1966767 3		0.	49,146.	OTHER	FOOD	SEE PART IV
NORTH CENTRAL /THERE'S HOPE-PAULDING - 1230 SAMPLES INDUSTRIAL DRIVE - CUMMING, GA 30041	58-1966767 3		0.	143,038.	OTHER	FOOD	SEE PART IV
NORTH CENTRAL /THERE'S HOPE-GWINNETT - 1230 SAMPLES INDUSTRIAL DRIVE - CUMMING, GA 30041	58-1966767 3		0.	32,016.	OTHER	FOOD	SEE PART IV
NORTH CENTRAL/THERE'S HOPE-PICKENS 1230 SAMPLES INDUSTRIAL DRIVE CUMMING, GA 30041	58-1966767 3		0.	55,949.	OTHER	FOOD	SEE PART IV
NORTH CENTRAL /THERE'S HOPE--BARTOW - 1230 SAMPLES INDUSTRIAL DRIVE - CUMMING, GA 30041	58-1966767 3		0.	57,068.	OTHER	FOOD	SEE PART IV

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

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NORTH CENTRAL/THERE'S HOPE-FLOYD 1230 SAMPLES INDUSTRIAL DRIVE CUMMING, GA 30041	58-1966767	3	0.	44,160.	OTHER	FOOD	SEE PART IV
NORTH CENTRAL/THERE'S HOPE-MURRAY 1230 SAMPLES INDUSTRIAL DRIVE CUMMING, GA 30041	58-1966767	3	0.	71,672.	OTHER	FOOD	SEE PART IV
NORTH CENTRAL/THERE'S HOPE -FANNIN 1230 SAMPLES INDUSTRIAL DRIVE CUMMING, GA 30041	58-1966767	3	0.	19,872.	OTHER	FOOD	SEE PART IV
NORTH CENTRAL/THERE'S HOPE CHATTOGA - 1230 SAMPLES INDUSTRIAL DRIVE - CUMMING, GA 30041	58-1966767	3	0.	131,935.	OTHER	FOOD	SEE PART IV
NORTH CENTRAL/THERE'S HOPE-WHITFIELD - 1230 SAMPLES INDUSTRIAL DRIVE - CUMMING, GA 30041	58-1966767	3	0.	151,024.	OTHER	FOOD	SEE PART IV
NORTH CENTRAL/THERE'S HOPE- POLK 1230 SAMPLES INDUSTRIAL DRIVE CUMMING, GA 30041	58-1966767	3	0.	157,000.	OTHER	FOOD	SEE PART IV
NEW BIRTH MBC -THE KING'S TABLE FOOD MIN - 6400 WOODROW RD - LITHONIA, GA 30038	58-1711477	3	0.	2,355,204.	OTHER	FOOD	SEE PART IV
WEST GEORGIA MISSIONS INC 7822 CONNERS RD. WINSTON, GA 30187	84-2738092	3	2,500.	27,056.	OTHER	FOOD	SEE PART IV
NOW FAITH APOSTOLIC MINISTRIES 3406 REX RD REX, GA 30273	34-1998672	3	0.	23,091.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW HOPE SEVENTH DAY ADVENTIST CHURCH - 3979 PANTHERSVILLE ROAD - ELLENWOOD, GA 30294	58-6002263 3		0.	81,558.	OTHER	FOOD	SEE PART IV
NEW BETHEL A.M.E. CHURCH 8350 ROCKBRIDGE ROAD LITHONIA, GA 30058	58-1858627 3		0.	315,620.	OTHER	FOOD	SEE PART IV
NORCROSS COOPERATIVE MINISTRY 500 PINNACLE COURT NORCROSS, GA 30071	58-1792414 3		0.	33,782.	OTHER	FOOD	SEE PART IV
NETWORKS COOPERATIVE MINISTRY 2380 4TH STREET TUCKER, GA 30084	31-1836042 3		500.	111,344.	OTHER	FOOD	SEE PART IV
NETWORKS COOPERATIVE MINISTRY-FOOD CO OP - 2380 4TH ST - TUCKER, GA 30084	31-1836042 3		0.	120,455.	OTHER	FOOD	SEE PART IV
NETWORKS COOPERATIVE MINISTRY- TUCKER CA - 2380 4TH STREET - TUCKER, GA 30084	31-1836042 3		0.	860.	OTHER	FOOD	SEE PART IV
NORTH FULTON COMMUNITY CHARITIES 11270 ELKINS RD ROSWELL, GA 30076	58-1521088 3		0.	632,762.	OTHER	FOOD	SEE PART IV
NEW HORIZONS IN FAITH CHURCH 81 WEST CAMPBELLTON STREET FAIRBURN, GA 30213	58-2227169 3		0.	12,564.	OTHER	FOOD	SEE PART IV
NORTH WEST YOUTH POWER, INC. 815 MAGNOLIA ATLANTA, GA 30314	58-2253657 3		0.	138,788.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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NORTHWEST YOUTH POWER E.L. CENTER #3 - 3471 GLENWOOD RD - DECATUR, GA 30032	20-1684957 3		0.	15,470.	OTHER	FOOD	SEE PART IV
NEW LIFE COMMUNITY CENTER 3592 FLAT SHOALS ROAD DECATUR, GA 30034	58-2616862 3		0.	552,328.	OTHER	FOOD	SEE PART IV
TOTAL VICTORY WORSHIP 1320 ROCKCUT RD FOREST PARK, GA 30297	80-0334668 3		0.	100,953.	OTHER	FOOD	SEE PART IV
NEW LIFE PRESBYTERIAN-INEZ WAGNER FOOD - 6600 OLD NATIONAL HIGHWAY - COLLEGE PARK, GA 30349	23-6393377 3		0.	27,294.	OTHER	FOOD	SEE PART IV
MERCY SEED RESOURCE CENTER INC 4037 DARLING COURT SW LILBURN, GA 30047	81-2187956 3		0.	303,524.	OTHER	FOOD	SEE PART IV
NORTHWEST CHRISTIAN CHURCH 3737 DALLAS ACWORTH HIGHWAY ACWORTH, GA 30101	58-1394584 3		0.	96,106.	OTHER	FOOD	SEE PART IV
NEW BETHEL INTERNATIONAL COG 1025 KILLIAN HILL RD SW LILBURN, GA 30047	81-1435236 3		0.	441,071.	OTHER	FOOD	SEE PART IV
NOTHING BUT THE TRUTH 324 W PIKE ST LAWRENCEVILLE, GA 30046	27-5424155 3		0.	91,804.	OTHER	FOOD	SEE PART IV
NEW BEGINNINGS PRAISE AND WORSHIP CENTER - 1091 SOUTH JEFF DAVIS DRIVE - FAYETTEVILLE, GA 30215	58-2383664 3		37,500.	42,955.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

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NOT BY BREAD ALONE 2727 BOULDERCREST ROAD ATLANTA, GA 30316	27-0217004 3		0.	1,106.	OTHER	FOOD	SEE PART IV
NO LONGER BOUND 2725 PINE GROVE RD CUMMING, GA 30041	58-1927695 3		0.	299,743.	OTHER	FOOD	SEE PART IV
NEW MERCY COMMUNITY SERVICES INC. 742 PIMENTO AVENUE GRIFFIN, GA 30224	27-2753243 3		24,000.	2,277.	OTHER	FOOD	SEE PART IV
NORTHPOINTE CHURCH OF ADAIRSVILLE, INC - 4645 JOE FRANK HARRIS PKWY - ADAIRSVILLE, GA 30103	58-2429272 3		0.	987,529.	OTHER	FOOD	SEE PART IV
NEW WAY OF LIFE MINISTRIES INC 3145 KELLY ST SCOTSDALE, GA 30079	03-0584909 3		0.	182,688.	OTHER	FOOD	SEE PART IV
NEW HOPE CHURCH OF GOD 1783 FAIRVIEW RD STOCKBRIDGE, GA 30281	75-2978044 3		0.	140,552.	OTHER	FOOD	SEE PART IV
NEVER ALONE INC 291 ROPE MILL ROAD WOODSTOCK, GA 30188	20-4445366 3		0.	1,630,427.	OTHER	FOOD	SEE PART IV
NORTH LANIER BAPTIST CHURCH 829 ATLANTA HIGHWAY CUMMING, GA 30040	58-0566245 3		0.	8,916.	OTHER	FOOD	SEE PART IV
OVERCOMERS HOUSE, INC. 2114 FOUNTAIN SQUARE SNELLVILLE, GA 30078	35-2376065 3		0.	1,101,622.	OTHER	FOOD	SEE PART IV

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OVERCOMERS HOUSE, INC. ADD'L DEL. ADDRESS - 2114 FOUNTAIN SQUARE - SNELLVILLE, GA 30078	35-2376065 3		0.	10,337.	OTHER	FOOD	SEE PART IV
SOUTH HALL COMMUNITY FOOD PANTRY 4211 WALNUT STREET OAKWOOD, GA 30566	27-2798019 3		0.	18,013.	OTHER	FOOD	SEE PART IV
ONE ACCORD CHURCH 5285 FLAT SHOALS PKWY DECATUR, GA 30034	47-1423338 3		0.	141,367.	OTHER	FOOD	SEE PART IV
OPERATION LUNCHBOX-HENRY 113 PARK 42 DRIVE SUITE C LOCUST GROVE, GA 30248	46-4930034 3		0.	58,512.	OTHER	FOOD	SEE PART IV
OPERATION LUNCHBOX-BUTTS 113 PARK 42 DRIVE SUITE C LOCUST GROVE, GA 30248	46-4930034 3		0.	6,255.	OTHER	FOOD	SEE PART IV
OPERATION LUNCHBOX-CLAYTON 113 PARK 42 DRIVE SUITE C LOCUST GROVE, GA 30248	46-4930034 3		0.	6,255.	OTHER	FOOD	SEE PART IV
ONESOURCE FOOD PANTRY 3100 FIVE FORKS TRIKUM RD LILBURN, GA 30047	45-2901255 3		0.	14,627.	OTHER	FOOD	SEE PART IV
OPEN HANDS UNITED CHRISTIAN MINISTRY - 100 BLEDSOE ST - CARROLLTON, GA 30117	46-2465968 3		11,500.	791,543.	OTHER	FOOD	SEE PART IV
ONE HEART MINISTRIES INC. 1203 ROYAL DRIVE CONYERS, GA 30094	34-2066493 3		0.	181,829.	OTHER	FOOD	SEE PART IV

