

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

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2021 calendar year, or tax year beginning JUL 1, 2021 and ending JUN 30, 2022

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending
C Name of organization: SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA
D Employer identification number: 72-0956468
E Telephone number: 504-734-1322
G Gross receipts \$: 119,838,980
H(a) Is this a group return for subordinates?
H(b) Are all subordinates included?
H(c) Group exemption number
I Tax-exempt status: 501(c)(3)
J Website: WWW.NO-HUNGER.ORG
K Form of organization: Corporation
L Year of formation: 1982
M State of legal domicile: LA

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1-7a Activities & Governance, 8-12 Revenue, 13-19 Expenses, 20-22 Net Assets or Fund Balances.

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.

Signature of officer: NATALIE JAYROE, PRESIDENT/CEO
Preparer: KEITH TREGLE
Firm: BOURGEOIS BENNETT, L.L.C.
Address: 111 VETERANS BLVD., SUITE 1700, METAIRIE, LA 70005

May the IRS discuss this return with the preparer shown above? See instructions [X] 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

1 Briefly describe the organization's mission: TO LEAD THE FIGHT AGAINST HUNGER AND BUILD FOOD SECURITY IN SOUTH LOUISIANA BY PROVIDING FOOD ACCESS, ADVOCACY, EDUCATION AND DISASTER RESPONSE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

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 \$ 93,933,655. including grants of \$ 84,007,934. ) (Revenue \$ 1,371,479. ) COMMUNITY PROGRAMS - DISTRIBUTED 45,514,837 POUNDS OF FOOD PRODUCT TO 582 CHARITABLE ORGANIZATIONS THROUGHOUT 23 CIVIL PARISHES IN SOUTH LOUISIANA.

4b (Code: ) (Expenses \$ 754,580. including grants of \$ 502,201. ) (Revenue \$ 600. ) CHILDREN PROGRAMS - DISTRIBUTED 317,717 POUNDS OF FOOD PRODUCT TO 114 CHARITABLE ORGANIZATIONS THROUGHOUT 18 CIVIL PARISHES IN SOUTH LOUISIANA.

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 94,688,235.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> 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	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
<b>3</b> 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
<b>4 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
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
<b>6</b> 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
<b>7</b> 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
<b>8</b> 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
<b>9</b> 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
<b>10</b> 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	
<b>11</b> 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.		
<b>a</b> 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>b</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	
<b>c</b> 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
<b>d</b> 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	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
<b>f</b> 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	
<b>12a</b> 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>b</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	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		X
<b>b</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
<b>15</b> 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
<b>16</b> 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
<b>17</b> 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> See instructions	X	
<b>18</b> 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	
<b>19</b> 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	
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> 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)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, tax-exempt bonds, and controlled entities.

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 [ ]

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	<b>2a</b> 153		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	<b>7d</b>		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	<b>15</b>	X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	X
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	<b>17</b>	

**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>1b</b>	Enter the number of voting members included on line 1a, above, who are independent		
<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>7b</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>8a</b>	The governing body?	X	
<b>8b</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>10b</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?		
<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>11b</b>	Describe on 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>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on 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>15a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>15b</b>	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<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>16b</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 **LA**
- 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 **NATALIE JAYROE - 504-734-1322**  
**700 EDWARDS AVENUE, NEW ORLEANS, LA 70123**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) NATALIE JAYROE PRESIDENT AND CEO	40.00			X			164,138.	0.	19,094.	
(2) JEFF ENTWISLE DIRECTOR	0.50 40.00	X					0.	158,308.	12,555.	
(3) E. ELISHA DARCEY VICE PRESIDENT AND COO	40.00			X			139,974.	0.	15,366.	
(4) KRISTEN R. HOOK CHIEF PHILANTHROPY OFFICER	40.00				X		121,599.	0.	15,205.	
(5) HEATHER S SWEENEY DIRECTOR OF DEVELOPMENT	40.00				X		100,042.	0.	11,952.	
(6) BRANDY S BYRD CHIEF HUMAN RESOURCE OFFICER	40.00				X		102,889.	0.	5,447.	
(7) SALLY MONTAGUE CHIEF FINANCIAL OFFICER	40.00			X			81,539.	0.	10,987.	
(8) SKYE STURLESE FANTACI DIRECTOR	0.50	X					0.	0.	0.	
(9) ROBERT MARKS PAST CHAIR	1.50	X		X			0.	0.	0.	
(10) MARK PRESTON DIRECTOR	0.50	X					0.	0.	0.	
(11) ROY ZUPPARDO DIRECTOR	0.50	X					0.	0.	0.	
(12) KRISTEN ALBERTSON SECRETARY	1.50	X		X			0.	0.	0.	
(13) LYNNE BURKART ASSISTANT TREASURER	1.50	X		X			0.	0.	0.	
(14) LUKE CLARY TREASURER	1.50	X		X			0.	0.	0.	
(15) BRAD GRUNDMEYER DIRECTOR	0.50	X					0.	0.	0.	
(16) WALLY GUNDLACH DIRECTOR	0.50	X					0.	0.	0.	
(17) RUPA JOLLY 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) TODD LAMBERT DIRECTOR	0.50	X						0.	0.	0.
(19) AYESHA MOTWANI DIRECTOR	0.50	X						0.	0.	0.
(20) DONNA RICHARDSON DIRECTOR	0.50	X						0.	0.	0.
(21) NANCY MORAGAS DIRECTOR	0.50	X						0.	0.	0.
(22) NICK KARL CHAIR	1.50	X		X				0.	0.	0.
(23) JUSTIN BACK DIRECTOR	0.50	X						0.	0.	0.
(24) VERY REV. DAVID CARON, O.P., D. DIRECTOR	0.50	X						0.	0.	0.
(25) G. BEN JOHNSON DIRECTOR	0.50	X						0.	0.	0.
(26) ANNE M. MILLING DIRECTOR	0.50	X						0.	0.	0.
<b>1b Subtotal</b>								710,181.	158,308.	90,606.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								710,181.	158,308.	90,606.

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 5

	Yes	No
3 Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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
ROBBINSKERSTEN, LLC 8001 S. 13TH STREET, LINCOLN, NE 68512	DIRECT MAIL CONTRACT	737,170.
SOUTHLAND TRUCK LEASING LLC P. O. BOX 1450, GARY, LA 70359	TRUCK LEASING	338,843.
M AND L INDUSTRIES LLC 1210 ST CHARLES AVE, HOUMA, LA 70360	FORKLIFT PURCHASES /RENTAL/REPAIRS	247,600.
RODNEY A DUBOIS, JR. 612 DECKBAR AVENUE, JEFFERSON, LA 70121	FREEZER/COOLER PURCHASES, INSTALLATION,	153,873.

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 4

SEE PART VII, SECTION A CONTINUATION SHEETS



**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 (check all that apply)						(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			
(27) ROBERT SHENINGER DIRECTOR	0.50	X						0.	0.	0.
(28) BERTRAND WILSON VICE CHAIR	1.50	X		X				0.	0.	0.
(29) CATHY KANTER BART DIRECTOR	0.50	X						0.	0.	0.
(30) JULIE BORSCH DIRECTOR	0.50	X						0.	0.	0.
(31) ERIC DANOS DIRECTOR	0.50	X						0.	0.	0.
(32) DANA J HENRY DIRECTOR	0.50	X						0.	0.	0.
(33) DANA BELAIRE TOPHAM DIRECTOR	0.50	X						0.	0.	0.
(34) PAULA WATERS DIRECTOR	0.50	X						0.	0.	0.
(35) LANG J LE DIRECTOR	0.50	X						0.	0.	0.
(36) MACHELLE PAYNE DIRECTOR	0.50	X						0.	0.	0.
(37) SALLY BOYCE RINEHART DIRECTOR	0.50	X						0.	0.	0.
(38) DENNIS STINE DIRECTOR	0.50	X						0.	0.	0.
(39) RACHEL TARAVELLA DIRECTOR	0.50	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**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> 310,089.				
	<b>b</b>	Membership dues .....	<b>1b</b>				
	<b>c</b>	Fundraising events .....	<b>1c</b>				
	<b>d</b>	Related organizations .....	<b>1d</b>				
	<b>e</b>	Government grants (contributions) .....	<b>1e</b> 34,263,801.				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b> 78,592,996.				
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b> \$ 85,412,585.				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f .....		113,166,886.			
	Program Service Revenue	<b>2 a</b>	PROGRAM SERVICE FEES	<b>Business Code</b> 624210	1,354,045.	1,354,045.	
<b>b</b>							
<b>c</b>							
<b>d</b>							
<b>e</b>							
<b>f</b>		All other program service revenue .....					
<b>g</b>		<b>Total.</b> Add lines 2a-2f .....		1,354,045.			
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) .....		540,769.		540,769.	
	<b>4</b>	Income from investment of tax-exempt bond proceeds .....					
	<b>5</b>	Royalties .....					
	<b>6 a</b>	Gross rents .....	(i) Real	216,735.			
			(ii) Personal				
	<b>6 b</b>	Less: rental expenses ...	133,968.				
	<b>6 c</b>	Rental income or (loss)	82,767.				
	<b>d</b>	Net rental income or (loss) .....		82,767.		82,767.	
	<b>7 a</b>	Gross amount from sales of assets other than inventory .....	(i) Securities	4,121,932.	28,482.		
			(ii) Other				
	<b>7 b</b>	Less: cost or other basis and sales expenses .....	4,390,304.	27,892.			
	<b>7 c</b>	Gain or (loss) .....	-268,372.	590.			
<b>d</b>	Net gain or (loss) .....		-267,782.		-267,782.		
<b>8 a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....		188,304.				
<b>8 b</b>	Less: direct expenses .....	29,594.					
<b>c</b>	Net income or (loss) from fundraising events .....		158,710.		158,710.		
<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19 .....		203,227.				
<b>9 b</b>	Less: direct expenses .....	81,312.					
<b>c</b>	Net income or (loss) from gaming activities .....		121,915.		121,915.		
<b>10 a</b>	Gross sales of inventory, less returns and allowances .....						
<b>10 b</b>	Less: cost of goods sold .....						
<b>c</b>	Net income or (loss) from sales of inventory .....						
Miscellaneous Revenue	<b>11 a</b>	MISCELLANEOUS	<b>Business Code</b> 999999	18,034.	18,034.		
	<b>b</b>	VENDING	453000	566.		566.	
	<b>c</b>						
	<b>d</b>	All other revenue .....					
	<b>e</b>	<b>Total.</b> Add lines 11a-11d .....		18,600.			
<b>12</b>	<b>Total revenue.</b> See instructions .....		115,175,910.	1,372,079.	0.	636,945.	