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OASIS INTERNATIONAL WORSHIP 1093 PANOLA ROAD STONE MOUNTAIN, GA 30088	58-2576109 3		0.	169,122.	OTHER	FOOD	SEE PART IV
OLD MOUNTAIN BAPTIST CHURCH 2471 MOUNTAIN TOP RD WINSTON, GA 30187	58-1604360 3		0.	5,966.	OTHER	FOOD	SEE PART IV
ONE ROOF ECUMENICAL ALLIANCE OUTREACH, I - 255 TEMPLE AVENUE - NEWNAN, GA 30263	26-0157086 3		0.	13,744.	OTHER	FOOD	SEE PART IV
PARADISE MISSIONARY BAPTIST CHURCH 1711 DONALD L. HOLLOWELL PARKWAY ATLANTA, GA 30318	26-1423645 3		0.	16,541.	OTHER	FOOD	SEE PART IV
PLEASANT WORD CHRISTIAN CENTER INTERNATI - 6270 RED OAK ROAD - ATLANTA, GA 30349	26-4696218 3		0.	43,124.	OTHER	FOOD	SEE PART IV
PEACE ON THE MOVE /PEACE BAPTIST CHURCH - 4000 COVINGTON HWY. - DECATUR, GA 30032	58-2631417 3		0.	429,956.	OTHER	FOOD	SEE PART IV
THE PLACE OF FORSYTH 2550 THE PLACE CIRCLE CUMMING, GA 30040	58-2355072 3		0.	56,460.	OTHER	FOOD	SEE PART IV
THE PLACE OF DAWSON 829 HWY 9 NORTH DAWSONVILLE, GA 30534	58-2355072 3		0.	21,534.	OTHER	FOOD	SEE PART IV
PLEASANT HILL MISSIONARY BAPTIST CHURCH - 728 BUSH STREET - ROSWELL, GA 30075	58-1769570 3		0.	163,735.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)



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PROJECT OPEN HAND 176 OTTLEY DR., NE ATLANTA, GA 30324	58-1816778 3		0.	6,613.	OTHER	FOOD	SEE PART IV
PROVIDENCE MISSIONARY BAPTIST CHURCH - 2295 BENJAMIN E. MAYS DR., SW - ATLANTA, GA 30311	58-1435470 3		0.	83,113.	OTHER	FOOD	SEE PART IV
PROVIDENCE COMMUNITY BAPTIST CHURCH - 38 AUSTIN AVENUE - MARIETTA, GA 30060	58-1435470 3		3,000.	100,493.	OTHER	FOOD	SEE PART IV
PLEASANT GROVE MISSIONARY BAPT. CHURCH - 566 WHITLOCK AVENUE - MARIETTA, GA 30064	58-1887205 3		0.	63,592.	OTHER	FOOD	SEE PART IV
POTTER'S HOUSE FAMILY AND CHILDREN TREAT - 2300 W PARK PLACE BLVD - STONE MOUNTAIN, GA 30087	58-2550099 3		0.	51,927.	OTHER	FOOD	SEE PART IV
THE PROVIDERS, INC. 799 MORELAND AVE SE. ATLANTA, GA 30316	03-0536224 3		0.	70,721.	OTHER	FOOD	SEE PART IV
PROVIDENCE BAPTIST CHURCH S. ATLANTA - 1773 HAWTHORNE AVENUE - COLLEGE PARK, GA 30337	58-1592206 3		0.	318,051.	OTHER	FOOD	SEE PART IV
PHILADELPHIE SDA CHURCH 6784 CHURCH STREET DOUGLASVILLE, GA 30134	58-6035029 3		0.	164,410.	OTHER	FOOD	SEE PART IV
PROFOUND COMMUNITY NETWORKERS INC-GWINNE - 1435 KLONDIKE RD SW - CONYERS, GA 30094	27-2445089 3		0.	6,598.	OTHER	FOOD	SEE PART IV

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PROFOUND COMMUNITY NETWORKERS INC-DEKALB - 1435 KLONDIKE RD SW - CONYERS, GA 30094	27-2445089 3		0.	9,363.	OTHER	FOOD	SEE PART IV
PENTECOSTAL CHURCH TRIUMPHANTS OF JESUS - 794 JESSE JEWEL PKWY SW - GAINESVILLE, GA 30501	42-1694843 3		0.	3,442.	OTHER	FOOD	SEE PART IV
PITTSBURGH KINGDOM DOORS BAPTIST CHURCH - 884 COLEMAN ST SW - ATLANTA, GA 30310	55-0860398 3		0.	85,211.	OTHER	FOOD	SEE PART IV
PEACE HOUSE INC. 2158 MCDANIELS BRIDGE CT. SW LILBURN, GA 30047	30-0695182 3		13,000.	97,373.	OTHER	FOOD	SEE PART IV
POSITIVE PEERING, INC 1955 SIGMAN RD NW SUITE 106 CONYERS, GA 30012	80-0395039 3		0.	10,093.	OTHER	FOOD	SEE PART IV
PEACES OF KINDNESS INC. 7115 OAK RIDGE PKWY AUSTELL, GA 30168	83-1667035 3		0.	1,540,168.	OTHER	FOOD	SEE PART IV
PURPOSE WORLD INC 1905 HIGHPOINT RD SNELLVILLE, GA 30078	46-5345905 3		17,000.	1,641,345.	OTHER	FOOD	SEE PART IV
QUALITY LIVING SERVICES, INC 4001 DANFORTH RD., SW ATLANTA, GA 30331	58-1629399 3		0.	161,382.	OTHER	FOOD	SEE PART IV
QUEST COMMUNITY DEVELOPMENT 878 ROCK STREET NW ATLANTA, GA 30314	58-2634738 3		0.	10,289.	OTHER	FOOD	SEE PART IV

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REHOBOTH EMPOWERMENT CENTER 674 MOUNT ZION RD JONESBORO, GA 30236	54-1598036 3		0.	19,378.	OTHER	FOOD	SEE PART IV
RAISING EXPECTATIONS, INC. 220 NORTHSIDE DR NW ATLANTA, GA 30314	58-2395581 3		0.	2,812.	OTHER	FOOD	SEE PART IV
RICE MEMORIAL PRESBYTERIAN CHURCH 1515 BREWER BLVD., SW ATLANTA, GA 30310	23-6393377 3		0.	36,423.	OTHER	FOOD	SEE PART IV
ROME ACTION MINISTRIES-BAGWELL PANTRY - 207 EAST 19TH STREET - ROME, GA 30161	58-2070427 3		0.	2,193,658.	OTHER	FOOD	SEE PART IV
ROME URBAN MINISTRIES-BACKPACK BUDDIES - 207 EAST 19TH ST. - ROME, GA 30162	58-2070427 3		0.	121,201.	OTHER	FOOD	SEE PART IV
R.A.M.- NEW BEGINNINGS 1929 N. BROAD ST. ROME, GA 30161	58-2070427 3		0.	94,727.	OTHER	FOOD	SEE PART IV
R.A.M. - SEASONAL PROGRAMS 207 EAST 19TH STREET ROME, GA 30162	58-2070427 3		0.	54,740.	OTHER	FOOD	SEE PART IV
R.A.M- WEST ROME CANCER NAVIGATOR 1003 SHORTER AVE SW ROME, GA 30165	58-2070427 3		0.	138,486.	OTHER	FOOD	SEE PART IV
ROME ACTION MINISTRIES-POLK COUNTY BACK - 207 EAST 19TH STREET - ROME, GA 30161	58-2070427 3		0.	166,414.	OTHER	FOOD	SEE PART IV

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RIVERS OF LIVING WATER BAPTIST CHURCH - 3350 EVANS MILL ROAD - LITHONIA, GA 30038	58-2435505 3		0.	211,417.	OTHER	FOOD	SEE PART IV
RISING STAR BAPTIST CENTER 1644 HIGHWAY 16 WEST JACKSON, GA 30233	58-2033627 3		0.	64,600.	OTHER	FOOD	SEE PART IV
RIC-RACK RESOURCE INTERACTION COUNCIL - 829 HIGHWAY 9 NORTH - DAWSONVILLE, GA 30534	58-2034207 3		0.	269,549.	OTHER	FOOD	SEE PART IV
RESTORATION & DELIVERANCE COGIC 721 MORROW RD FOREST PARK, GA 30297	62-1242019 3		0.	402,562.	OTHER	FOOD	SEE PART IV
RAINBOW PARK BAPTIST CHURCH 2941 COLUMBIA DRIVE DECATUR, GA 30034	58-0683812 3		0.	93,499.	OTHER	FOOD	SEE PART IV
THE RIVER COMMUNITY ASSEMBLY OF GOD - 5043 THOMPSON BRIDGE RD. - MURRAYVILLE, GA 30564	44-0577787 3		0.	42,528.	OTHER	FOOD	SEE PART IV
RESCATE 2000 1709 MARTIN LUTHER KING JR. BLVD. GAINESVILLE, GA 30501	42-1568565 3		0.	41,111.	OTHER	FOOD	SEE PART IV
RENEW ATLANTA CORPORATION 256 MEMORIAL DR SW ATLANTA, GA 30303	46-2003535 3		0.	79,379.	OTHER	FOOD	SEE PART IV
RISING PHOENIX ENRICHMENT PROGRAM 195 ISHMAN BALLARD RD NEWNAN, GA 30263	45-1647296 3		0.	21,079.	OTHER	FOOD	SEE PART IV