**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 ...	77,752,567.	77,752,567.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....	6,757,568.	6,757,568.		
<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 .....	385,651.		385,651.	
<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 .....	5,789,795.	4,428,097.	595,368.	766,330.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	176,032.	126,520.	31,362.	18,150.
<b>9</b> Other employee benefits .....	1,279,638.	919,715.	227,984.	131,939.
<b>10</b> Payroll taxes .....				
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	1,054.	766.	71.	217.
<b>c</b> Accounting .....	23,000.	16,715.	1,547.	4,738.
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17	1,369,877.			1,369,877.
<b>f</b> Investment management fees .....				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	729,330.	667,564.	61,766.	
<b>12</b> Advertising and promotion .....				
<b>13</b> Office expenses .....				
<b>14</b> Information technology .....				
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	862,493.	862,343.		150.
<b>17</b> Travel .....				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....				
<b>20</b> Interest .....				
<b>21</b> Payments to affiliates .....	25,568.	18,582.	1,719.	5,267.
<b>22</b> Depreciation, depletion, and amortization .....	670,669.	650,803.		19,866.
<b>23</b> Insurance .....	268,087.	258,324.	9,736.	27.
<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> FREIGHT & TRANSPORTATIO	900,096.	862,353.	788.	36,955.
<b>b</b> SUPPLIES	628,188.	605,115.	7,036.	16,037.
<b>c</b> EQUIPMENT EXPENSE	453,006.	429,887.	20,570.	2,549.
<b>d</b> OTHER OPERATING EXPENSE	388,354.	166,307.	51,200.	170,847.
<b>e</b> All other expenses _____	220,366.	165,009.	42,676.	12,681.
<b>25</b> Total functional expenses. Add lines 1 through 24e	98,681,339.	94,688,235.	1,437,474.	2,555,630.
<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) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	5,842,069.	<b>1</b>	2,900,853.
	<b>2</b> Savings and temporary cash investments .....	1,396,874.	<b>2</b>	1,911,121.
	<b>3</b> Pledges and grants receivable, net .....	5,516,960.	<b>3</b>	5,187,785.
	<b>4</b> Accounts receivable, net .....	241,531.	<b>4</b>	536,746.
	<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 .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	82,222.	<b>9</b>	87,645.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 29,853,486.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 6,517,142.	16,545,251.	<b>10c</b> 23,336,344.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	43,463,094.	<b>12</b>	47,583,785.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	5,056,649.	<b>15</b>	9,497,377.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	78,144,650.	<b>16</b>	91,041,656.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,990,643.	<b>17</b>	2,557,526.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<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 .....	367,165.	<b>23</b>	260,173.
	<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 .....	8,213.	<b>25</b>	16,875.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	2,366,021.	<b>26</b>	2,834,574.
<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 .....	42,562,860.	<b>27</b>	56,412,572.
	<b>28</b> Net assets with donor restrictions .....	33,215,769.	<b>28</b>	31,794,510.
	<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 .....	75,778,629.	<b>32</b>	88,207,082.
<b>33</b> Total liabilities and net assets/fund balances .....	78,144,650.	<b>33</b>	91,041,656.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	115,175,910.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	98,681,339.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	16,494,571.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	75,778,629.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-3,688,546.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	-377,572.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	88,207,082.

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	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 on Schedule O.		
<b>2a</b>	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
<b>b</b>	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis	X	
<b>c</b>	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	
<b>3a</b>	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	
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	X	

**SCHEDULE A**  
**(Form 990)**

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

OMB No. 1545-0047

**2021**

Open to Public Inspection

<b>Name of the organization</b> SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA	<b>Employer identification number</b> 72-0956468
-------------------------------------------------------------------------------------------	-----------------------------------------------------

**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)**. (Attach Schedule E (Form 990).)
- 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)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 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 (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - 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. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - 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).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	66,176,318.	70,689,531.	102,598,187.	171,398,561.	113,166,886.	524,029,483.
<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 .....	66,176,318.	70,689,531.	102,598,187.	171,398,561.	113,166,886.	524,029,483.
<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) .....						71,634,808.
<b>6 Public support.</b> Subtract line 5 from line 4.						452,394,675.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	66,176,318.	70,689,531.	102,598,187.	171,398,561.	113,166,886.	524,029,483.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	266,481.	319,990.	412,533.	339,045.	757,504.	2,095,553.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....	-210,537.	-82,530.	-64,833.	-9,209.		-367,109.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	5,187.	4,917.	4,119.	29,848.	18,600.	62,671.
<b>11 Total support.</b> Add lines 7 through 10						525,820,598.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	3,430,709.
<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 2021 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	86.04 %
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	86.96 %
<b>16a 33 1/3% support test - 2021.</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 - 2020.</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 - 2021.</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 - 2020.</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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 on 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 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2020 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2021.** 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 - 2020.** 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).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</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 on 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 on 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 on lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11a</b>		
<b>11b</b>		
<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>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>1</b>		
<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>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>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>1</b>		
<b>2</b>		
<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>			
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <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>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>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>2a</b>			
<b>2b</b>			
<b>3a</b>			
<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.

<b>Section A - Adjusted Net Income</b>		(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	

<b>Section B - Minimum Asset Amount</b>		(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	

<b>Section C - Distributable Amount</b>			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 2021 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-2021	(iii) Distributable Amount for 2021
<b>1</b> Distributable amount for 2021 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021			
<b>a</b> From 2016			
<b>b</b> From 2017			
<b>c</b> From 2018			
<b>d</b> From 2019			
<b>e</b> From 2020			
<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 2021 distributable amount			
<b>i</b> Carryover from 2016 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2021 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2021, 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 2021. 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 2022.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2017			
<b>b</b> Excess from 2018			
<b>c</b> Excess from 2019			
<b>d</b> Excess from 2020			
<b>e</b> Excess from 2021			

**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.)

Horizontal lines for supplemental information input.

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No. 1545-0047

**2021**

Name of the organization

SECOND HARVEST FOOD BANK GREATER NEW  
ORLEANS AND ACADIANA

Employer identification number

72-0956468

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), 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), 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).

Name of organization SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA	<b>Employer identification number</b> 72-0956468
-----------------------------------------------------------------------------------	-----------------------------------------------------

**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
1	USDA - US DEPARTMENT OF AGRICULTURE  PO BOX 140  VARNADO, LA 70467	\$ 29,934,141.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	SAMS CLUB  3222 AMBASSADOR CAFFERY PKWY  LAFAYETTE, LA 70506	\$ 5,904,501.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	WALMART  702 SW 8TH STEET  BENTONVILLE, AR 72716	\$ 11,452,568.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	NS - ARCHDIOCESE OF N.O.  1000 HOWARD AVE  NEW ORLEANS, LA 70113	\$ 2,394,695.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	SOUTHEASTERN GROCERS  5050 EDGEWOOD COURT  JACKSONVILLE, FL 32254	\$ 2,846,868.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	NS - ST TAMMY PARISH SCHOOL BOARD  321 N. THEARD STREET  COVINGTON, LA 70433	\$ 2,496,069.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA	<b>Employer identification number</b> 72-0956468
--------------------------------------------------------------------------------------	-----------------------------------------------------

**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	FEDERAL EMERGENCY MANAGEMENT AGENCY  500 C STREET  WASHINGTON, DC 20472	\$ 2,414,160.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA	<b>Employer identification number</b> 72-0956468
--------------------------------------------------------------------------------------	-----------------------------------------------------

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	19,564,798 LBS. OF ASSORTED FOOD RECEIVED VARIOUS TIMES DURING THE YEAR. <hr/> <hr/>	\$ 29,934,141.	
2	3,075,261 LBS OF ASSORTED FOOD ITEMS RECEIVED AT VARIOUS TIMES DURING THE YEAR. <hr/> <hr/>	\$ 5,904,501.	
3	5,964,879 LBS. OF ASSORTED FOOD RECEIVED VARIOUS TIMES DURING THE YEAR. <hr/> <hr/>	\$ 11,452,568.	
4	1,247,237 LBS. OF ASSORTED FOOD RECEIVED VARIOUS TIMES DURING THE YEAR. <hr/> <hr/>	\$ 2,394,695.	
5	1,482,744 LBS. OF ASSORTED FOOD RECEIVED VARIOUS TIMES DURING THE YEAR. <hr/> <hr/>	\$ 2,846,868.	
6	1,300,036 LBS. OF ASSORTED FOOD RECEIVED VARIOUS TIMES DURING THE YEAR. <hr/> <hr/>	\$ 2,496,069.	

Name of organization SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA	<b>Employer identification number</b> 72-0956468
--------------------------------------------------------------------------------------	-----------------------------------------------------

**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	1,257,375 LBS. OF ASSORTED FOOD RECEIVED VARIOUS TIMES DURING THE YEAR.  _____ _____	\$ 2,414,160.	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA	Employer identification number  72-0956468
--------------------------------------------------------------------------------------	--------------------------------------------------

**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>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**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](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public Inspection**

**Name of the organization** SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA  
**Employer identification number** 72-0956468

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

**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	2,089,494.	1,671,346.	1,637,948.	1,590,665.	1,468,452.
b Contributions					
c Net investment earnings, gains, and losses	-219,538.	435,032.	48,432.	61,813.	137,706.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	19,178.	16,884.	15,034.	14,530.	15,493.
g End of year balance	1,850,778.	2,089,494.	1,671,346.	1,637,948.	1,590,665.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  33.6000 %
  - b Permanent endowment  66.4000 %
  - c Term endowment  \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |                                                                                                                     | Yes | No |
|---------------------------------------------------------------------------------------------------------------------|-----|----|
| (i) Unrelated organizations                                                                                         |     | X  |
| (ii) Related organizations                                                                                          | X   |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | X   |    |
- 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		1,960,000.		1,960,000.
b Buildings		21,572,910.	2,846,985.	18,725,925.
c Leasehold improvements		56,843.	56,043.	800.
d Equipment		3,436,948.	2,125,085.	1,311,863.
e Other		2,826,785.	1,489,029.	1,337,756.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				23,336,344.

**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) DEBT AND EQUITY SECURITIES AND MUTUAL		
(B) FUNDS	47,583,785.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	47,583,785.	

**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) METER DEPOSITS/RENTAL DEPOSITS	191,327.
(2) UNDISTRIBUTED FOOD AND GROCERY PRODUCTS	9,306,050.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	9,497,377.

**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) LEASE DEPOSITS	16,875.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	16,875.

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>	111,732,238.
<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>	-3,688,546.	
<b>b</b>	Donated services and use of facilities	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	244,874.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>		-3,443,672.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	115,175,910.
<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>		
<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>		0.
<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>	115,175,910.

**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>	99,303,785.
<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>	377,572.	
<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>	244,874.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>		622,446.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	98,681,339.
<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>		
<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>		0.
<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>	98,681,339.

**Part XIII Supplemental Information.**

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

PART X, LINE 2:

ACCOUNTING STANDARDS PROVIDE DETAILED GUIDANCE FOR FINANCIAL STATEMENT

RECOGNITION, MEASUREMENT, AND DISCLOSURES OF UNCERTAIN TAX POSITIONS

RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS. IT REQUIRES AN ENTITY TO

RECOGNIZE THE FINANCIAL STATEMENT IMPACT OF A TAX POSITION WHEN IT IS MORE

LIKELY THAN NOT THAT THE POSITION WILL NOT BE SUSTAINED UPON EXAMINATION.

AS OF JUNE 30, 2022, MANAGEMENT OF SECOND HARVEST BELIEVES THAT IT HAS NO

UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE

IN THE FINANCIAL STATEMENTS. TAX YEARS ENDED JUNE 30, 2019 AND LATER

REMAIN SUBJECT TO EXAMINATION BY THE TAXING AUTHORITIES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

**Part XIII** Supplemental Information (continued)

RENTAL EXPENSES 133,968.

SPECIAL EVENT EXPENSES 110,906.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 244,874.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES SEPARATELY STATED 133,968.

SPECIAL EVENT EXPENSES 110,906.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 244,874.

PART V, LINE 4

5% OF THE AVERAGE MARKET VALUE OF THE INVESTMENT FOR THE LAST 12 QUARTERS

WILL BE DISTRIBUTED ANNUALLY TO SECOND HARVEST FOOD BANK. ALL AMOUNTS IN

EXCESS OF THE 5% DISTRIBUTION ARE TO BE REINVESTED AS CORPUS. THE

PRINCIPAL BALANCE SHOULD NEVER BE REDUCED BELOW \$1,000,000.00.

DISTRIBUTIONS ARE TO BE USED TO SERVE THE HUNGRY AS PER OUR MISSION.

PART X, LINE 2: SECOND HARVEST IS A NOT-FOR-PROFIT CORPORATION ORGANIZED

UNDER THE LAWS OF THE STATE OF LOUISIANA. THEY ARE EXEMPT FROM FEDERAL

INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND

QUALIFY AS ORGANIZATIONS THAT ARE NOT PRIVATE FOUNDATIONS AS DEFINED IN

SECTION 509(A) OF THE CODE.



**SCHEDULE G  
(Form 990)**

**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.

**2021**

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA** Employer identification number **72-0956468**

**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			
ROBBINSKERSTEN, LLC - 8001 S 13TH ST, LINCOLN, NE 68512	DIRECT MAIL		X	3,698,704.	848,217.	2,850,487.
SMART MEAL MAKERS LOUISIANA, LLC - 4490 VON KARMAN AVE, PETER QUIRK - 1201 BEVERLY GARDEN DRIVE, METAIRIE, LA	FACE-TO-FACE SOLICITATION		X	468,241.	252,950.	215,291.
GATEWAY COMMUNICATIONS - 16805 NE MASON COURT, ABBOTT ENTERPRISES, LLC - 4100 HOWARD AVE, NEW ORLEANS, THE STELTER COMPANY - P.O. BOX 5228, DES MOINES, IA	CAPITAL CAMPAIGN SOLICITATION		X	405,000.	66,000.	339,000.
	TELEMARKETING		X	49,518.	41,281.	8,237.
	HOLIDAY APPEALS		X	16,448.	11,289.	5,159.
	PLANNED GIVING		X	11,033.	21,487.	-10,454.
<b>Total</b>				<b>4,648,944.</b>	<b>1,241,224.</b>	<b>3,407,720.</b>

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.

LA

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		HARVEST THE MUSIC (event type)	FOOD FROM THE BAR (event type)	3 (total number)		
Revenue	1	Gross receipts	160,797.	13,862.	13,645.	188,304.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	160,797.	13,862.	13,645.	188,304.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	7,560.			7,560.
	7	Food and beverages	10,641.			10,641.
	8	Entertainment	500.			500.
	9	Other direct expenses	9,663.	860.	370.	10,893.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				29,594.
11	Net income summary. Subtract line 10 from line 3, column (d)				158,710.	

**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))	
		1	Gross revenue			203,227.
Direct Expenses	2	Cash prizes			10,000.	10,000.
	3	Noncash prizes				
	4	Rent/facility costs			1,750.	1,750.
	5	Other direct expenses			69,562.	69,562.
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input checked="" type="checkbox"/> No		
7	Direct expense summary. Add lines 2 through 5 in column (d)				81,312.	
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				121,915.	

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

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

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

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

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

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	13a	100.00	%
b An outside facility	13b		%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► SECOND HARVEST FOOD BANK FINANCE DEPARTMENT

Address ► 700 EDWARDS AVENUE - NEW ORLEANS, LA 70123

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_
- c If "Yes," enter name and address of the third party:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

16 Gaming manager information:

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

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

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

(I) NAME OF FUNDRAISER: SMART MEAL MAKERS LOUISIANA, LLC

(I) ADDRESS OF FUNDRAISER: 4490 VON KARMAN AVE, NEWPORT BEACH, CA 92660

(I) NAME OF FUNDRAISER: PETER QUIRK

(I) ADDRESS OF FUNDRAISER: 1201 BEVERLY GARDEN DRIVE, METAIRIE, LA 70002

(I) NAME OF FUNDRAISER: GATEWAY COMMUNICATIONS

**Part IV** Supplemental Information (continued)

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

(I) NAME OF FUNDRAISER: ABBOTT ENTERPRISES, LLC

(I) ADDRESS OF FUNDRAISER: 4100 HOWARD AVE, NEW ORLEANS, LA 70125

(I) NAME OF FUNDRAISER: THE STELTER COMPANY

(I) ADDRESS OF FUNDRAISER: P.O. BOX 5228, DES MOINES, IA 50305

PART I, LINE 2B, COLUMN (V):

THE ORGANIZATION REIMBURSES PETER QUIRK FOR EXPENSES INCURRED RELATED TO  
FUNDRAISING ACTIVITIES FOR THE ORGANIZATION BASED UPON PETER'S SUBMISSION  
OF AN EXPENSE REPORT DETAILING EXPENSES AND SUPPORTING DOCUMENTS.

**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

**2021**

**Open to Public  
Inspection**

Name of the organization **SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA** Employer identification number **72-0956468**

**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 noncash 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
A HEART FOR CHILDREN, INC. 434 HERBERT RD LAFAYETTE, LA 70506	87-0769700	501(C) 3	0.	107,126.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
A HEART FOR CHILDREN, INC. 434 HERBERT RD LAFAYETTE, LA 70506	87-0769700	501(C) 3	0.	11,564.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ABITA SPRINGS ELEMENTARY 22410 LEVEL STREET ABITA SPRINGS, LA 70420	72-6001305	ST. TAMMANY PARISH S	0.	46,283.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ABITA SPRINGS MIDDLE 72079 MAPLE STREET ABITA SPRINGS, LA 70420	72-6001305	ST. TAMMANY PARISH S	0.	28,680.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ABNEY ELEMENTARY 825 KOSTMAYER AVE SLIDELL, LA 70458	72-6001305	ST. TAMMANY PARISH S	0.	88,564.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ABRAHAM'S TENT 2424 FRUGE ST LAKE CHARLES, LA 70601	72-1082217	501(C) 3	0.	236,357.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 424.
- 3** Enter total number of other organizations listed in the line 1 table ▶ 59.

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

Schedule I (Form 990) 2021

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABUNDANT LIFE JUST CARES 400 GOSSEN MEMORIAL DRIVE RAYNE, LA 70578	72-1237261	501(C) 3	0.	511,112.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ACADEMY OF OUR LADY 5501 WESTBANK EXPRESSWAY MARRERO, LA 70072	72-0893609	ARCHDIOCESE OF N	0.	40,752.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ACADEMY OF THE SACRED HEART ELEMENTARY - 4301 ST. CHARLES AVE - NEW ORLEANS, LA 70115	72-0893609	ARCHDIOCESE OF N	0.	20,300.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ACADIANA C.A.R.E.S. 809 MARTIN LUTHER KING DR LAFAYETTE, LA 70502	58-1717018	501(C) 3	0.	389,123.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ACADIANA OUTREACH CENTER, INC 625 N UNIVERSITY LAFAYETTE, LA 70506	58-1925867	501(C) 3	0.	15,101.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ACADIANA OUTREACH CENTER, INC 625 N UNIVERSITY LAFAYETTE, LA 70506	58-1925867	501(C) 3	0.	12,962.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ALFA & OMEGA CHURCH INTERNATIONAL 605 S. COLLEGE RD LAFAYETTE, LA 70503	44-0577787	501(C) 3	0.	379,972.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ALTON ELEMENTARY 38276 NORTH 5TH AVE SLIDELL, LA 70460	72-6001305	ST. TAMMANY PARI	0.	20,002.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
AMERICAN RED CROSS - LAFOURCHE PARISH - 2640 CANAL ST - NEW ORLEANS, LA 70119	53-0196605	501(C) 3	0.	51,408.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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

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ANNUNCIATION ELEMENTARY 511 AVENUE C BOGALUSA, LA 70427	72-0893609	ARCHDIOCESE OF N	0.	9,962.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ARCHBISHOP CHAPELLE HIGH 8800 VETERANS BLVD METAIRIE, LA 70003	72-0893609	ARCHDIOCESE OF N	0.	23,536.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ARCHBISHOP HANNAN 71324 HWY 1077 COVINGTON, LA 70433	72-0893609	ARCHDIOCESE OF N	0.	32,162.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ARCHBISHOP SHAW HIGH 1000 BARATARIA BLVD MARRERO, LA 70072	72-0893609	ARCHDIOCESE OF N	0.	33,461.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ARISE ACADEMY 3819 ST. CLAUDE AVE NEW ORLEANS, LA 70117	26-3240588	501(C) 3	0.	11,585.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ARTHUR ASHE CHARTER SCHOOL 1456 GARDENA DR NEW ORLEANS, LA 70112	72-1409800	501(C) 3	0.	9,834.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ARTHUR MONDAY CENTER-NEW ORLEANS CITY GOVERNMENT - 1111 NEWTON ST. - NEW ORLEANS, LA 70114	72-6000969	GOVERNMENT	0.	175,043.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ASCENSION OF OUR LORD CATHOLIC CHURCH - 799 FAIRWAY DR - LA PLACE, LA 70068	72-0637492	501(C) 3	0.	37,947.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ASSISI BRIDGE HOUSE 600 BULL DUR RD SCHRIEVER, LA 70395	72-0812566	GOVERNMENT	0.	6,599.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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BAYOU LACOMBE MIDDLE 27527 ST. JOSEPH STREET LACOMBE, LA 70445	72-6001305	ST. TAMMANY PARI	0.	13,482.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BAYOU WOODS ELEMENTARY 35614 LIBERTY DRIVE SLIDELL, LA 70460	72-6001305	ST. TAMMANY PARI	0.	30,430.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BEACON LIGHT BAPTIST CHURCH OF HOUMA - 4325 W PARK AVE - GRAY, LA 70359	05-0570465	501(C) 3	0.	194,816.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BEACON LIGHT INTERNATIONAL BAPTIST CATHEDRAL - 1937 MIRABEAU AVE - NEW ORLEANS, LA 70122	72-0907747	501(C) 3	0.	43,163.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BEACON LIGHT OF LAPLACE 625 WOODLAND DR LA PLACE, LA 70068	81-1360186	501(C) 3	0.	12,386.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BEN FRANKLIN ANNEX 3649 LAUREL ST. NEW ORLEANS, LA 70115	46-5737261	ORLEANS PARISH S	0.	18,189.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BEN FRANKLIN ELEMENTARY 1116 JEFFERSON AVE NEW ORLEANS, LA 70115	46-5737261	ORLEANS PARISH S	0.	29,113.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BEN FRANKLIN HIGH SCHOOL 2001 LEON C. SIMON BLVD NEW ORLEANS, LA 70122	46-5737261	ORLEANS PARISH S	0.	27,335.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BETHEL BAPTIST CHURCH 112 MATHERNE ST. BOURG, LA 70343	72-1002674	501(C) 3	0.	27,659.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED