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RIVERDALE FIRST UNITED METHODIST CHURCH - 6390 CHURCH STREET - RIVERDALE, GA 30274	58-1540135 3		0.	202,399.	OTHER	FOOD	SEE PART IV
RESULTS KIDS CLUB, INC 2532 S. HARISTON RD DECATUR, GA 30035	81-3425415 3		0.	23,421.	OTHER	FOOD	SEE PART IV
REAPING THE HARVEST OUTREACH MINISTRIES - 100 HENDRICK DR. - MCDONOUGH, GA 30253	27-4486071 3		2,500.	184,656.	OTHER	FOOD	SEE PART IV
REFLECTIONS OF TRINITY INC. 4037 AUSTELL POWDER SPRINGS RD. POWDER SPRINGS, GA 30127	26-1871591 3		0.	4,040,044.	OTHER	FOOD	SEE PART IV
REFLECTIONS OF TRINITY INC./FOUNTAIN EL - 4037 AUSTELL POWDER SPRINGS - POWDER SPRINGS, GA 30127	26-1871591 3		0.	52,375.	OTHER	FOOD	SEE PART IV
ROSALEANA'S COMMUNITY DEVELOPMENT CENTER - 3350 MT. GILEAD ROAD - ATLANTA, GA 30311	20-4906640 3		0.	4,933.	OTHER	FOOD	SEE PART IV
SOUTH FULTON COMMUNITY COALITION 5650 BYRD ROAD UNION CITY, GA 30291	58-2142855 3		0.	41,980.	OTHER	FOOD	SEE PART IV
STONE MOUNTAIN ECUMENICAL CO-OP MINISTRI - 5324 W. MOUNTAIN STREET - STONE MOUNTAIN, GA 30083	58-2589454 3		0.	15,793.	OTHER	FOOD	SEE PART IV
SALVATION ARMY ADULT REHABILITATION CTR - 740 MARIETTA ST - ATLANTA, GA 30318	58-0660607 3		0.	71,849.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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THE QUINN HOUSE 555 HURRICANE SHOALS RD NW LAWRENCEVILLE, GA 30046	58-1859186 3		0.	2,266,568.	OTHER	FOOD	SEE PART IV
SAINT JAMES AME CHURCH 8310 ELM STREET DOUGLASVILLE, GA 30134	53-0204696 3		0.	201,556.	OTHER	FOOD	SEE PART IV
THE SALVATION ARMY OF GWINNETT COUNTY - 3455 SUGARLOAF PKWY - LAWRENCEVILLE, GA 30044	58-0660607 3		0.	55,228.	OTHER	FOOD	SEE PART IV
SEEDS OF LOVE FOSTER RESOURCES CENTER - 1249 DONALD LEE HOLLOWELL PKWY - ATLANTA, GA 30318	20-3543148 3		0.	1,649.	OTHER	FOOD	SEE PART IV
ST. MICHAEL THE ARCHANGEL 490 ARNOLD MILL ROAD WOODSTOCK, GA 30188	53-0196617 3		0.	521,208.	OTHER	FOOD	SEE PART IV
SOUTHSIDE HAITIAN COG 47 MCDONOUGH STREET HAMPTON, GA 30228	62-0484177 3		2,500.	148,548.	OTHER	FOOD	SEE PART IV
THE SOUL FACTORY 5300 MEMORIAL DRIVE SUITE 137 STONE MOUNTAIN, GA 30083	52-2018347 3		0.	27,147.	OTHER	FOOD	SEE PART IV
STREETWISE GEORGIA, INC. 1770 CEDARS ROAD LAWRENCEVILLE, GA 30045	94-3440809 3		0.	3,181,780.	OTHER	FOOD	SEE PART IV
SOUTHEAST GWINNETT CO OP 55 GRAYSON INDUSTRIAL PARKWAY GRAYSON, GA 30017	58-1991483 3		0.	1,341,421.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SDA-BIBLE FELLOWSHIP -HELPING HANDS - 221 SOUTH PIEDMONT AVENUE - ROCKMART, GA 30153	58-6002263 3		0.	663,034.	OTHER	FOOD	SEE PART IV
ST. PATRICK'S EPISCOPAL CHURCH-MALACHI' - 4755 NORTH PEACHTREE ROAD - ATLANTA, GA 30338	23-7061425 3		0.	651,354.	OTHER	FOOD	SEE PART IV
STAND INC. 3486 COVINGTON HWY DECATUR, GA 30032	58-2548153 3		0.	11,369.	OTHER	FOOD	SEE PART IV
SUNSHINE COMMUNITY BROTHERHOOD FOUNDATIO - 2750 PANOLA ROAD - LITHONIA, GA 30058	58-1363285 3		0.	487,907.	OTHER	FOOD	SEE PART IV
SUNSHINE COMMUNITY BROTHERHOOD FOUNDATIO - 2283 BAKER RD NW - ATLANTA, GA 30318	58-1363285 3		0.	424,727.	OTHER	FOOD	SEE PART IV
SANDU MINISTRIES 4140 JONESBORO RD. FOREST PARK, GA 30297	81-1094623 3		0.	34,426.	OTHER	FOOD	SEE PART IV
FAIR STREET-BUTLER HIGH SCHOOLS ALUMNI A - 731 EE BUTLER PARKWAY - GAINESVILLE, GA 30501	35-2328634 3		0.	320,371.	OTHER	FOOD	SEE PART IV
SPORTZ CENTER ACADEMY, INC. 5330 SNAPPINGER WOODS ROAD DECATUR, GA 30035	45-4673300 3		0.	87,577.	OTHER	FOOD	SEE PART IV
SOLOMON'S TEMPLE FOUNDATION, INC. 2836 SPRINGDALE RD SW ATLANTA, GA 30315	81-0983784 3		0.	11,243.	OTHER	FOOD	SEE PART IV

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SHRINE OF THE IMMACULATE CONCEPTION/ST.F - 48 MARTIN LUTHER KING JR. DRIVE - ATLANTA, GA 30303	58-0622965 3		0.	198,549.	OTHER	FOOD	SEE PART IV
ST. PHILLIP AME CHURCH 240 CANDLER ROAD ATLANTA, GA 30317	58-1333986 3		250.	437,823.	OTHER	FOOD	SEE PART IV
SINAI SDA CHURCH 387 STARK ROAD JACKSON, GA 30233	52-0643036 3		11,000.	408,043.	OTHER	FOOD	SEE PART IV
ST. VINCENT DE PAUL SOCIETY-ADMINISTRATI - 2050 CHAMBLEE TUCKER ROAD SUITE C - ATLANTA, GA 30341	58-0967972 3		0.	1,027,240.	OTHER	FOOD	SEE PART IV
SVDP STONE MOUNTAIN FAMILY SUPPORT CENTE - 4871 MEMORIAL DRIVE - STONE MOUNTAIN, GA 30083	58-0967972 3		0.	18,048.	OTHER	FOOD	SEE PART IV
SVDP ST. THOMAS 4300 KING SPRINGS ROAD SMYRNA, GA 30080	58-0967972 3		0.	25,507.	OTHER	FOOD	SEE PART IV
SVDP ST. JOSEPH CHURCH 87 LACY STREET MARIETTA, GA 30060	58-0967972 3		0.	111,977.	OTHER	FOOD	SEE PART IV
SVDP ST. PHILIP BENIZI CATHOLIC CHURCH - 591 FLINT RIVER ROAD - JONESBORO, GA 30238	58-0967972 3		0.	101,081.	OTHER	FOOD	SEE PART IV
SVDP-CHRIST OUR HOPE CATHOLIC CHURCH - 1786 WELLBORN RD - LITHONIA, GA 30058	58-0967972 3		0.	1,705.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)



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SVDP-LAKEWOOD FAMILY SUPPORT CENTER - 1700 LAKEWOOD AVE SE - ATLANTA, GA 30315	58-0967972 3		0.	3,696.	OTHER	FOOD	SEE PART IV
SVDP-ST. ANN 4905 ROSWELL RD MARIETTA, GA 30062	58-0967972 3		0.	78,581.	OTHER	FOOD	SEE PART IV
SVDP-ST. PETER & PAUL CATHOLIC CHURCH - 2560 TILSON ROAD - DECATUR, GA 30032	53-0196617 3		0.	174,390.	OTHER	FOOD	SEE PART IV
SALVATION ARMY-RAY & JOAN KROC CORPS CTR - 967 DEWEY STREET SW - ATLANTA, GA 30310	58-0660607 3		0.	23,503.	OTHER	FOOD	SEE PART IV
SALVATION ARMY RED SHIELD 469 MARIETTA STREET NW ATLANTA, GA 30313	58-0660607 3		0.	220,490.	OTHER	FOOD	SEE PART IV
SALVATION ARMY-MARIETTA CORPS 202 WATERMAN STREET MARIETTA, GA 30060	58-0660607 3		0.	5,455.	OTHER	FOOD	SEE PART IV
SALVATION ARMY-GRIFFIN 725 MERIWETHER STREET GRIFFIN, GA 30224	58-0660607 3		0.	2,163.	OTHER	FOOD	SEE PART IV
SALVATION ARMY-GRIFFIN-SHELTER 329 N. 13TH ST. GRIFFIN, GA 30224	58-0660607 3		0.	37,365.	OTHER	FOOD	SEE PART IV
SOLDIERS' ANGELS 250 NORTH ARCADIA AVE. DECATUR, GA 30030	20-0583415 3		0.	617,383.	OTHER	FOOD	SEE PART IV

Schedule I (Form 990)

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SALVATION ARMY SHELTER - GAINESVILLE - 681 DORSEY STREET - GAINESVILLE, GA 30503	58-0660607 3		0.	7,244.	OTHER	FOOD	SEE PART IV
SANCTIFIED MT. ZION CHURCH 1324 EASON STREET NW ATLANTA, GA 30314	58-1869769 3		0.	4,874.	OTHER	FOOD	SEE PART IV
ANDREW P. STEWART CENTER 987 IRA STREET SW ATLANTA, GA 30310	58-2204831 3		0.	135,113.	OTHER	FOOD	SEE PART IV
SALEM MISSIONARY BAPTIST CHURCH 4700 CHURCH STREET NW LILBURN, GA 30047	58-2198925 3		0.	39,562.	OTHER	FOOD	SEE PART IV
STRAIGHT STREET REVOLUTION 2145 CENTENNIAL DRIVE GAINESVILLE, GA 30504	27-3193902 3		0.	70,880.	OTHER	FOOD	SEE PART IV
STRAIGHT STREET - BEAUTIFUL FEET 4828 WEAVER ROAD GAINESVILLE, GA 30507	27-3193902 3		0.	2,248.	OTHER	FOOD	SEE PART IV
SHILOH SEVENTH DAY ADVENTIST CHURCH - 810 CHURCH STREET - SMYRNA, GA 30080	58-6002263 3		0.	871,863.	OTHER	FOOD	SEE PART IV
STOREHOUSE MINISTRIES 1348 CANTON ROAD MARIETTA, GA 30066	58-0939814 3		0.	1,047,412.	OTHER	FOOD	SEE PART IV
STOREHOUSE MINISTRIES-BRAVES STADIUM - 755 BATTERY AVE SE - ATLANTA, GA 30339	58-0939814 3		0.	104,128.	OTHER	FOOD	SEE PART IV