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BETHEL COLONY SOUTH TRANSFORMATION MINISTRY - 4114 OLD GENTILITY RD - NEW ORLEANS, LA 70126	27-8067138	501(C) 3	0.	780,660.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BETHEL COLONY WOMEN AT THE WELL 4101 IROQUOIS ST NEW ORLEANS, LA 70126	27-0803725	501(C) 3	0.	45,686.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BETHLEHEM BAPTIST CHURCH 837 EAST 7TH STREET BOGALUSA, LA 70427	72-0854336	501(C) 3	0.	68,948.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BETHUNE ELEMENTARY 2401 HUMANITY ST NEW ORLEANS, LA 70122	46-5737261	ORLEANS PARISH G	0.	61,480.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BOGALUSA HELP CENTER 350 MARTIN LUTHER KING JR. DRIVE BOGALUSA, LA 70427	72-1315302	501(C) 3	0.	214,991.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BONNE ECOLE ELEMENTARY 900 RUE VERAND SLIDELL, LA 70458	72-6001305	ST. TAMMANY PARI	0.	47,181.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BOYET JUNIOR HIGH 59295 REBEL DRIVE SLIDELL, LA 70461	72-6001305	ST. TAMMANY PARI	0.	34,397.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BOYS & GIRLS CLUB SLIDELL UNIT 705 DEWEY DR. SLIDELL, LA 70458	72-0928014	501(C) 3	0.	5,338.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BOYS AND GIRLS CLUB - COVINGTON 521 W. 28TH ST. COVINGTON, LA 70433	72-0648695	501(C) 3	0.	10,641.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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BOYS AND GIRLS CLUB - WESTBANK 900 10TH ST. GRETNA, LA 70053	72-0928014	501(C) 3	0.	5,169.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BOYS AND GIRLS CLUBS OF SOUTHEAST LA - 900 10TH ST - GRETNA, LA 70053	72-0648695	501(C) 3	0.	15,946.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BOYS AND GIRLS CLUB-SLIDELL 705 DEWEY DR. SLIDELL, LA 70458	72-0648695	GOVERNMENT	0.	6,230.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BRIDGE CITY COMMUNITY CENTER 301 THIRD EMANUEL ST. WESTWEGO, LA 70094	72-0613920	JEFFERSON PARISH	0.	150,052.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BRIDGE HOUSE CORPORATION - EARHART BLVD - 4150 EARHART BLVD - NEW ORLEANS, LA 70125	72-6027674	501(C) 3	0.	167,160.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BRIDGE HOUSE CORPORATION - STRATFORD - 6321 STRATFORD PL - NEW ORLEANS, LA 70131	72-6027674	501(C) 3	0.	53,936.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BRIGGS UMC FOOD PANTRY 710 HUEY ST ABBEVILLE, LA 70510	30-0628710	501(C) 3	0.	129,807.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BROADMOOR FOOD PANTRY 2021 S DUPRE ST. NEW ORLEANS, LA 70125	72-0804276	501(C) 3	0.	351,491.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
BROCK ELEMENTARY 259 BRAKEFIELD STREET SLIDELL, LA 70458	72-6001305	ST. TAMMANY PARI	0.	27,860.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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BUSH COMMUNITY FOOD PANTRY 81605 HWY 41 BUSH, LA 70431	72-0984078	501(C) 3	0.	291,587.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CABRINI HIGH 1400 MOSS ST NEW ORLEANS, LA 70119	72-0893609	ARCHDIOCESE OF N	0.	20,182.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CALCASIEU COUNCIL ON AGING 3950 GERSTNER MEMORIAL BLVD LAKE CHARLES, LA 70607	72-0951694	501(C) 3	0.	236,694.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CALVARY BAPTIST CHURCH 1059 CALVARY VILLE PLATTE, LA 70586	72-0983610	501(C) 3	0.	26,829.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CARE HELP OF SULPHUR, INC. 112 EAST THOMAS STREET SULPHUR, LA 70663	72-1007880	501(C) 3	0.	566,834.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CAROLYN PARK MIDDLE 35708 LIBERTY DRIVE SLIDELL, LA 70460	72-6001305	ST. TAMMANY PARI	0.	21,960.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CATHOLIC CHARITIES OF ACADIANA 405 ST. JOHN ST LAFAYETTE, LA 70502	72-0977497	501(C) 3	0.	270,406.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CATHOLIC CHARITIES OF ACADIANA 405 ST. JOHN ST LAFAYETTE, LA 70502	72-0977497	501(C) 3	0.	17,112.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CATHOLIC CHARITIES OF SOUTHWEST LA ALLEN - 1225 2ND STREET - LAKE CHARLES, LA 70601	72-0883986	501(C) 3	0.	56,535.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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CATHOLIC CHARITIES OF SOUTHWEST LA BEAUREGARD - 1225 2ND STREET - LAKE CHARLES, LA 70601	72-0883986	501(C) 3	0.	369,715.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CATHOLIC CHARITIES OF SOUTHWEST LA CALCASIEU - 1225 2ND ST - LAKE CHARLES, LA 70601	72-0883986	501(C) 3	0.	185,127.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CATHOLIC CHARITIES OF SOUTHWEST LA CAMERON - 1225 2ND STREET - LAKE CHARLES, LA 70601	72-0883986	501(C) 3	0.	267,265.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CATHOLIC CHARITIES OF SOUTHWEST LA JEFFERSON DAVIS - 1225 2ND STREET - LAKE CHARLES, LA 70601	72-0883986	501(C) 3	0.	170,133.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CATHOLIC CHARITIES-UPPER CAMERON 11054 HWY 384 LAKE CHARLES, LA 70607	72-0883986	501(C) 3	0.	13,082.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CATHOLIC COMMUNITY CENTER 18210 W MAIN ST GALLIANO, LA 70354	53-0196617	501(C) 3	0.	50,712.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CCANO - HEALTH GUARDIANS/CIARA INDEP. LIVING - 1424 DANTE ST - NEW ORLEANS, LA 70118	72-0408911	501(C) 3	0.	16,493.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CELEBRATION CHURCH ST. BERNARD CAMPUS - 1914 AYCOCK ST - ARABI, LA 70032	72-1152595	501(C) 3	0.	118,025.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CENTRAL CATHOLIC 2100 CEDAR ST MORGAN CITY, LA 70380	72-0893609	ARCHDIOCESE OF N	0.	31,134.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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

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CENTRAL CITY COMMUNITY OUTREACH 2211 4TH. STREET NEW ORLEANS, LA 70113	27-1238290	501(C) 3	0.	27,259.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHAHTA-IMA ELEMENTARY 27488 PICHON ROAD LACOMBE, LA 70445	72-6001305	ST. TAMMANY PARI	0.	29,353.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHALLENGE OUTREACH 1141 WHITNEY AVE GRETNA, LA 70056	81-3374715	501(C) 3	0.	6,666.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTIAN BROTHERS 4601 CLEVELAND AVE NEW ORLEANS, LA 70119	72-0893609	ARCHDIOCESE OF N	0.	59,425.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTIAN FELLOWSHIP FULL GOSPEL 5816 E JUDGE PEREZ DR VIOLET, LA 70092	72-1375232	501(C) 3	0.	95,335.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTIAN FELLOWSHIP FULL GOSPEL 5816 E JUDGE PEREZ DR VIOLET, LA 70092	72-1375232	501(C) 3	0.	18,365.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTIAN RURAL SERVICE CENTER 8348 HWY190 (MALLET) OPELOUSAS, LA 70570	72-0542873	501(C) 3	0.	124,245.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTIAN SERVICE CENTER OF IOTA 422 KENNEDY DR IOTA, LA 70543	72-0786459	501(C) 3	0.	46,921.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTIAN WORLD 2001 EAST GAUTHIER RD LAKE CHARLES, LA 70607	72-0846114	501(C) 3	0.	99,115.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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CHRISTOPHER HOMES, INC. - ANNUNCIATION INN - 1220 SPAIN ST. - NEW ORLEANS, LA 70117	53-0196617	501(C) 3	0.	13,990.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTOPHER HOMES, INC. - CHRISTOPHER INN - 2110 ROYAL ST - NEW ORLEANS, LA 70116	53-0196617	501(C) 3	0.	24,068.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTOPHER HOMES, INC. - DELILLE INN - 6924 CHEF MENTEUR HWY - NEW ORLEANS, LA 70126	72-1067219	501(C) 3	0.	9,558.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTOPHER HOMES, INC. - MONSIGNOR WYNHOVEN - 4600 TENTH ST - MARRERO, LA 70072	53-0196617	501(C) 3	0.	86,522.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTOPHER HOMES, INC. - PLACE DUBOURG HOME - 201 RUE DUBOURG - LA PLACE, LA 70068	72-0840673	501(C) 3	0.	35,426.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHRISTOPHER HOMES, INC. - ST. JOHN BERCHMAN'S - 3400 ST. ANTHONY AVE - NEW ORLEANS, LA 70122	53-0196617	501(C) 3	0.	7,915.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CHURCH OF CHRIST & GREATER WORKS 128 OAK FORREST DR. GIBSON, LA 70356	72-1493786	501(C) 3	0.	77,790.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CITY OF NEW ORLEANS 1300 PERDIDO ST NEW ORLEANS, LA 70112	72-0000969	ORLEANS PARISH G	0.	16,750.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CLEARWOOD JUNIOR HIGH 130 CLEARWOOD DRIVE SLIDELL, LA 70458	72-6001305	ST. TAMMANY PARI	0.	42,897.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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COMMUNITIES UNITED FOR CHANGE 1244 BIG FOUR CORNERS RD JEANERETTE, LA 70544	80-0413130	501(C) 3	0.	117,899.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
COMMUNITY BIBLE CHURCH OF LAFOURCHE - 14757 EAST MAIN ST. - CUT OFF, LA 70345	72-0921620	501(C) 3	0.	135,927.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
COMMUNITY CENTER OF ST. BERNARD 7143 ST. CLAUDE AVE ARABI, LA 70032	74-3173649	501(C) 3	0.	86,577.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
COMMUNITY CHRISTIAN CONCERN 2515 CAREY ST. SLIDELL, LA 70458	72-1050312	501(C) 3	0.	257,846.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
COMMUNITY OUTREACH CENTER 1006 E FOURTH ST DEQUINCY, LA 70633	72-1490938	501(C) 3	0.	123,076.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
COMMUNITY WORKS - CAMP ST 1400 CAMP ST NEW ORLEANS, LA 70130	26-4472656	501(C) 3	0.	8,915.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
COMMUNITY WORKS - EAGLE ST 4040 EAGLE ST NEW ORLEANS, LA 70118	26-4472656	501(C) 3	0.	6,229.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CONCERNED CITIZEN FOR A BETTER ALGIERS - 1409 NUNEZ ST - NEW ORLEANS, LA 70114	72-1105360	501(C) 3	0.	14,053.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CONNECTION NAZARENE CHURCH ACADEMY 64129 HWY 41 PEARL RIVER, LA 70452	72-0788691	501(C) 3	0.	74,514.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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COSMOPOLITAN EVANGELISTIC BAPTIST CHURCH - 1929 BIENVILLE ST - NEW ORLEANS, LA 70112	72-1334354	501(C) 3	0.	55,114.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
COTEAU BAPTIST CHURCH 2066 COTEAU RD HOUMA, LA 70364	72-1002674	501(C) 3	0.	63,370.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
COVINGTON ELEMENTARY 325 S. JACKSON STREET COVINGTON, LA 70433	72-6001305	ST. TAMMANY PARI	0.	40,906.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
COVINGTON HIGH 73030 LION DRIVE COVINGTON, LA 70433	72-6001305	ST. TAMMANY PARI	0.	64,127.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CREEKSIDE JUNIOR HIGH 65434 HIGHWAY 41 PEARL RIVER, LA 70452	72-6001305	ST. TAMMANY PARI	0.	33,479.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CRESCENT CARE 1631 ELYSIAN FIELDS AVE NEW ORLEANS, LA 70117	72-1059635	501(C) 3	0.	214,694.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CRESCENT CITY LODGE PRINCE HALL 704 N CLAIBORNE AVE NEW ORLEANS, LA 70116	90-0683985	501(C) 3	0.	16,383.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CRESCENT CITY WIC FAMILY SERVICES - GRETNA - 429 WALL BLVD., SUITE 7 - GRETNA, LA 70056	26-2747019	501(C) 3	0.	240,206.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CROWLEY CHRISTIAN CARE CENTER 726 WEST SEVENTH ST CROWLEY, LA 70527	72-1132875	501(C) 3	0.	101,445.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED



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CULTURE AID NOLA 10400 I-10 SERVICE RD NEW ORLEANS, LA 70127	85-1222747	501(C) 3	0.	1,517,669.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
CYPRESS COVE ELEMENTARY 540 S MILITARY ROAD SLIDELL, LA 70461	72-6001305	ST. TAMMANY PARI	0.	40,147.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
DEPAUL COMMUNITY HEALTH CENTER 3201 S CARROLLTON AVE NEW ORLEANS, LA 70118	72-1332678	501(C) 3	0.	99,379.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
DEPAUL COMMUNITY HEALTH CENTER 3201 S CARROLLTON AVE NEW ORLEANS, LA 70118	72-1332678	501(C) 3	0.	7,506.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
DEPAUL COMMUNITY HEALTH CENTER- ORDER AHEAD - 3201 SHORT ST - NEW ORLEANS, LA 70118	72-1332678	501(C) 3	0.	13,132.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
DESTINY OF FAITH 409 PATTERSON ST LAFAYETTE, LA 70501	72-1407682	501(C) 3	0.	15,138.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
DULARGE RECREATION CENTER 1330 DOCTOR BEATROUS RD THERIOT, LA 70397	72-0874099	TERREBONNE PARIS	0.	190,972.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
DULARGE SUMMER CAMP 1330 DOCTOR BEATROUS RD. THERIOT, LA 70397	72-0874099	TERREBONNE PARIS	0.	9,518.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
EAST BANK HEAD START 13292 RIVER ROAD DESTREHAN, LA 70047	72-6001209	501(C) 3	0.	5,829.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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EASTON CHARTER HIGH 3019 CANAL ST NEW ORLEANS, LA 70119	46-5737261	ORLEANS PARISH S	0.	22,633.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
EAST-WEST FOUNDATION 37482 BROWNS VILLAGE RD SLIDELL, LA 70461	81-4133381	501(C) 3	0.	107,632.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ELLA DOLHONDE SCHOOL 219 SEVERN AVE. METAIRIE, LA 70001	72-6000592	GOVERNMENT	0.	7,974.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ESPERANZA CHARTER SCHOOL 4407 S CARROLLTON AVENUE NEW ORLEANS, LA 70119	20-2024597	501(C) 3	0.	13,852.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
EUNICE FOOD BANK 2101 W. ASH EUNICE, LA 70535	72-0840653	501(C) 3	0.	341,992.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FAIRVIEW ELEMENTARY SCHOOL 3955 GERTSNER MEMORIAL DRIVE LAKE CHARLES, LA 70607	72-6000235	CALCASIEU PARISH	0.	9,682.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FAITH AND FRIENDS FOOD PANTRY 4009 LEGION ST; 4009 J BENNET JOHNS LAKE CHARLES, LA 70601	72-1449272	501(C) 3	0.	110,289.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FAITH HOPE MISSIONARY BAPTIST CHURCH - 407 DUROQ - ABBEVILLE, LA 70510	72-1037921	501(C) 3	0.	18,753.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FEEDING AMERICA KENTUCKY'S HEARTLAND - 911 JOE CLIFTON DR - PADUCAH, KY 42001	61-1043635	501(C) 3	0.	32,571.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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FIFTH WARD JUNIOR HIGH 81419 HIGHWAY 21 BUSH, LA 70431	72-6001305	ST. TAMMANY PARI	0.	31,177.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FIRST BAPTIST CHURCH OF BASILE 3001 E SCHAMBERS ST BASILE, LA 70515	72-0948392	501(C) 3	0.	73,062.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FIRST BAPTIST CHURCH OF CHALMETTE 305 EAST ST BERNARD HWY CHALMETTE, LA 70043	62-0535346	501(C) 3	0.	198,747.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FIRST BAPTIST CHURCH OF JENNINGS 1001 CARY AVENUE JENNINGS, LA 70546	72-0660495	501(C) 3	0.	293,269.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FIRST BAPTIST CHURCH SLIDELL 4141 PONTCHARTRAIN DR SLIDELL, LA 70458	72-0496863	501(C) 3	0.	588,234.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FIRST BAPTIST GOLDEN MEADOW 187 OAK RIDGE DR. GOLDEN MEADOW, LA 70357	72-1002674	501(C) 3	0.	181,219.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FIRST EVANGELIST HOUSING CORP. 2826 MARTIN LUTHER KING BLVD NEW ORLEANS, LA 70113	72-1277603	501(C) 3	0.	64,053.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FISCHER HOUSING 1400 SEMMES ST NEW ORLEANS, LA 70114	72-0983850	GOVERNMENT	0.	154,484.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FLORIDA AVENUE ELEMENTARY 342 FLORIDA AVE. SLIDELL, LA 70458	72-6001305	ST. TAMMANY PARI	0.	38,626.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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FOLSOM ELEMENTARY 82144 HIGHWAY 25 FOLSOM, LA 70437	72-6001305	ST. TAMMANY PARI	0.	31,059.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FOLSOM JUNIOR HIGH 83055 HAY HALLOW ROAD FOLSOM, LA 70437	72-6001305	ST. TAMMANY PARI	0.	12,716.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FONTAINEBLEAU HIGH 100 BULLDOG DRIVE MANDVILLE, LA 70471	72-6001305	ST. TAMMANY PARI	0.	68,292.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FONTAINEBLEAU JR HIGH 100 HURRICANE ALLEY MANDVILLE, LA 70471	72-6001305	ST. TAMMANY PARI	0.	38,339.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FORGIVEN MINISTRY 5045 LAPALCO BLVD. MARRERO, LA 70072	81-0641007	501(C) 3	0.	58,945.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FREDDIE MARSHALL EDUCATIONAL FOUNDATION - 3349 KABEL DR - NEW ORLEANS, LA 70131	52-2405103	501(C) 3	0.	39,629.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FREE MINISTRIES 1911 HIGHWAY 18 EDGARD, LA 70049	01-0772321	501(C) 3	0.	19,229.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
FREE MINISTRIES FAMILY WORSHIP CENTER - 1417 SANDRA STREET - MORGAN CITY, LA 70380	01-0772321	501(C) 3	0.	131,810.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GEORGE W. CARVER LEARNING CENTER 337 GUM ST HAHNVILLE, LA 70057	72-6001209	ST. CHARLES PARI	0.	15,382.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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GETHSEMANE COGIC 317 12TH ST LAFAYETTE, LA 70501	23-7002418	501(C) 3	0.	1,607,752.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GIVING HOPE - STEPHEN STUMPF FOOD PANTRY - 5151 LAPALCO BLVD. - MARRERO, LA 70072	46-3449360	501(C) 3	0.	2,073,013.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GLAD TIDINGS/DORCAS ROOM MINISTRY 3400 TEXAS AVE LAKE CHARLES, LA 70607	72-0819604	501(C) 3	0.	241,652.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GOD'S FOOD BOX 426 MCMAHON DERIDDER, LA 70634	27-0036893	501(C) 3	0.	99,712.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GOD'S PANTRY 15358 HIGHWAY 26 JENNINGS, LA 70546	84-4965915	501(C) 3	0.	753,066.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GOLDEN MEADOW TOWN HALL 107 JERVIS DR GOLDEN MEADOW, LA 70357	53-0196617	HAS CATHOLIC CHA	0.	38,302.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GOOD SAMARITAN FOOD BANK OF THIBODAUX - 100 BIRCH ST - THIBODAUX, LA 70301	53-0196617	501(C) 3	0.	78,566.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GOODWILL-NEW ORLEANS CITY GOVERNMENT - 3400 TULANE AVE. - NEW ORLEANS, LA 70119	72-6000969	CITY OF NEW ORLE	0.	28,002.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GRACE OUTREACH CENTER 3601 COLISEUM ST NEW ORLEANS, LA 70115	62-1809569	501(C) 3	0.	73,094.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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GRAND CAILLOU BAPTIST CHURCH 3497 GRAND CAILLOU RD HOUMA, LA 70363	72-1002674	501(C) 3	0.	183,416.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GRAND CAILLOU MIDDLE SCHOOL 2161 GRAND CAILLOU RD HOUMA, LA 70363	72-6001392	501(C) 3	0.	174,206.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GREATER GOOD HOPE BAPTIST CHURCH 47 CATHY ST NORCO, LA 70079	72-1011913	501(C) 3	0.	53,184.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GREATER MACEDONIA BAPTIST CHURCH DELIVERY YMCA:278 CIVIC DR./27796 LA-23, PORT SULP - PORT SULPHUR, LA 70083	01-0788696	501(C) 3	0.	72,323.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GREATER ST. MARY BAPTIST CHURCH 1401 MOELING ST LAKE CHARLES, LA 70601	72-1426864	501(C) 3	0.	374,410.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GREATER ZIONFIELD 636 11TH ST WESTWEGO, LA 70094	30-0101267	501(C) 3	0.	57,548.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GRETNA COMMUNITY CENTER 1700 MONROE ST. GRETNA, LA 70053	72-0613920	JEFFERSON PARISH	0.	149,054.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GRETNA UNITED METHODIST MENS GROUP 1309 WHITNEY AVE GRETNA, LA 70056	72-6077812	501(C) 3	0.	165,075.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
GULF COAST BAPTIST CHURCH 1606 SOUTH BAYOU DR. GOLDEN MEADOW, LA 70357	72-1002674	501(C) 3	0.	22,023.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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HANDS ON NEW ORLEANS 2515 CANAL STREET NEW ORLEANS, LA 70119	26-2281213	501(C) 3	0.	322,663.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HARVEST TIME CHRISTIAN CENTER CHURCH - 1295 HWY 18 - EDGARD, LA 70049	72-1516457	501(C) 3	0.	68,478.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HARVEST TIME CHRISTIAN CENTER DISASTER - 1295 HIGHWAY 18 - EDGARD, LA 70049	72-1516457	501(C) 3	0.	12,962.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HARVEY COMMUNITY CENTER 1501 ESTALOTE AVENUE HARVEY, LA 70058	72-0613920	JEFFERSON PARISH	0.	165,563.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HAZEL HURST COMMUNITY CENTER 1121 SOUTH CAUSEWAY BLVD. JEFFERSON, LA 70121	72-0613920	JEFFERSON PARISH	0.	148,532.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HELP CENTER OF CHURCHES 946 ELLIS ST. FRANKLINTON, LA 70438	58-2026331	501(C) 3	0.	104,139.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HISPANIC APOSTOLATE 2525 MAIN AVE. METAIRIE, LA 70003	53-0196617	501(C) 3	0.	51,093.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOLY FAMILY CHURCH 6641 GRAND CAILLOU RD DULAC, LA 70353	53-0196617	501(C) 3	0.	14,201.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOLY GHOST COMMUNITY DINER 742 WALNUT ST. OPELOUSAS, LA 70570	72-6000519	GOVERNMENT	0.	6,556.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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HOLY ROSARY CATHOLIC CHURCH 8594 E MAIN ST. HOUMA, LA 70363	53-0196617	501(C) 3	0.	12,639.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOLY ROSARY ELEMENTARY 12925 E. MAIN LAROSE, LA 70373	72-0893609	ARCHDIOCESE OF N	0.	18,508.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HONEY ISLAND ELEMENTARY 500 S MILITARY ROAD SLIDELL, LA 70461	72-6001305	ST. TAMMANY PARI	0.	43,747.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOPE ALLIANCE COMMUNITY DEVELOPMENT CORPORATION - 445 CAMPGROUND RD - PALMETTO, LA 71358	26-3217083	501(C) 3	0.	307,830.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOPE AND PURPOSE MINISTRIES 3798 HWY 665 MONTEGUT, LA 70377	46-5403609	501(C) 3	0.	16,244.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOPE CENTER - TWO RIVERS BAPTIST ASSOCIATION - 61591 HIGHWAY 51 NORTH - AMITE, LA 70422	80-0941334	501(C) 3	0.	705,553.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOPE THE FOOD PANTRY OF NEW ORLEANS - 13040 I-10 SERVICE RD - NEW ORLEANS, LA 70128	46-3449360	501(C) 3	0.	6,127,928.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOPE THE FOOD PANTRY OF NEW ORLEANS - 13150 A I-10 SERVICE RD - NEW ORLEANS, LA 70128	46-3449360	501(C) 3	0.	81,801.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOPE THE FOOD PANTRY OF NEW ORLEANS MARTIN MANOR - 1500 N JOHNSON ST - NEW ORLEANS, LA 70119	46-3449360	501(C) 3	0.	81,418.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED