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SOUTHWEST ECUMENICAL EMERGENCY ASSISTANC - 1040 RALPH DAVID ABERNATHY BLVD SW - ATLANTA, GA 30310	58-2554869 3		0.	1,429,190.	OTHER	FOOD	SEE PART IV
ST. JOHN BAPTIST CHURCH 741 E.E. BUTLER PARKWAY GAINESVILLE, GA 30501	77-0659212 3		0.	11,242.	OTHER	FOOD	SEE PART IV
SIMPSON ROAD BAPTIST CHURCH 2015 SIMPSON RD. ATLANTA, GA 30314	46-1686232 3		0.	23,642.	OTHER	FOOD	SEE PART IV
STONE MOUNTAIN SDA CHURCH 1350 SILVER HILL ROAD STONE MOUNTAIN, GA 30087	58-0692294 3		0.	282,214.	OTHER	FOOD	SEE PART IV
SOUTH EAST ATLANTA SEVENTH DAY BAPTIST C - 60 DAILEY MILL ROAD - MCDONOUGH, GA 30253	39-0856256 3		0.	10,723.	OTHER	FOOD	SEE PART IV
SHILOH-MCDONOUGH COMMUNITY OUTREACH - 263 MACON STREET - MCDONOUGH, GA 30253	20-8591085 3		0.	377,157.	OTHER	FOOD	SEE PART IV
SHILOH BAPTIST COMMUNITY DEVELOPMENT - 8955 HIGHWAY 54 - JONESBORO, GA 30238	83-2377858 3		0.	7,371.	OTHER	FOOD	SEE PART IV
SAINT PETER MINISTRIES, INC. - FEED THE - 1558 VENETIAN DRIVE SW - ATLANTA, GA 30311	20-0768702 3		0.	67,499.	OTHER	FOOD	SEE PART IV
ST MARTINS EPISCOPAL CHURCH DBA SUTHERS - 3110 ASHFORD DUNWOODY RD NE - ATLANTA, GA 30319	23-6393377 3		0.	205,032.	OTHER	FOOD	SEE PART IV

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SMALL TREASURES LEARNING CENTER INC. - 522 WEST BROAD STREET - GRIFFIN, GA 30223	36-4540637 3		0.	73,492.	OTHER	FOOD	SEE PART IV
SAFE HAVEN TOTAL RESTORATION 2202 FAIRBURN ROAD DOUGLASVILLE, GA 30135	06-1687074 3		0.	32,634.	OTHER	FOOD	SEE PART IV
SPRINGFIELD CHRISTIAN MINISTRIES INC - 1877 IRIS DRIVE SE - CONYERS, GA 30013	58-1541317 3		2,500.	674,085.	OTHER	FOOD	SEE PART IV
SUGARLOAF KOREAN BAPTIST CHURCH 1664 OLD PEACHTREE RD NW SUWANEE, GA 30024	62-0535346 3		0.	3,533.	OTHER	FOOD	SEE PART IV
SECOND CHANCE FOR SUCCESS 1246 CONCORD RD. SE, STE 201 SMYRNA, GA 30080	71-0880272 3		0.	7,242.	OTHER	FOOD	SEE PART IV
SCHAFFER ROAD CHURCH OF CHRIST 554 SCHAFFER ROAD MARIETTA, GA 30060	58-2432452 3		0.	11,975.	OTHER	FOOD	SEE PART IV
SPALDING COUNTY COLLABORATIVE 1233 JACKSON RD GRIFFIN, GA 30223	58-2602454 3		0.	1,559.	OTHER	FOOD	SEE PART IV
STEP BY STEP RECOVERY INC. 191 PLAINVIEW DR LAWRENCEVILLE, GA 30046	20-2822343 3		0.	15,667.	OTHER	FOOD	SEE PART IV
SECOND CHANCE MINISTRY, INC 111 SHORT RD JACKSON, GA 30233	90-0972955 3		0.	3,934.	OTHER	FOOD	SEE PART IV

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SKYLAND UNITED METHODIST CHURCH 1850 SKYLAND TER NE, BROOKHAVEN, GA 30319	20-1122994 3		0.	1,905.	OTHER	FOOD	SEE PART IV
SOUTHERN GRACE HOSPICE FOUNDATION, INC. - 79 LAWRENCEVILLE ST - MCDONOUGH, GA 30253	81-1056293 3		0.	33,436.	OTHER	FOOD	SEE PART IV
STANDING UP SAINTS FOR MESSIAH 619 JONES ST CEDARTOWN, GA 30125	58-1599045 3		0.	6,174.	OTHER	FOOD	SEE PART IV
ST DOMINIC SAVIO MOTIVATIONAL PLACE - 4077 FLATSHOALS PKWY - DECATUR, GA 30034	47-3911202 3		0.	3,898.	OTHER	FOOD	SEE PART IV
JN2117 FEED MY SHEEP - SATISFEED 4830 RIVER GREEN PKW DULUTH, GA 30096	83-1102691 3		0.	604,584.	OTHER	FOOD	SEE PART IV
SANKOFA HOUSE 1240 SIGMAN RD NW CONYERS, GA 30012	47-4556275 3		0.	233,207.	OTHER	FOOD	SEE PART IV
SANKOFA HOUSE-CROSSROADS PRESB MOBILE PA - 5587 REDAN RD - STONE MOUNTAIN, GA 30088	47-4556275 3		0.	178,521.	OTHER	FOOD	SEE PART IV
SANKOFA HOUSE-WHITE OAK HILLS MOBILE PAN - 5171 REDAN ROAD - STONE MOUNTAIN, GA 30088	47-4556275 3		0.	95,929.	OTHER	FOOD	SEE PART IV
TURNER HILL COMMUNITY DEVELOPMENT 527 LAWRENCE STREET MARIETTA, GA 30060	02-0560194 3		500.	165,537.	OTHER	FOOD	SEE PART IV

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NEW DAY CHURCH OF THE NAZARENE, INC - 8561 GA. HWY 85 - RIVERDALE, GA 30296	44-0552034 3		0.	218,543.	OTHER	FOOD	SEE PART IV
TAMEKA'S HOUSE OF HOPE INC. 2007 2ND AVE DECATUR, GA 30032	81-4962050 3		2,500.	38,274.	OTHER	FOOD	SEE PART IV
TRAVELERS REST MBC - GLAD MORNING COMM. - 2112 REX ROAD - MORROW, GA 30260	90-0077538 3		0.	13,500.	OTHER	FOOD	SEE PART IV
TEACH "O" REA PREPARATORY PRESCHOOL, INC - 791 RAYS ROAD - STONE MOUNTAIN, GA 30083	20-8507403 3		2,500.	68,949.	OTHER	FOOD	SEE PART IV
TOCO HILLS COMMUNITY ALLIANCE 1790 LAVISTA ROAD NE ATLANTA, GA 30329	80-0037942 3		1,000.	1,003,720.	OTHER	FOOD	SEE PART IV
TIMOTHY LUTHERAN CH-TIMOTHY'S CUPBOARD - 556 ARNOLD MILL ROAD - WOODSTOCK, GA 30188	43-0658188 3		0.	934,227.	OTHER	FOOD	SEE PART IV
EUGENE AND SCILLA RICE MINISTRIES 110 HOWARD STREET NE ATLANTA, GA 30317	27-3908706 3		0.	53,294.	OTHER	FOOD	SEE PART IV
TRINITY HOUSE 21 BELL ST NE ATLANTA, GA 30303	58-1804368 3		0.	175,378.	OTHER	FOOD	SEE PART IV
COMMUNITY CONNECTIONS OF ATLANTA 5705 MEMORIAL DRIVE STONE MOUNTAIN, GA 30083	20-8885445 3		0.	1,163,086.	OTHER	FOOD	SEE PART IV

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THREE ANGELS FOOD NETWORK INC. 1318 OLYMPIC COURT SUITE A CONYERS, GA 30012	81-3837391 3		0.	407,184.	OTHER	FOOD	SEE PART IV
TRUE DELIVERANCE OUTREACH MINISTRIES - 823 DILL AVE - ATLANTA, GA 30310	26-3950895 3		0.	62,831.	OTHER	FOOD	SEE PART IV
UNDER THE BRIDGE MINISTRIES - LUMPKIN CO - 523 BEN HIGGINS ROAD - DAHLONEGA, GA 30533	47-1414203 3		0.	23,604.	OTHER	FOOD	SEE PART IV
UNSEEN HANDS 4632 AURARIA RD DAHLONEGA, GA 30533	27-1166762 3		0.	3,526.	OTHER	FOOD	SEE PART IV
UNION BAPTIST CHURCH 251 BONA ROAD BUFORD, GA 30518	58-2075409 3		0.	20,314.	OTHER	FOOD	SEE PART IV
UNITED IN FAITH CHRISTIAN MINISTRY 330 VIEWPOINT DRIVE JACKSON, GA 30233	27-0034048 3		0.	162,481.	OTHER	FOOD	SEE PART IV
VIETNAMESE ELDER ASSOCIATION SOUTH 1171 MAIN ST FORREST PARK, GA 30297	36-4808186 3		0.	1,000,823.	OTHER	FOOD	SEE PART IV
SENIOR COMMUNITY OUTREACH CENTER 5961 LIVE OAK PKWY NORCROSS, GA 30093	36-4808186 3		0.	598,559.	OTHER	FOOD	SEE PART IV
VINTAGE 242 CHURCH INC. 8492 HIRAM ACWORTH HWY DALLAS, GA 30157	26-3726163 3		0.	2,201.	OTHER	FOOD	SEE PART IV