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HOUMA CIVIC CENTER 346 CIVIC CENTER BLVD HOUMA, LA 70360	72-6001390	TERREBONNE PARIS	0.	46,374.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOUSEHOLD OF FAITH 2074 PAXTON ST. HARVEY, LA 70058	72-1306529	501(C) 3	0.	17,993.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOUSEHOLD OF FAITH - WEST BANK 2074 PAXTON HARVEY, LA 70058	72-1306529	501(C) 3	0.	367,504.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HOUSEHOLD OF FAITH NEW ORLEANS EAST - 9300 I-10 SERVICE RD - NEW ORLEANS, LA 70127	72-1306529	501(C) 3	0.	266,994.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HYNES - UNO CAMPUS 6101 CHATHAM AVE NEW ORLEANS, LA 70122	46-5737261	ORLEANS PARISH S	0.	19,348.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HYNES CHARTER ELEM. PARKVIEW 4617 MIRABEAU AVE NEW ORLEANS, LA 70126	46-5737261	ORLEANS PARISH S	0.	32,222.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
HYNES CHARTER ELEMENTARY 990 HARRISON AVE NEW ORLEANS, LA 70124	46-5737261	ORLEANS PARISH S	0.	28,796.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ICNA RELIEF 4101 CALIFORNIA AVE., KENNER, LA 70065	04-3810161	501(C) 3	0.	126,889.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ICNA RELIEF 4101 CALIFORNIA AVE., KENNER, LA 70065	04-3810161	501(C) 3	0.	25,268.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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IMANI WORK 6930 MARTIN DR NEW ORLEANS, LA 70126	26-1846445	501(C) 3	0.	8,196.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
IMMACULATE CONCEPTION 604 AVENUE C MARRERO, LA 70072	72-0893609	ARCHDIOCESE OF N	0.	37,644.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
INDEPENDENCE ELEMENTARY 221 TIGER AVENUE INDEPENDENCE, LA 70443	72-6001372	TANGIPAHOA PARIS	0.	12,143.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
INFANT JESUS OF PRAGUE CHURCH 700 MAPLE AVE HARVEY, LA 70058	72-0795263	501(C) 3	0.	35,392.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ISLE DE JEAN CHARLES - BILOXIE-CHITIMACHA-CHOCTAW - 1105 HWY 55 (FIRE STATION) - MONTEGUT, LA 70377	27-0361281	501(C) 3	0.	22,505.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
IT'S WHAT WE DO OUTREACH MINISTRY 101 SAINT ANN ST RACELAND, LA 70394	72-0953409	501(C) 3	0.	244,532.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
JAMES C SIMMONS COMMUNITY CENTER 4008 US HWY 90 AVONDALE, LA 70094	72-6013920	JEFFERSON PARISH	0.	167,582.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
JEAN LAFITTE FOOD PANTRY/OUR COMMUNITY FOOD PANTRY - 580 JEAN LAFITTE BLVD - LAFITTE, LA 70067	72-0796567	GOVERNMENT	0.	115,991.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
JEFFERSON PRESBYTERIAN CHURCH 4450 JEFFERSON HWY JEFFERSON, LA 70121	91-1827475	501(C) 3	0.	150,163.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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JESSE OWENS PLAYGROUND 11101 NEWTON ST NEW ORLEANS, LA 70123	72-6013920	JEFFERSON PARISH	0.	14,657.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
JOSHUA BUTLER ELEMENTARY SCHOOL 300 FOURTH STREET WESTWEGO, LA 70094	72-6000592	JEFFERSON PARISH	0.	5,142.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
JOY FELLOWSHIP MINISTRIES 1901 TALBOT AVE THIBODAUX, LA 70301	43-2016144	501(C) 3	0.	181,314.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
JULES NUNEZ SEAFOOD PAVILION 920 JEAN LAFITTE BLVD LAFITTE, LA 70067	72-0796567	JEFFERSON PARISH	0.	37,461.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
KENNER FOOD BANK 317 OXLEY ST. KENNER, LA 70062	72-1211103	501(C) 3	0.	118,316.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
KINGDOM BUILDERS 401 HENKLE ST. JEANERETTE, LA 70544	56-2527092	501(C) 3	0.	193,167.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LA SPCA 1700 MARDI GRAS BLVD NEW ORLEANS, LA 70114	72-0471368	501(C) 3	0.	28,740.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LAFAYETTE ADULT AND TEEN CHALLENGE 1254 OLIVIER DR ARNAUVILLE, LA 70512	72-1106641	501(C) 3	0.	62,412.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LAFOURCHE PARISH GOVERNMENT 4876 HWY 1 MATHEWS, LA 70375	72-6000634	LAFOURCHE PARISH	0.	297,354.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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LAFOURCHE PARISH LIBRARY - RACELAND - 177 RECREATION DR. - RACELAND, LA 70394	72-1444867	501(C) 3	0.	5,288.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LAFOURCHE PARISH LIBRARY - THIBODAUX - 705 W. 5TH ST. - THIBODAUX, LA 70301	72-1444867	501(C) 3	0.	5,288.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LAGRANGE HIGH SCHOOL 3420 LOUISIANA AVE LAKE CHARLES, LA 70607	72-6000235	GOVERNMENT	0.	9,615.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LAKE HARBOR MIDDLE 1700 VIOLA STREET MANDEVILLE, LA 70448	72-6001305	ST. TAMMANY PARI	0.	36,890.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LAKESHORE HIGH 26301 HIGHWAY 1088 MANDEVILLE, LA 70448	72-6001305	ST. TAMMANY PARI	0.	40,019.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LANCASTER ELEMENTARY 133 PINE CREEK DRIVER MADISONVILLE, LA 70447	72-6001305	ST. TAMMANY PARI	0.	70,822.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LANTERN LIGHT, INC. 1802 TULANE AVE NEW ORLEANS, LA 70112	20-4769645	501(C) 3	0.	71,238.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LARC INC. 303 NEW HOPE RD LAFAYETTE, LA 70506	72-0604268	501(C) 3	0.	275,396.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LEE ROAD JUNIOR HIGH 79131 HIGHWAY 40 COVINGTON, LA 70435	72-6001305	ST. TAMMANY PARI	0.	36,058.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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LIBERTY IN CHRIST 2139 IOWA AVE KENNER, LA 70062	72-1099481	501(C) 3	0.	10,031.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LIFEHOUSE CHURCH 3556 WEST AIRLINE HIGHWAY RESERVE, LA 70084	72-0778152	501(C) 3	0.	77,066.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LIFT UP MY NAME HIGHER 1423 PAULINE ST NEW ORLEANS, LA 70117	72-1204782	501(C) 3	0.	137,989.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LITTLE CAILLOU 5655 BAYOUSIDE RD CHAUVIN, LA 70344	72-1002674	501(C) 3	0.	136,592.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LITTLE OAK MIDDLE 59241 REBEL DR SLIDELL, LA 70461	72-6001305	ST. TAMMANY PARI	0.	59,497.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LITTLE PEARL ELEMENTARY 63829 HIGHWAY 11 PEARL RIVER, LA 70452	72-6001305	ST. TAMMANY PARI	0.	10,432.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LITTLE ZION COMMUNITY OUTREACH 7814 HWY 182 FRANKLIN (VERDUNVILLE), LA 70538	72-1395233	501(C) 3	0.	513,565.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LITTLE ZORA MISSIONARY BAPTIST CHURCH - 3605 OLD JEANERETTE RD - NEW IBERIA, LA 70563	72-1000079	501(C) 3	0.	110,114.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LIVE OAK BAPTIST CHURCH 3968 HIGHWAY 665 MONTEGUT, LA 70377	72-1002674	501(C) 3	0.	154,466.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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LIVING WITNESS MINISTRY 1528 ORETHA CASTLE HALEY BLVD NEW ORLEANS, LA 70113	72-1112572	501(C) 3	0.	66,993.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LIVING WORD CHRISTIAN CENTER 1701 RYAN ST LAKE CHARLES, LA 70601	72-1384022	501(C) 3	0.	5,935.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LIVINGSTON COLLEGIATE ACADEMY 7301 DWYER ROAD NEW ORLEANS, LA 70126	80-0601507	501(C) 3	0.	21,558.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LOREAUVILLE BAPTIST CHURCH 8116 LOREAUVILLE RD LOREAUVILLE, LA 70552	72-0982444	501(C) 3	0.	16,235.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LOVE OF CHRIST BAPTIST CHURCH, INC 1121 WEST HUTCHINSON AVENUE CROWLEY, LA 70526	47-2007417	501(C) 3	0.	602,838.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LOVE OF CHRIST CHURCH 1121 WEST HUTCHINSON CROWLEY, LA 70526	47-2007417	501(C) 3	0.	95,545.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LOVETOUCH MINISTRIES 2025 WHITNEY AVE GRETNA, LA 70056	72-1248483	501(C) 3	0.	63,728.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LOWERNINE.ORG 1739 JOURDAN AV NEW ORLEANS, LA 70117	11-3821601	501(C) 3	0.	170,442.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LOWLANDER CENTER 106 SANDALWOOD DR GRAY, LA 70359	46-4993987	501(C) 3	0.	62,120.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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LULING ELEMENTARY 904 SUGARHOUSE ROAD LULING, LA 70070	72-6001209	ST. CHARLES PARI	0.	15,382.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
LYON ELEMENTARY 1615 N. FLORIDA STREET COVINGTON, LA 70433	72-6001305	ST. TAMMANY PARI	0.	42,107.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MADISONVILLE ELEMENTARY 317 HIGHWAY 1077 MADISONVILLE, LA 70447	72-6001305	ST. TAMMANY PARI	0.	58,474.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MADISONVILLE JUNIOR HIGH 106 CEDAR STREET MADISONVILLE, LA 70447	72-6001305	ST. TAMMANY PARI	0.	28,149.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MAGNOLIA TRACE ELEMENTARY 1405 HIGHWAY 1088 MANDEVILLE, LA 70448	72-6001305	ST. TAMMANY PARI	0.	26,900.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MAGNOLIA VILLA 1801 MAGNOLIA ST NEW ORLEANS, LA 70113	72-1277603	501(C) 3	0.	16,248.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MANDEVILLE CHRISTIAN FELLOWSHIP 1211 HWY 1088 MANDEVILLE, LA 70435	72-0996891	501(C) 3	0.	149,312.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MANDEVILLE ELEMENTARY 519 MASSENA STREET MANDEVILLE, LA 70448	72-6001305	ST. TAMMANY PARI	0.	37,774.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MANDEVILLE HIGH 1 SKIPPER DRIVE MANDEVILLE, LA 70471	72-6001305	ST. TAMMANY PARI	0.	71,769.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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MANDEVILLE JUNIOR HIGH 639 CARONDELET STREET MANDEVILLE, LA 70448	72-6001305	ST. TAMMANY PARI	0.	22,471.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MANDEVILLE MIDDLE 2525 SOULT STREET MANDEVILLE, LA 70448	72-6001305	ST. TAMMANY PARI	0.	36,426.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MARAIS APARTMENT SENIOR DEVELOPMENT - 1501 CANAL ST. - NEW ORLEANS, LA 70112	43-1141027	501(C) 3	0.	32,405.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MARIGNY ELEMENTARY 1715 VIOLA STREET MANDEVILLE, LA 70448	72-6001305	ST. TAMMANY PARI	0.	33,937.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MARK'S ANIMAL RESCUE, INC 28026 RIVER RD MOUNT HERMON, LA 70450	83-2758443	501(C) 3	0.	8,375.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MARRERO COMMUNITY/SENIOR ACTIVITY CENTER - 1861 AMES BLVD. - MARRERO, LA 70072	72-0613920	JEFFERSON PARISH	0.	159,085.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MARY BIRD PERKINS CANCER CENTER 1203 S TYLER ST COVINGTON, LA 70433	23-7010520	501(C) 3	0.	11,371.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MARY QUEEN OF PEACE 1501 W CAUSEWAY APPROACH MANDEVILLE, LA 70471	72-0893609	ARCHDIOCESE OF N	0.	21,383.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MARY'S CHAPEL UMC 63343 JONES CREEK RD. ANGIE, LA 70426	23-7188652	501(C) 3	0.	235,941.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED



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MATTHEW 25 35 FOOD PANTRY 1905 ORMOND BLVD. DESTREHAN, LA 70047	81-4581540	501(C) 3	0.	897,669.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MAYFIELD ELEMENTARY 31820 HIGHWAY 190 W SLIDELL, LA 70460	72-6001305	ST. TAMMANY PARI	0.	58,942.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MEN AND WOMEN OF DYNAMISM 2529 GENERAL MEYER AVE NEW ORLEANS, LA 70114	84-2790492	501(C) 3	0.	10,261.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MERCY ENDEAVORS SENIORS 457 JACKSON AVE NEW ORLEANS, LA 70130	26-0502228	501(C) 3	0.	14,884.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MICKEY MOUSE HEAD START SCHOOL PANTRY - 105 TJ HATCHELSON ST - BALDWIN, LA 70514	13-5562279	501(C) 3	0.	12,777.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MISSION PANTRY LACOMBE 31294 US 190 LACOMBE, LA 70445	72-1151696	501(C) 3	0.	1,623,455.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MOBILE MARKET LAFAYETTE 215 E PINHOOK RD LAFAYETTE, LA 70501	72-0956468	501(C) 3	0.	20,696.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MOHORN MISSIONARY BAPTIST CHURCH 216 COSAY ROAD OPELOUSAS, LA 70570	73-1717403	501(C) 3	0.	77,075.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MOLO MIDDLE SCHOOL 2300 MEDORA ST LAKE CHARLES, LA 70601	72-6000235	GOVERNMENT	0.	11,910.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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MONTELEONE JR HIGH 63000 BLUE MARLIN DR MANDVILLE, LA 70448	72-6001305	ST. TAMMANY PARI	0.	25,519.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MOSES BAPTIST CHURCH 1032 CANAL BLVD THIBODAU, LA 70301	72-1052024	501(C) 3	0.	96,185.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MOTON CHARTER ELEMENTARY 8550 CURRAN RD NEW ORLEANS, LA 70126	46-5737261	ORLEANS PARISH S	0.	35,008.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MOUNT CALVARY INTERNATIONAL WORSHIP CENTER - 1600 WESTWOOD DR. - MARRERO, LA 70072	72-1123205	501(C) 3	0.	166,309.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MOUNT HERMON COMMUNITY DEVELOPMENT OUTREACH - 3512 US HIGHWAY 90 - AVONDALE, LA 70094	47-0926638	501(C) 3	0.	136,828.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MS. HELEN'S SOUP KITCHEN 117 WEST 7TH ST CROWLEY, LA 70526	72-0464892	501(C) 3	0.	147,163.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MT. CALVARY B. C. FOOD BANK 418 JULIA ST. NEW IBERIA, LA 70560	72-0816010	501(C) 3	0.	207,601.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
MT. OLIVE BC #2 805 FIELD ST. NEW IBERIA, LA 70560	38-3902499	501(C) 3	0.	90,801.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NEW BEGINNING CHURCH 100 E UNIVERSITY AVE HAMMOND, LA 70401	82-3063961	GOVERNMENT	0.	10,880.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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NEW BEGINNINGS PRIMITIVE BAPTIST 622 E. VETERANS MEMORIAL DRIVE KAPLAN, LA 70548	26-3793829	501(C) 3	0.	151,532.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NEW COVENANT FAITH MINISTRIES 2324 OLD COMPTON RD HARVEY, LA 70058	72-1464626	501(C) 3	0.	257,953.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NEW HOPE COMMUNITY CHURCH 2715 GADSON KENNER, LA 70065	34-2004956	501(C) 3	0.	5,130.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NEW JERUSALEM BC 710 WELSH STREET WELSH, LA 70591	72-0538503	501(C) 3	0.	36,359.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NEW MAGNOLIA BAPTIST CHURCH 427 HWY 311 SCHRIEVER, LA 70395	85-1769092	501(C) 3	0.	28,915.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NEW ORLEANS CITY GOVERNMENT 1300 PERDIDO ST NEW ORLEANS, LA 70122	72-6000969	GOVERNMENT	0.	113,742.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NEW ORLEANS MISSION 1130 ORETHA CASTLE HALEY BLVD NEW ORLEANS, LA 70113	72-1151696	501(C) 3	0.	1,459,857.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NEW STEP OUTREACH 2154 HWY 171 DERIDDER, LA 70634	84-2430381	501(C) 3	0.	115,000.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NEW WINE DEVELOPMENT CORPORATION 1921 AIRLINE HIGHWAY LA PLACE, LA 70068	72-1425139	501(C) 3	0.	827,277.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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NINTH BAPTIST CHURCH 726 N. LATOUR VILLE PLATTE, LA 70586	72-0985045	501(C) 3	0.	443,067.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NOBLE MINDS INSTITUTE FOR WHOLE CHILD LEARNING - 1333 S. CARROLTON AVE. - NEW ORLEANS, LA 70118	46-5737261	ORLEANS PARISH S	0.	13,115.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NOLA GIVES DELIVERY: 925 BEHRMAN HWY GRETNA, LA 70056	84-4055839	501(C) 3	0.	15,447.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NORDC - ROSENWALD CENTER 1120 SOUTH BROAD ST. NEW ORLEANS, LA 70125	72-6000969	501(C) 3	0.	6,443.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NORDC STALLINGS REC CENTER 4300 ST. CLAUDE AVE. NEW ORLEANS, LA 70117	72-6000969	ORLEANS PARISH G	0.	7,082.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NORDC CUT OFF CENTER 6600 BELGRADE ST NEW ORLEANS, LA 70131	72-6000969	GOVERNMENT	0.	6,420.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NORDC LAFITTE GREENWAY PARK 1971 ST. LOUIS ST NEW ORLEANS, LA 70112	72-6000969	GOVERNMENT	0.	6,953.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NORTHSHORE FOOD BANK 125 WEST 30TH AVENUE COVINGTON, LA 70433	72-1028539	501(C) 3	0.	668,639.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
NORTHSHORE HIGH 100 PANTHER DRIVE SLIDELL, LA 70461	72-6001305	ST. TAMMANY PARI	0.	59,315.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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NOTRE DAME SEMINARY-NEW ORLEANS CITY GOVERNMENT - 2901 S. CARROLLTON AVE. - NEW ORLEANS, LA 70118	72-6000969	CITY OF NEW ORLE	0.	19,021.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OAK PARK ELEMENTARY 2001 18TH ST LAKE CHARLES, LA 70601	72-6000235	CALCASIEU PARISH	0.	8,559.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OLD WALMART PARKING LOT-CYNDI NUGYEN - 9701 I-10 SERVICE RD - NEW ORLEANS, LA 70127	72-6000969	GOVERNMENT	0.	41,847.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OPERATION BLESSING 714 ST. BERNARD HWY. BRAITHWAITE, LA 70040	41-2186581	501(C) 3	0.	12,518.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ORLEANS PARISH SCHOOL BOARD 2401 WETBEND PARKWAY NEW ORLEANS, LA 70114	46-5737261	ORLEANS PARISH S	0.	34,439.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OUR DAILY BREAD FOOD BANK 1006 WEST COLEMAN AVE HAMMOND, LA 70404	72-1438651	501(C) 3	0.	2,520,132.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OUR LADY DIVINE PROVIDENCE 1000 N STARRETT RD METAIRIE, LA 70003	72-0408966	501(C) 3	0.	41,864.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OUR LADY OF GRACE 780 HIGHWAY 44 RESERVE, LA 70084	72-6015996	501(C) 3	0.	52,152.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OUR LADY OF LOURDES 365 WESTCHESTER PL SLIDELL, LA 70458	72-0893609	ARCHDIOCESE OF N	0.	20,046.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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OUR LADY OF PERPETUAL HELP (KENNER) - 524 MINOR ST - KENNER, LA 70062	72-0893609	ARCHDIOCESE OF N	0.	15,403.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OUR LADY OF PROMPT SUCCOR (CHALMETTE) - 2305 FENELON - CHALMETTE, LA 70043	72-0893609	ARCHDIOCESE OF N	0.	20,127.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OUR LADY OF PROMPT SUCCOR (WESTWEGO) - 531 AVENUE A - WESTWEGO, LA 70094	72-0893609	ARCHDIOCESE OF N	0.	24,921.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OUR LADY OF THE LAKE ELEMENTARY 316 LAFITTE ST MANDVILLE, LA 70448	72-0893609	ARCHDIOCESE OF N	0.	24,128.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OUR LADY OF VICTORY FOOD PANTRY 120 DAIGRE ST. / PO BOX 387 LOREAUVILLE, LA 70552	72-0821360	501(C) 3	0.	656,414.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OUTREACH FULL GOSPEL BAPTIST CHURCH - 304 13TH AVENUE - FRANKLINTON, LA 70438	72-1286024	501(C) 3	0.	90,712.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
OZANAM INN 2239 POYDRAS AVE NEW ORLEANS, LA 70119	72-0854403	501(C) 3	0.	58,148.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PALMETTO ELEMENTARY 235 RIDEAU ROAD PALMETTO, LA 71358	72-6001257	GOVERNMENT	0.	10,282.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PANTRY OF HOPE 3975 EAST PRIEN LAKE ROAD LAKE CHARLES, LA 70615	72-1459712	501(C) 3	0.	779,466.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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PASTORS ARMY 1327 BAYOU DULARGE RD THERIOT, LA 70397	83-0554538	JEFFERSON PARISH	0.	160,515.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PEARL RIVER HIGH 39110 REBEL LANE PEARL RIVER, LA 70452	72-6001305	ST. TAMMANY PARI	0.	39,564.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PENTECOSTALS OF VINTON 835 FAIRCHILD ST VINTON, LA 70668	72-1244861	501(C) 3	0.	485,169.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PEOPLES COMMUNITY ORGANIZATION 1206 TOURO ST NEW ORLEANS, LA 70116	58-2001640	501(C) 3	0.	11,472.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PERCY GRIFFIN COMMUNITY CENTER 15577 HWY 15 BRAITHWAITE, LA 70040	72-6001090	PLAQUEMINES PARI	0.	63,734.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PERRO BLESSING OUTREACH MINISTRY INC - 4805 HAZARD RD - NEW IBERIA, LA 70560	84-4172466	501(C) 3	0.	103,993.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PHILADELPHIA MINISTRIES/ PHILADELPHIA COMMUNITY - 3181 DESTREHAN AVE. - HARVEY, LA 70058	72-1241933	501(C) 3	0.	265,920.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PILGRIM GROVE BAPTIST CHURCH 1110 GRACE ST. MORGAN CITY, LA 70380	72-0471378	501(C) 3	0.	59,094.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PILGRIM REST COMMUNITY DEVELOPMENT AGENCY - BURAS YMCA36342 HWY 11,BURAS/33801 PARISH RD H. 11 - BURAS, LA 70041	72-1478135	501(C) 3	0.	154,017.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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PINE VIEW MIDDLE 1200 W. 27TH AVE, COVINGTON, LA 70433	72-6001305	ST. TAMMANY PARI	0.	42,202.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PITCHER JUNIOR HIGH 415 S. JEFFERSON AVE. COVINGTON, LA 70433	72-6001305	ST. TAMMANY PARI	0.	17,779.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PLAQUEMINES COMMUNITY ACTION AGENCY - 479 F EDWARD HEBERT BLVD - BELLE CHASSE, LA 70037	72-6001090	PLAQUEMINES PARI	0.	39,255.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PLAQUEMINES PARISH SCHOOL BOARD 26138 HIGHWAY 23 PORT SULPHUR, LA 70083	72-6001091	PLAQUEMINES PARI	0.	153,869.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PLAQUEMINES PARISH SHELTER 333 EDWARD HEBERT BLVD. BUILDING 55 BELLE CHASSE, LA 70037	72-6001090	GOVERNMENT	0.	9,546.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PLYMOUTH ROCK BAPTIST CHURCH 1000 WALLIS ST HOUMA, LA 70360	72-0986482	501(C) 3	0.	939,211.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
POPE JOHN PAUL II HIGH SCHOOL 1901 JAGUAR DR SLIDELL, LA 70461	72-0893609	ARCHDIOCESE OF N	0.	14,748.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PORT BARRE POLICE DEPARTMENT 498 SAIZAN AVE PORT BARRE, LA 70577	72-6001114	GOVERNMENT	0.	5,508.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
PROGRESSIVE COMMUNITY OUTREACH 125 GALLIAN ST. LAFAYETTE, LA 70501	72-1501652	501(C) 3	0.	1,103,255.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED