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VICTORY BAPTIST CHURCH 15 HENDRIX RD ROCKMART, GA 30153	58-0566245	3	0.	153,432.	OTHER	FOOD	SEE PART IV
VICTORY IN CHRIST MINISTRIES 635 DENHAM ST RIVERDALE, GA 30274	81-1903012	3	0.	284,203.	OTHER	FOOD	SEE PART IV
SOUTH ATLANTA ASIAN COMMUNITY 4917 JONESBORO RD FOREST PARK, GA 30297	82-1316186	3	2,500.	3,212,923.	OTHER	FOOD	SEE PART IV
WALTON COUNTY SENIOR CITIZENS COUNCIL - 1400 SOUTH MADISON AVE. - MONROE, GA 30655	58-1076363	3	0.	20,203.	OTHER	FOOD	SEE PART IV
WEEKES HOUSE, INC. 5430 ROCKY PINE DR. LITHONIA, GA 30038	58-2372898	3	0.	8,289.	OTHER	FOOD	SEE PART IV
WORDS OF FAITH AME CHURCH 5719 GARNER ROAD MABLETON, GA 30126	53-0204696	3	0.	1,027.	OTHER	FOOD	SEE PART IV
WALKER BAPTIST CHURCH 1150 GOOD HOPE ROAD MONROE, GA 30655	58-1527886	3	0.	24,196.	OTHER	FOOD	SEE PART IV
WHEAT ST. BAPT.-ACTION MISSION MINISTRY - 359 AUBURN AVE NE - ATLANTA, GA 30312	20-1459636	3	0.	20,047.	OTHER	FOOD	SEE PART IV
WOODSTOCK CHRISTIAN CHURCH 7700 HIGHWAY 92 WOODSTOCK, GA 30189	54-1111089	3	0.	36,079.	OTHER	FOOD	SEE PART IV

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WORD OF GOD IN CHRIST FULL GOSPEL 1401 LAKEWOOD AVENUE SE ATLANTA, GA 30315	31-1574106	3	0.	40,147.	OTHER	FOOD	SEE PART IV
WORLD HARVEST CHURCH-HIGH HOPE 320 HARDCRABBLE ROAD ROSWELL, GA 30075	58-2495872	3	0.	70,724.	OTHER	FOOD	SEE PART IV
WORLD CHANGERS CHURCH INTERNATIONAL - 2500 BURDETTE ROAD - COLLEGE PARK, GA 30349	58-2158071	3	2,500.	1,529,953.	OTHER	FOOD	SEE PART IV
WOMEN'S RESOURCE CENTER OF DEKALB CONFIDENTIAL DECATUR, GA 30031	58-1698233	3	0.	5,476.	OTHER	FOOD	SEE PART IV
WESTCARE YOUTH ACADEMY 2385 OAK GROVE CHURCH RD CARROLL, GA 30117	25-1903653	3	0.	10,388.	OTHER	FOOD	SEE PART IV
WOMEN OF WORTH 702 US 29 N NEWNAN, GA 30263	84-4941950	3	0.	1,626.	OTHER	FOOD	SEE PART IV
CLUB XHELL YOUTH LIFE CENTER 216 VALLEY HILL RD SW RIVERDALE, GA 30274	95-4797322	3	0.	12,418.	OTHER	FOOD	SEE PART IV
COWART FAMILY YMCA 3692 ASHFORD DUNWOODY RD ATLANTA, GA 30319	58-0566253	3	0.	474,187.	OTHER	FOOD	SEE PART IV
YOUR NEW BEST FRIEND 100 HUNTER ROAD STE A DOUGLASVILLE, GA 30134	47-4743914	3	0.	49,267.	OTHER	FOOD	SEE PART IV

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EARLY LEARNING SCHOLARS & FAMILY SERVICE - 3534 CLARKSTON INDUSTRIAL BLVD - CLARKSTON, GA 30021	74-3225684	3	0.	203,090.	OTHER	FOOD	SEE PART IV
WADE WALKER FAMILY YMCA 5605 ROCKBRIDGE RD SW STONE MOUNTAIN, GA 30088	58-0566253	3	0.	1,011,208.	OTHER	FOOD	SEE PART IV
YC DIVINE PURPOSE MINISTRY 2362 LAWRENCEVILLE HWY DECATUR, GA 30030	81-1038135	3	0.	256,116.	OTHER	FOOD	SEE PART IV
YMCA-CARL E. SANDERS AT BUCKHEAD 1160 MOORES MILL RD. ATLANTA, GA 30327	58-0566253	3	0.	102,646.	OTHER	FOOD	SEE PART IV
YOUTHFUL EXPRESSIONS FAMILY OUTREACH INC - 11961 VETERANS MEMORIAL HWY - DOUGLASVILLE, GA 30135	82-4072298	3	0.	22,465.	OTHER	FOOD	SEE PART IV
YMCA- VILLAGES AT CARVER 1600 PRYOR ROAD ATLANTA, GA 30315	58-0566253	3	0.	1,131,758.	OTHER	FOOD	SEE PART IV
ISLAND HARVEST 40 MARCUS BLVD HAUPPAUGE, NY 11788	11-3136350	3	0.	199,962.	OTHER	FOOD	SEE PART IV
FEEDING NORTHEAST FLORIDA 1116 EDGEWOOD AVE N D/E JACKSONVILLE, FL 32254	59-1965600	3	0.	44,215.	OTHER	FOOD	SEE PART IV
GEORGIA MOUNTAIN FOOD BANK P.O. BOX 233 GAINESVILLE, GA 30503	26-2787610	3	45,000.	4,371,409.	OTHER	FOOD	SEE PART IV

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD BANK OF NORTHEAST GEORGIA P.O. BOX 48857 ATHENS, GA 30604	58-1938066 3		0.	377,298.	OTHER	FOOD	SEE PART IV
MONTGOMERY AREA FOOD BANK 521 TRADE CENTER ST. MONTGOMERY, AL 36108	63-0931846 3		0.	5,917.	OTHER	FOOD	SEE PART IV
EL PASOANS FIGHTING HUNGER FOOD BANK - 9541 PLAZA CIR - EL PASO, TX 79927	45-2893839 3		0.	36,605.	OTHER	FOOD	SEE PART IV
SAN ANTONIO FOOD BANK 5200 ENRIQUE M. BARRERA PKWY SAN ANTONIO, TX 78227	74-2122979 3		0.	17,752.	OTHER	FOOD	SEE PART IV
ARKANSAS FOOD BANK 4301 WEST 65TH ST LITTLE ROCK, AR 72209	71-0596734 3		0.	225,367.	OTHER	FOOD	SEE PART IV
MOUNTAINEER FOOD BANK 484 ENTERPRISE DRIVE GASSAWAY, WV 26624	55-0611100 3		0.	82,515.	OTHER	FOOD	SEE PART IV
GLEANERS FOOD BANK OF INDIANA 3737 WALDEMERE AVE INDIANAPOLIS, IN 46241	35-1483868 3		0.	467,027.	OTHER	FOOD	SEE PART IV
ROADRUNNER FOOD BANK 5840 OFFICE BLVD NE ALBUQUERQUE, NM 87109	85-0278525 3		0.	5,917.	OTHER	FOOD	SEE PART IV
BROTHERHOOD OF THE CROSS AND STAR CENTRA - 345 BLAIR VILLA DR - ATLANTA, GA 30354	20-5143083 3		5,000.	0.			SEE PART IV

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER HELPING OBESITY IN CHILDREN END S - 1275 SHILOH ROAD, NW - KENNESAW, GA 30144	01-0693398 3		2,750.	0.			SEE PART IV
CHANGING SOUTHWEST COMMUNITY D 3350 GREENBRIAR PARKWAY ATLANTA, GA 30331	27-3452587 3		20,000.	0.			SEE PART IV
CHRIST FIRST COMMUNITY, BAPTIST 778 DEER LAKE TRAIN STONE MOUNTAIN, GA 30087	46-5399411 3		11,000.	0.			SEE PART IV
COSMOPOLITAN AME CHURCH INC 170 VINE ST, NW ATLANTA, GA 30314	58-1548671 3		5,000.	0.			SEE PART IV
DECATUR ALL NATIONS COMMUNITY CHURCH - 3840 KENSINGTON RD. - DECATUR, GA 30032	58-6068437 3		250.	0.			SEE PART IV
DOROTHY'S HELPING HANDS INC 2685 BARGE ROAD ATLANTA, GA 30331	46-3888339 3		7,500.	0.			SEE PART IV
EMMA'S PLACE INC. 1651 PHOENIX BLVD, SUITE 2 COLLEGE PARK, GA 30349	81-2704613 3		7,500.	0.			SEE PART IV
FEED MY SHEEP INC 4830 RIVER GREEN PARKWAY, SUITE 200 DULUTH, GA 30096	83-1102691 3		11,000.	0.			SEE PART IV
GFBA/SOUTHEAST REGIONAL COOPERATIVE - 732 JOSEPH E LOWERY BLVD - ATLANTA, GA 30318	82-2707649 3		50,000.	0.			SEE PART IV

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE HENRY W GRADY HEALTH SYSTEM FOUNDATION - 191 PEACHTREE STREET NE - ATLANTA, GA 30303	58-2130437 3		25,000.	0.			SEE PART IV
HANDS ON ATLANTA 600 MEANS STREET, SUITE 100 ATLANTA, GA 30318	58-1861026 3		18,334.	0.			SEE PART IV
HEARD COUNTY COMMUNITY PARTNER 1191 FRANKLIN PARKWAY FRANKLIN, GA 30217	30-0291870 3		14,000.	0.			SEE PART IV
HEARTS AGAINST HUNGER INC. 530 HIGHLAND STATION DR SUWANEE, GA 30024	82-3114888 3		6,000.	0.			SEE PART IV
HOPE ATLANTA 34 PEACHTREE STREET, SUITE 700 ATLANTA, GA 30303	58-0566247 3		25,000.	0.			SEE PART IV
HOUSE OF PRAYER CHURCH P.O. BOX 1475 BLAIRSVILLE, GA 30514	58-1721845 3		15,000.	0.			SEE PART IV
JEWISH FAMILY & CAREER SERVICE 4549 CAMBLEE DUNWOODY ROAD ATLANTA, GA 30338	58-1479212 3		10,000.	0.			SEE PART IV
KINGDOM LIFE CHRISTIAN CENTER 2360 MELLON COURT DECATUR, GA 30035	46-1130519 3		2,500.	0.			SEE PART IV
LOVE OUTREACH MISSION 1294 BRASELTON HIGHWAY LAWRENCEVILLE, GA 30043	85-3334346 3		30,000.	0.			SEE PART IV

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAKING A WAY HOUSING INC. 377 WESTCHESTER BLVD. ATLANTA, GA 30314	16-1644159 3		2,500.	0.			SEE PART IV
NEW BIRTH MISSIONARY BAPTIST 6400 WOODROW RD LITHONIA, GA 30038	58-1711477 3		2,500.	0.			SEE PART IV
NEW CITY CHURCH 3355 OLD JONESBORO ROAD FAIRBURN, GA 30213	58-1337931 3		28,000.	0.			SEE PART IV
NEW LIFE PRESBYTERIAN CHURCH 6600 OLD NATIONAL HIGHWAY ATLANTA, GA 30349	58-1819656 3		250.	0.			SEE PART IV
OASIS INTERNATIONAL WORSHIP 1093 PANOLA ROAD STONE MOUNTAIN, GA 30088	58-2576109 3		2,500.	0.			SEE PART IV
ONE ROOF ECUMENICAL ALLIANCE OUTREACH, I - 255 TEMPLE AVENUE - NEWNAN, GA 30263	26-0157086 3		250.	0.			SEE PART IV
PROFOUND COMMUNITY NETWORKERS 1435 KLONDIKE RD SW CONYERS, GA 30094	37-2445089 3		2,500.	0.			SEE PART IV
PROVIDENCE BAPTIST CHURCH S. ATLANTA - 1773 HAWTHORNE AVENUE - COLLEGE PARK, GA 30337	58-1592206 3		17,500.	0.			SEE PART IV
REAL LIFE CENTER INC 975 HWY 74 NORTH TYRONE, GA 30290	58-2410375 3		35,000.	0.			SEE PART IV

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAINT PETER MINISTRIES, INC. 2893 KAREN ROAD COLLEGE PARK, GA 30337	20-0768702 3		27,500.	0.			SEE PART IV
SOLDIERS MINISTRIES INC 5567 MEMORIAL DRIVE, SUITE A STONE MOUNTAIN, GA 30083	52-2309252 3		2,500.	0.			SEE PART IV
SOUTHWEST ECUMENICAL EMERGENCY ASSISTANC - 1040 RALPH DAVID ABERNATHY BLVD SW - ATLANTA, GA 30310	58-2554869 3		36,000.	0.			SEE PART IV
ST PATRICK'S EPISCOPAL CHURCH 4755 NORTH PEACHTREE ROAD ATLANTA, GA 30338	23-7061425 3		250.	0.			SEE PART IV
ST PETER & PAUL CATHOLIC CHURCH 2560 TILSON ROAD DECATUR, GA 30084	58-6014912 3		250.	0.			SEE PART IV
STREETWISE GEORGIA, INC. 1770 CEDARS ROAD LAWRENCEVILLE, GA 30045	94-3440809 3		35,500.	0.			SEE PART IV
SUTHERS CENTER OF CHRISTIAN O 3110 ASHFORD DUNWOODY RD NE ATLANTA, GA 30319	58-0960379 3		250.	0.			SEE PART IV
THE COMMON MARKET OF GEORGIA 428 E ERIE AVE PHILADELPHIA, PA 19134	47-4769308 3		16,700.	0.			SEE PART IV
THE SALVATION ARMY, A GEORGIA 1000 CENTER PLACE NORCROSS, GA 30093	58-0660607 3		26,500.	0.			SEE PART IV

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ATLANTA UNION MISSION CORPORATION 253 BOLTON RD NW ATLANTA, GA 30318	57-0572430	3	2,500.	0.			SEE PART IV
HELPING HANDS ENDING HUNGER INC 2014 S LONG HOLLOW ROAD TRION, GA 30753	81-3382807	3	2,500.	0.			SEE PART IV
MT. PLEASANT BAPTIST CHURCH 17 MELDON AVENUE ATLANTA, GA 30315	58-1885449	3	2,500.	0.			SEE PART IV
ACFB SUPPORT ORGANIZATION, INC. 3400 NORTH DESERT DRIVE ATLANTA, GA 30344	83-1002365	3	4,091,013.	0.			SEE PART IV



**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

GRANT EXPENDITURES ARE REVIEWED ON A REGULAR BASIS TO ENSURE THE RECIPIENT IS USING THE FUNDS AWARDED FOR THE INTENDED PURPOSE.

SCHEDULE I, PART II

COLUMN (F): METHOD OF VALUATION

FOOD AND OTHER GROCERY PRODUCTS DISTRIBUTED ARE VALUED AS THE TOTAL POUNDS OF DONATED PRODUCTS DISTRIBUTED TIMES \$1.70 WHOLESALE VALUE PER POUND.



**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the organization

**ATLANTA COMMUNITY FOOD BANK, INC.**

Employer identification number

**58-1376648**

**Part I Questions Regarding Compensation**

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

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

Schedule J (Form 990) 2020

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KYLE WAIDE CHIEF EXECUTIVE OFFICER	(i)	258,849.	56,858.	0.	17,243.	14,443.	347,393.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DEBRA H SHOAF CHIEF FINANCIAL OFFICER	(i)	169,956.	33,494.	0.	13,152.	10,878.	227,480.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SARAH FONDER-KRISTY CHIEF DEVELOPMENT OFFICER	(i)	158,363.	32,663.	0.	12,347.	10,192.	213,565.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) SHERI FOSTER VP OF HUMAN RESOURCES	(i)	135,236.	27,602.	0.	10,403.	7,736.	180,977.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) STACEY GREENE-KOEHNKE CHIEF OPERATIONS OFFICER	(i)	187,579.	37,027.	0.	14,491.	7,489.	246,586.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JONATHAN WEST VP OF PROGRAMS	(i)	127,790.	27,066.	0.	10,318.	15,468.	180,642.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) HEATHER JAIME TREL SCHLESINGER CHIEF MARKETING OFFICER	(i)	141,497.	26,483.	0.	11,099.	875.	179,954.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **ATLANTA COMMUNITY FOOD BANK, INC.** Employer identification number **58-1376648**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	50,381	98,181,624.	NATIONAL STUDY BY
20 Drugs and medical supplies	X			FEEDING AMERICA
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( MISCELLANEOUS )	X	22	33,973.	FAIR MARKET VALUE
26 Other ( )				
27 Other ( )				
28 Other ( )				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

SCHEDULE M, LINE 32B:

STOCK DONATIONS ARE RECEIVED INTO OUR TRUST ACCOUNT MANAGED BY A THIRD PARTY; OUR TRUST AGREEMENT HAS A STANDING ORDER TO LIQUIDATE STOCKS UPON RECEIPT.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

ATLANTA COMMUNITY FOOD BANK, INC.

Employer identification number

58-1376648

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

THE CORONAVIRUS PANDEMIC HAD FAR-REACHING IMPACT ON THE FOOD BANK'S OPERATIONS. UNPRECEDENTED INCREASES IN NEED FOR FOOD ASSISTANCE CAUSED BY THE DISRUPTION TO THE ECONOMY DROVE ACCELERATED FOOD DISTRIBUTION THROUGHOUT OUR FISCAL YEAR. ADDITIONALLY, THE TEMPORARY CLOSURES AT PARTNER LOCATIONS AND THE NEED FOR SOCIAL DISTANCING TO PROTECT THE PUBLIC AND STAFF RESULTED IN A REDUCTION IN PROGRAM ACTIVITY HEAVILY RELIANT ON PERSON-TO-PERSON INTERACTION.

FOOD DISTRIBUTION:

IN FY 2020/21, THE FOOD BANK DISTRIBUTED OVER 116 MILLION POUNDS OF FOOD AND GROCERIES THROUGH ITS NETWORK OF NONPROFIT PARTNER AGENCIES OFFERING FOOD ASSISTANCE PROGRAMS. COMBINED WITH APPROVED SNAP APPLICATIONS, THIS WAS ENOUGH FOOD FOR OVER 96.5 MILLION MEALS AND REPRESENTS A 39% GROWTH IN MEALS OVER PRIOR YEAR.

THE FOOD BANK RECOGNIZES THAT HUNGER AND MALNUTRITION GO HAND IN HAND. THEREFORE, WE EMPHASIZE THE NUTRITIONAL QUALITY OF THE FOOD DISTRIBUTED. IN FY 2020/21, WE DISTRIBUTED OVER 21.4 MILLION POUNDS OF FRESH PRODUCE TO PARTNER AGENCIES. FRESH PRODUCE IS NOW THE FOOD BANK'S LARGEST CATEGORY OF FOOD DISTRIBUTED, INCREASING 25% OVER THE PRIOR YEAR.

THE FOOD BANK'S RETAIL STORE DONATION PROGRAM HAS ALSO BEEN



Name of the organization ATLANTA COMMUNITY FOOD BANK, INC.	Employer identification number 58-1376648
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INSTRUMENTAL TO THE INCREASED VOLUME OF NUTRITIOUS FOOD DISTRIBUTED TO PARTNER AGENCIES. IN FY 2020/21, THE FOOD BANK RECOVERED OVER 24.2 MILLION POUNDS OF FOOD FROM 539 RETAIL GROCERY STORES THROUGHOUT ITS SERVICE TERRITORY. IN MANY INSTANCES WE CONNECT OUR PARTNER AGENCIES DIRECTLY WITH THESE RETAIL STORES, SPEEDING UP RECOVERY WHILE REDUCING TRANSPORTATION COSTS AND MINIMIZING FOOD HANDLING. THE NUMBER OF STORES PARTICIPATING IN DIRECT-TO-PARTNER AGENCY DELIVERY (ENABLED DELIVERIES) WAS 441.

WE RELY HEAVILY ON VOLUNTEERS, INCLUDING INDIVIDUALS OR BUSINESS, COMMUNITY AND SCHOOL GROUPS TO HELP ACHIEVE OUR HIGH LEVEL OF IMPACT. IN FY 2020/21, 1,300 VOLUNTEERS GAVE APPROXIMATELY 15,543 HOURS OF THEIR TIME THE EQUIVALENT OF 7 FULL-TIME STAFF MEMBERS. VOLUNTEERS SORTED AND REPACKED FOOD AND PROVIDED MANY OTHER ESSENTIAL SERVICES. DURING FY 2020-21, THE FOOD BANK CONTINUED TO CURTAIL VOLUNTEER ACTIVITIES ON SITE. VOLUNTEER ACTIVITIES WILL BE RETURNED TO PRIOR LEVELS OR ABOVE WHEN IT IS SAFE TO DO SO.

MOBILE FOOD PANTRIES ALSO ARE AN IMPORTANT PART OF OUR STRATEGY TO GET MORE FOOD INTO THE COMMUNITIES THAT WE SERVE. IN PARTNERSHIP WITH THE FOOD BANK, AGENCIES IN 18 COUNTIES HOSTED A TOTAL OF 855 MOBILE PANTRIES IN FY 2020/21 SERVING 165,000 HOUSEHOLDS AND DISTRIBUTING OVER 9.3 MILLION POUNDS OF FOOD.

IN ADDITION TO THE MOBILE PANTRIES, WE IMPLEMENTED A COVID PANDEMIC RESPONSE THAT INCLUDED A MIX OF COMMUNITY, FAITH-BASED, AND SCHOOL PARTNERS. THESE PARTNERS HOSTED A TOTAL OF 1,424 COVID DISTRIBUTIONS IN 14 COUNTIES, SERVED OVER 356,000 HOUSEHOLDS AND PROVIDED OVER 15.7

Name of the organization

ATLANTA COMMUNITY FOOD BANK, INC.

Employer identification number

58-1376648

MILLION POUNDS OF FOOD.

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

IN FY 2020/21, OUR EDUCATION TEAM CONDUCTED 141 HUNGER 101 WORKSHOPS AND EDUCATION SESSIONS FOR MORE THAN 2,178 INDIVIDUALS FROM ELEMENTARY SCHOOLS, MIDDLE SCHOOLS, HIGH SCHOOLS, COLLEGES, UNIVERSITIES, FAITH, CIVIC, AND CORPORATE GROUPS.

IN FY 2020/21, BENEFITS OUTREACH STAFF COMPLETED 5,605 SNAP(FOOD STAMP) APPLICATIONS FOR CLIENTS, A 29% DECREASE VERSUS PRIOR YEAR. THE REDUCTION IN APPLICATIONS PROCESSED IS THE DIRECT RESULT OF THE CORONAVIRUS PANDEMIC, WITH MANY OF OUR PARTNER LOCATIONS LIMITING OR TEMPORARILY CEASING OPERATIONS, IMPACTING OUR ABILITY TO CONDUCT FACE-TO-FACE APPLICATION SCREENINGS.

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

MEMBERS OF THE FINANCE COMMITTEE WERE GIVEN A FULL COPY OF THE 990; A MEETING WAS HELD WITH THE FINANCE COMMITTEE, THE CFO, AND THE AUDITOR TO REVIEW THE REPORT IN DETAIL. THE FINANCE COMMITTEE THEN MADE A PRESENTATION AND RECOMMENDATION TO THE FULL BOARD TO ACCEPT THE 990. AN ELECTRONIC VERSION OF THE 990 WAS THEN SENT TO ALL BOARD MEMBERS AND THEY WERE GIVEN 24 HOURS TO REVIEW AND TO REPLY WITH A VOTE TO ACCEPT AND FILE OR NOT TO ACCEPT AND FILE. A TABULATION OF VOTES CAST BY EMAIL WAS KEPT.

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

ANNUALLY, ALL MEMBERS OF THE BOARD ARE ASKED TO REVIEW THE POLICY AND UPDATE THEIR INFORMATION. ANY POTENTIAL CONFLICTS ARE REPORTED TO THE

Name of the organization

ATLANTA COMMUNITY FOOD BANK, INC.

Employer identification number

58-1376648

CHAIR OF THE BOARD SO THAT MEMBERS WITH CONFLICTS ARE NOT ALLOWED TO PARTICIPATE IN THE VOTE.

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

COMPENSATION OF CEO, EXECUTIVE DIRECTOR, OR TOP MANAGEMENT OFFICIAL:

THE VP OF HUMAN RESOURCES COMPILED COMPENSATION DATA FROM SEVERAL SOURCES THAT PROVIDED COMPARABLE DATA (SUCH AS THE GEORGIA CENTER FOR NONPROFITS COMPENSATION SURVEY AND FEEDING AMERICA NATIONAL SURVEY OF ALL FOOD BANKS). THIS INFORMATION WAS PROVIDED TO THE HR COMMITTEE AND EXECUTIVE COMMITTEE OF THE BOARD. THE EXECUTIVE COMMITTEE THEN DECIDED ON AN APPROPRIATE MERIT INCREASE FOR THE CEO BASED ON PERFORMANCE AND ACCOMPLISHMENTS OF THE ORGANIZATION FOR THE YEAR. THIS WAS DOCUMENTED AND COMMUNICATED DIRECTLY TO THE VP OF HUMAN RESOURCES FOR IMPLEMENTATION.

COMPENSATION OF OFFICERS OR KEY EMPLOYEES:

THE CEO PRESENTED RECOMMENDATIONS TO THE HR COMMITTEE OF THE BOARD FOR MERIT INCREASES AND BONUSES FOR THE VPS AND FOR THE CFO. THESE RECOMMENDATIONS WERE BASED ON THE GOALS AND OBJECTIVES ACHIEVED FOR THE YEAR. THE HR COMMITTEE MADE SOME REVISIONS TO THE PROPOSAL AND THEN SUBMITTED THEIR RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE BOARD. THE EXECUTIVE COMMITTEE REVIEWED AND APPROVED THE PROPOSAL FROM THE HR COMMITTEE AND THE INFORMATION WAS RECORDED AND COMMUNICATED TO THE VP OF HUMAN RESOURCES FOR IMPLEMENTATION.

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

990S AND ANNUAL REPORT ARE PUBLISHED ON OUR WEBSITE; IN 2012 THE AUDITED FINANCIAL STATEMENTS WERE PUBLISHED ON OUR WEBSITE AND WILL CONTINUE TO BE PUBLISHED IN SUBSEQUENT YEARS; CONFLICT OF INTEREST POLICY IS NOT

Name of the organization <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	Employer identification number <b>58-1376648</b>
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**PUBLISHED; OTHER GOVERNING DOCUMENTS (I.E. BYLAWS, ETC) ARE NOT CURRENTLY AVAILABLE FOR PUBLIC INSPECTION BUT WOULD BE PROVIDED UPON REQUEST.**

**FORM 990, PART VIII, LINE 1E, GOVERNMENT GRANTS & CONTRIBUTIONS THE TOTAL FOR GOVERNMENT GRANTS & CONTRIBUTIONS INCLUDES MONETARY & NON-CASH AMOUNTS FOR THE FISCAL YEAR ENDING 06-30-21.**

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the organization **ATLANTA COMMUNITY FOOD BANK, INC.** Employer identification number **58-1376648**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
FOOD WELL ALLIANCE, INC. - 47-4363668 970 JEFFERSON STREET NW ATLANTA, GA 30318	LOCAL FOOD MOVEMENT	GEORGIA	501(C)(3)	TYPE I SUPPORTING		X	
ACFB SUPPORT ORGANIZATION, INC. - 83-1002365 3400 NORTH DESERT DRIVE ATLANTA, GA 30344	SUPPORT ACFB ACTIVITIES	GEORGIA	501(C)(3)	TYPE I SUPPORTING		X	



**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....	X	
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....	X	
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....		X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ACFB SUPPORTING ORGANIZATION	K	446,000.	COST
(2) ACFB SUPPORTING ORGANIZATION	E	45,580,000.	COST
(3) ACFB SUPPORTING ORGANIZATION	B	4,091,013.	COST
(4)			
(5)			
(6)			







**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

For calendar year 2020 or other tax year beginning JUL 1, 2020, and ending JUN 30, 2021

**2020**

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.  
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury  
Internal Revenue Service

**A**  Check box if address changed.

Name of organization (  Check box if name changed and see instructions.)

**D** Employer identification number

**B** Exempt under section  
 501(c)(3) )  
 408(e)  220(e)  
 408A  530(a)  
 529(a)  529S

Print or Type

**ATLANTA COMMUNITY FOOD BANK, INC.**

**58-1376648**

Number, street, and room or suite no. If a P.O. box, see instructions.

**3400 NORTH DESERT DRIVE**

**E** Group exemption number (see instructions)

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

**ATLANTA, GA 30344**

**F**  Check box if an amended return.

**C** Book value of all assets at end of year ..... ▶ **106,263,342.**

**G** Check organization type ▶  501(c) corporation  501(c) trust  401(a) trust  Other trust  Applicable reinsurance entity

**H** Check if filing only to ▶  Claim credit from Form 8941  Claim a refund shown on Form 2439

**I** Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ..... ▶

**J** Enter the number of attached Schedules A (Form 990-T) ..... ▶ **1**

**K** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶  Yes  No  
If "Yes," enter the name and identifying number of the parent corporation. ▶

**L** The books are in care of ▶ **DEBRA SHOAF** Telephone number ▶ **404-892-9822**

**Part I Total Unrelated Business Taxable Income**

<b>1</b>	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) .....	<b>1</b>	<b>0.</b>
<b>2</b>	Reserved .....	<b>2</b>	
<b>3</b>	Add lines 1 and 2 .....	<b>3</b>	
<b>4</b>	Charitable contributions (see instructions for limitation rules) .....	<b>4</b>	<b>0.</b>
<b>5</b>	Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 .....	<b>5</b>	
<b>6</b>	Deduction for net operating loss. See instructions .....	<b>6</b>	
<b>7</b>	Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 .....	<b>7</b>	
<b>8</b>	Specific deduction (generally \$1,000, but see instructions for exceptions) .....	<b>8</b>	<b>1,000.</b>
<b>9</b>	<b>Trusts.</b> Section 199A deduction. See instructions .....	<b>9</b>	
<b>10</b>	<b>Total deductions.</b> Add lines 8 and 9 .....	<b>10</b>	<b>1,000.</b>
<b>11</b>	<b>Unrelated business taxable income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero .....	<b>11</b>	<b>0.</b>

**Part II Tax Computation**

<b>1</b>	<b>Organizations taxable as corporations.</b> Multiply Part I, line 11 by 21% (0.21) .....	<b>1</b>	<b>0.</b>
<b>2</b>	<b>Trusts taxable at trust rates.</b> See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) .....	<b>2</b>	
<b>3</b>	<b>Proxy tax.</b> See instructions .....	<b>3</b>	
<b>4</b>	Other tax amounts. See instructions .....	<b>4</b>	
<b>5</b>	Alternative minimum tax (trusts only) .....	<b>5</b>	
<b>6</b>	<b>Tax on noncompliant facility income.</b> See instructions .....	<b>6</b>	
<b>7</b>	<b>Total.</b> Add lines 3 through 6 to line 1 or 2, whichever applies .....	<b>7</b>	<b>0.</b>

LHA For Paperwork Reduction Act Notice, see instructions.

<b>Part III Tax and Payments</b>			
1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) .....	<b>1a</b>		
b Other credits (see instructions) .....	<b>1b</b>		
c General business credit. Attach Form 3800 (see instructions) .....	<b>1c</b>		
d Credit for prior year minimum tax (attach Form 8801 or 8827) .....	<b>1d</b>		
e <b>Total credits.</b> Add lines 1a through 1d .....	<b>1e</b>		
2 Subtract line 1e from Part II, line 7 .....	<b>2</b>		0.
3 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement) .....	<b>3</b>		
4 <b>Total tax.</b> Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here .....	<b>4</b>		0.
5 2020 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4 .....	<b>5</b>		0.
6a Payments: A 2019 overpayment credited to 2020 .....	<b>6a</b>		
b 2020 estimated tax payments. Check if section 643(g) election applies .....	<b>6b</b>		
c Tax deposited with Form 8868 .....	<b>6c</b>		
d Foreign organizations: Tax paid or withheld at source (see instructions) .....	<b>6d</b>		
e Backup withholding (see instructions) .....	<b>6e</b>		
f Credit for small employer health insurance premiums (attach Form 8941) .....	<b>6f</b>		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 .....	<b>6g</b>		
<input type="checkbox"/> Form 4136 .....			
7 <b>Total payments.</b> Add lines 6a through 6g .....	<b>7</b>		
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached .....	<b>8</b>		
9 <b>Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed .....	<b>9</b>		
10 <b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid .....	<b>10</b>		
11 Enter the amount of line 10 you want: <b>Credited to 2021 estimated tax</b> .....	<b>11</b>		

<b>Part IV Statements Regarding Certain Activities and Other Information</b> (see instructions)			
1 At any time during the 2020 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here .....			Yes No <input type="checkbox"/> <input checked="" type="checkbox"/>
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? .....			<input type="checkbox"/> <input checked="" type="checkbox"/>
3 Enter the amount of tax-exempt interest received or accrued during the tax year .....		\$ .....	
4a Did the organization change its method of accounting? (see instructions) .....			<input type="checkbox"/> <input checked="" type="checkbox"/>
b If 4a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V .....			

**Part V Supplemental Information**

Provide the explanation required by Part IV, line 4b. Also, provide any other additional information. See instructions.

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer _____ Date _____	Title <b>CHIEF FINANCIAL OFFICER</b>	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	ADAM REPASY	ADAM REPASY	11/19/21	P01689756
	Firm's name ▶ WARREN AVERETT, LLC	Firm's EIN ▶ 45-4084437		
Firm's address ▶ SIX CONCOURSE PARKWAY, SUITE 600 ATLANTA, GA 30328	Phone no. 770-396-1100			

**SCHEDULE A  
(Form 990-T)**

Department of the Treasury  
Internal Revenue Service

**Unrelated Business Taxable Income  
From an Unrelated Trade or Business**

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.  
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

ENTITY 1

OMB No. 1545-0047

**2020**

Open to Public Inspection for  
501(c)(3) Organizations Only

<b>A</b> Name of the organization <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	<b>B</b> Employer identification number <b>58-1376648</b>
<b>C</b> Unrelated business activity code (see instructions) ▶ <b>900099</b>	<b>D</b> Sequence: <b>1</b> of <b>1</b>

**E** Describe the unrelated trade or business ▶ **N/A**

<b>Part I</b> Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances	<b>c</b> Balance ▶	<b>1c</b>		
<b>2</b> Cost of goods sold (Part III, line 8)		<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c		<b>3</b>		
<b>4 a</b> Capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions)		<b>4a</b>		
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)		<b>4b</b>		
<b>c</b> Capital loss deduction for trusts		<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)		<b>5</b>		
<b>6</b> Rent income (Part IV)		<b>6</b>		
<b>7</b> Unrelated debt-financed income (Part V)		<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Part VI)		<b>8</b>		
<b>9</b> Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)		<b>9</b>		
<b>10</b> Exploited exempt activity income (Part VIII)		<b>10</b>		
<b>11</b> Advertising income (Part IX)		<b>11</b>		
<b>12</b> Other income (see instructions; attach statement)		<b>12</b>		
<b>13 Total.</b> Combine lines 3 through 12		<b>13</b>	<b>0.</b>	

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions) Deductions must be directly connected with the unrelated business income

<b>1</b> Compensation of officers, directors, and trustees (Part X)				<b>1</b>
<b>2</b> Salaries and wages				<b>2</b>
<b>3</b> Repairs and maintenance				<b>3</b>
<b>4</b> Bad debts				<b>4</b>
<b>5</b> Interest (attach statement) (see instructions)				<b>5</b>
<b>6</b> Taxes and licenses				<b>6</b>
<b>7</b> Depreciation (attach Form 4562) (see instructions)		<b>7</b>		
<b>8</b> Less depreciation claimed in Part III and elsewhere on return		<b>8a</b>		<b>8b</b>
<b>9</b> Depletion				<b>9</b>
<b>10</b> Contributions to deferred compensation plans				<b>10</b>
<b>11</b> Employee benefit programs				<b>11</b>
<b>12</b> Excess exempt expenses (Part VIII)				<b>12</b>
<b>13</b> Excess readership costs (Part IX)				<b>13</b>
<b>14</b> Other deductions (attach statement)				<b>14</b>
<b>15 Total deductions.</b> Add lines 1 through 14				<b>15</b>
<b>16</b> Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)				<b>16</b>
<b>17</b> Deduction for net operating loss (see instructions)				<b>17</b>
<b>18 Unrelated business taxable income.</b> Subtract line 17 from line 16				<b>18</b>

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2020

Part III Cost of Goods Sold Enter method of inventory valuation

Table with 8 rows for Cost of Goods Sold. Rows include: 1 Inventory at beginning of year, 2 Purchases, 3 Cost of labor, 4 Additional section 263A costs, 5 Other costs, 6 Total, 7 Inventory at end of year, 8 Cost of goods sold. Row 9 is a checkbox question about section 263A rules.

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

Table for Rent Income. Row 1: Description of property with checkboxes A, B, C, D. Rows 2-4: Rent received or accrued from personal/real property and total rents. Row 3: Total rents received or accrued. Row 4: Deductions directly connected with the income. Row 5: Total deductions. Total amounts are shown as 0.

Part V Unrelated Debt-Financed Income (see instructions)

Table for Unrelated Debt-Financed Income. Row 1: Description of debt-financed property with checkboxes A, B, C, D. Rows 2-8: Gross income, deductions (depreciation), average acquisition debt, and total gross income. Row 9: Allocable deductions. Row 10: Total allocable deductions. Row 11: Total dividends-received deductions. Total amounts are shown as 0.

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

Table with 6 columns: 1. Name of controlled organization, 2. Employer identification number, 3. Net unrelated income (loss), 4. Total of specified payments made, 5. Part of column 4 that is included in the controlling organization's gross income, 6. Deductions directly connected with income in column 5. Includes sections for Exempt and Nonexempt Controlled Organizations and a Totals row.

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

Table with 5 columns: 1. Description of income, 2. Amount of income, 3. Deductions directly connected, 4. Set-asides, 5. Total deductions and set-asides. Includes a Totals row.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

Table with 7 rows: 1. Description of exploited activity, 2. Gross unrelated business income, 3. Expenses directly connected with production of unrelated business income, 4. Net income (loss) from unrelated trade or business, 5. Gross income from activity that is not unrelated business income, 6. Expenses attributable to income entered on line 5, 7. Excess exempt expenses.

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

- A B C D

Enter amounts for each periodical listed above in the corresponding column.

Table with 4 columns (A, B, C, D) and 2 rows (Gross advertising income, Add columns A through D)

Table with 4 columns (A, B, C, D) and 2 rows (Direct advertising costs by periodical, Add columns A through D)

4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8

- 5 Readership costs
6 Circulation income
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7

Table with 4 columns (A, B, C, D) and 4 rows (lines 4, 5, 6, 7, 8)

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13

Part X Compensation of Officers, Directors, and Trustees (see instructions)

Table with 4 columns: 1. Name, 2. Title, 3. Percentage of time devoted to business, 4. Compensation attributable to unrelated business

Total. Enter here and on Part II, line 1

Part XI Supplemental Information (see instructions)

Blank lines for supplemental information

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

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

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

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

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

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	Taxpayer identification number (TIN) <b>58-1376648</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>3400 NORTH DESERT DRIVE</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>ATLANTA, GA 30344</b>	

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

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

**DEBRA SHOAF**

- The books are in the care of ▶ **3400 NORTH DESERT DRIVE - ATLANTA, GA 30344**  
Telephone No. ▶ **404-892-9822** Fax No. ▶ \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

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

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

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

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



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

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

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

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

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

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>ATLANTA COMMUNITY FOOD BANK, INC.</b>	Taxpayer identification number (TIN) <b>58-1376648</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>3400 NORTH DESERT DRIVE</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>ATLANTA, GA 30344</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 7

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

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