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PROJECT HOPE 445 CAMPGROUND RD PALMETTO, LA 71358	26-3217083	GOVERNMENT	0.	5,508.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
RACELAND AG CENTER 100 TEXAS ST RACELAND, LA 70394	72-6000634	GOVERNMENT	0.	13,518.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
RAYNE MEMORIAL UNITED METHODIST CHURCH - 3925 PITT ST - NEW ORLEANS, LA 70115	72-0435090	501(C) 3	0.	76,540.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
REDEMPTION CHURCH 62060 LA-434 LACOMBE, LA 70445	72-1256093	501(C) 3	0.	165,450.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
RENEW REINVENTING ED. (DOLORES T. AARON ACADEMY) - 10200 CURRAN RD. - NEW ORLEANS, LA 70127	80-0419622	501(C) 3	0.	16,437.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
RENEW REINVENTING ED. (LAUREL ACADEMY) - 820 JACKSON AVE. - NEW ORLEANS, LA 70130	80-0419622	501(C) 3	0.	17,291.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
RENEW REINVENTING ED. (SCHAUMBURG ELEMENTARY) - 9501 GRANT ST. - NEW ORLEANS, LA 70127	80-0419622	501(C) 3	0.	16,761.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
RENEW REINVENTING EDUCATION 3649 LAUREL STREET NEW ORLEANS, LA 70115	80-0419622	501(C) 3	0.	8,755.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
RESPONSIBILITY HOUSE 136 HAMILTON ST / 1799 STUMPF BLVD GRETNA, LA 70056	72-1271032	501(C) 3	0.	12,206.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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RESURRECTION 4861 ROSALIA DR NEW ORLEANS, LA 70127	72-0893609	ARCHDIOCESE OF N	0.	25,173.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
REVEREND CHARLES MILTON LEVIAS FOOD PANTRY - 900 AVENUE B - BOGALUSA, LA 70427	86-1733481	501(C) 3	0.	186,966.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
REVIVE CHURCH 60456 MILITARY RD SLIDELL, LA 70461	85-1468049	501(C) 3	0.	16,625.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
RIVERSIDE ELEMENTARY 38480 SULLIVAN DRIVE PEARL RIVER, LA 70452	72-6001305	ST. TAMMANY PARI	0.	36,364.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SALMEN HIGH 300 SPARTAN DRIVE SLIDELL, LA 70458	72-6001305	ST. TAMMANY PARI	0.	50,007.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SALVATION ARMY/LAFAYETTE 212 SIXTH ST LAFAYETTE, LA 70502	58-0660607	501(C) 3	0.	20,126.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SANCTUARY OF PRAISE 1415 7TH STREET MAMOU, LA 70554	20-5300905	501(C) 3	0.	74,964.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SANKOFA HEALTHY FOOD HUB 5200 DAUPHINE ST NEW ORLEANS, LA 70117	26-3471054	501(C) 3	0.	320,592.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SCHOOL FOOD & NUTRITION SERVICE OF NEW ORLEANS - 3000 W. ESPLANADE AVE. SUITE 300 - METAIRIE, LA 70002	72-0893609	ARCHDIOCESE OF N	0.	10,136.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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SCOTT MIDDLE SCHOOL 116 MARIE STREET SCOTT, LA 70583	72-1250421	LAYAFETTE PARISH	0.	9,536.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SECOND ZION BAPTIST CHURCH 6520 SECOND ZION AVE., MARRERO, LA 70072	72-1217553	501(C) 3	0.	20,552.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SINGLETON CHARTER 2220 ORETHA CASTLE HALEY BLVD NEW ORLEANS, LA 70113	46-5737261	ORLEANS PARISH S	0.	19,384.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SIXTH WARD ELEMENTARY 72360 HIGHWAY 41 PEARL RIVER, LA 70452	72-6001305	ST. TAMMANY PARI	0.	27,274.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SLIDELL HIGH 1 TIGER DRIVE SLIDELL, LA 70458	72-6001305	ST. TAMMANY PARI	0.	70,388.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SLIDELL JUNIOR HIGH 333 PENNSYLVANIA SLIDELL, LA 70458	72-6001305	ST. TAMMANY PARI	0.	52,499.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SMILE 800 ISADORE/ADAM CARSON PARK SAINT MARTINVILLE, LA 70582	72-0648848	ST. MARTIN PARIS	0.	295,279.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SOCIAL SERVICE CENTER-NEW IBERIA 432 BANK AVE NEW IBERIA, LA 70560	72-0782780	501(C) 3	0.	87,490.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SOLOMON HOUSE BROWN BAG EPIPHANY 520 CENTER ST NEW IBERIA, LA 70560	72-1425609	501(C) 3	0.	169,068.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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SOUTH BEAU C.A.R.E. MINISTRIES 2465 TEXAS EASTERN RD. RAGLEY, LA 70657	72-1195474	501(C) 3	0.	193,775.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SOUTHWEST LA AIDS COUNCIL 425 KINGSLEY LAKE CHARLES, LA 70601	72-1115522	501(C) 3	0.	114,748.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
SPIRIT OF LIBERTY CHRISTIAN FELLOWSHIP - 2841 LOUISIANA AVENUE - LAFAYETTE, LA 70501	72-0919376	501(C) 3	0.	117,786.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. ANDREW THE APOSTLE 3131 ETON ST NEW ORLEANS, LA 70131	72-0893609	ARCHDIOCESE OF N	0.	21,001.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. ANN ELEMENTARY 4921 MEADOWDALE ST METAIRIE, LA 70006	72-0893609	ARCHDIOCESE OF N	0.	37,815.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. ANTHONY CATHOLIC CHURCH 615 EDISON ST LAFAYETTE, LA 70501	72-0964633	501(C) 3	0.	25,665.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. ANTHONY ELEMENTARY (GRETNA) 901 FRANKLIN AVE GRETNA, LA 70053	72-0893609	ARCHDIOCESE OF N	0.	25,283.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. ANTHONY/ST. VINCENT DEPAUL SOCIETY - 2653 JEAN LAFITTE - LAFITTE, LA 70067	72-6015881	501(C) 3	0.	425,288.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. AUGUSTINE HIGH SCHOOL 2600 A. P. TUREAUD AVE NEW ORLEANS, LA 70119	72-0893609	ARCHDIOCESE OF N	0.	35,993.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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ST. BENILDE ELEMENTARY 1801 DIVISION ST METAIRIE, LA 70001	72-0893609	ARCHDIOCESE OF N	0.	23,273.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. BERNADETTE ELEMENTARY 309 FUNDERBURK AVE HOUMA, LA 70364	72-0893609	ARCHDIOCESE OF N	0.	42,887.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. BERNARD CATHOLIC CHURCH 2805 BAYOU RD ST. BERNARD, LA 70085	72-0654783	501(C) 3	0.	73,024.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. BERNARD MANOR 2400 ARCHBISHOP HANNAN BLVD MERAUX, LA 70075	53-0196617	501(C) 3	0.	38,058.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. BERNARD/ST. FRANCIS FOOD PANTRY - 701 W BRIDGE ST - BREAux BRIDGE, LA 70517	80-0754359	501(C) 3	0.	233,456.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. CATHERINE OF SIENA 105 BONNABEL BLVD METAIRIE, LA 70005	72-0893609	501(C) 3	0.	6,619.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. CHARLES BORROMEO 13396 RIVER RD DESTREHAN, LA 70047	72-0893609	ARCHDIOCESE OF N	0.	29,500.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. CHARLES CATHOLIC HIGH 100 DOMINICAN DR LA PLACE, LA 70068	72-0893609	ARCHDIOCESE OF N	0.	24,933.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. CHARLES PARISH DEPT OF COMM SERV / NEW SARPY - 14564 RIVER RD. - NEW SARPY, LA 70078	72-6001208	ST CHARLES PARIS	0.	13,430.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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ST. CHARLES PARISH DEPT OF COMM SERV / ST. ROSE - 608 MOCKINGBIRD LANE - SAINT ROSE, LA 70087	72-6001208	ST CHARLES PARIS	0.	14,901.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. CHRISTOPHER ELEMENTARY 3924 DERBIGNY ST METAIRIE, LA 70001	72-0893609	ARCHDIOCESE OF N	0.	28,449.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. CLEMENT OF ROME 3978 W ESPLANADE AVE METAIRIE, LA 70002	72-0893609	ARCHDIOCESE OF N	0.	49,191.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. CLEMENT OF ROME CHURCH 4317 RICHLAND AVE METAIRIE, LA 70002	53-0196617	501(C) 3	0.	14,604.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. CLETUS ELEMENTARY 3610 CLAIRE AVE GRETNA, LA 70053	72-0893609	ARCHDIOCESE OF N	0.	29,356.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. DOMINIC ELEMENTARY 6323 MEMPHIS ST NEW ORLEANS, LA 70124	72-0893609	ARCHDIOCESE OF N	0.	32,696.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. EDWARD THE CONFESSOR 4901 W METAIRIE AVE METAIRIE, LA 70001	72-0893609	ARCHDIOCESE OF N	0.	23,349.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. FRANCIS DE SALES 300 VERRET ST HOUMA, LA 70360	72-0893609	ARCHDIOCESE OF N	0.	65,189.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. FRANCIS XAVIER 215 BETZ PL METAIRIE, LA 70005	72-0893609	ARCHDIOCESE OF N	0.	40,140.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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ST. GENEVIEVE ELEMENTARY 807 BARBIER AVE THIBODAU, LA 70301	72-0893609	ARCHDIOCESE OF N	0.	34,884.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JEROME CATHOLIC CHURCH FOOD PANTRY - 2402 33RD ST - KENNER, LA 70065	53-0196617	501(C) 3	0.	38,233.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JOAN OF ARC (LAPLACE) 487 FIR ST LA PLACE, LA 70068	72-0893609	ARCHDIOCESE OF N	0.	30,234.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JOAN OF ARC (NEW ORLEANS) 919 CAMBRONNE ST NEW ORLEANS, LA 70118	72-0893609	ARCHDIOCESE OF N	0.	12,999.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JOAN OF ARC CHURCH 529 W 5TH ST LA PLACE, LA 70068	72-0548811	501(C) 3	0.	20,328.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JOHN BAPTIST CHURCH 822 W. HICKORY ST VILLE PLATTE, LA 70586	72-1194596	501(C) 3	0.	215,392.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JOHN COMMUNITY ACTION AGENCY 128 CENTRAL AVE LAPLACE, LA 70084	72-6001235	ST JOHN THE BAPT	0.	123,355.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JOHN PARISH 118 W 10TH ST RESERVE, LA 70084	72-6001236	ST. JOHN PARISH	0.	79,118.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JOHN REGIS CATHOLIC CHURCH 232 MAIN ST ARNAUDVILLE, LA 70512	72-0467516	501(C) 3	0.	41,295.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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ST. JOHN THE BAPTIST CATHOLIC CHURCH - 15504 HIGHWAY 90 - PARADIS, LA 70080	53-0196617	501(C) 3	0.	281,013.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JOSEPH ELEMENTARY (THIBODAU) 501 CARDINAL DR THIBODAU, LA 70301	72-0893609	ARCHDIOCESE OF N	0.	50,932.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JOSEPH THE WORKER FOOD BANK 455 AMES BLVD MARRERO, LA 70072	53-0196617	501(C) 3	0.	76,576.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JUDE COMMUNITY CENTER 400 NORTH RAMPART ST NEW ORLEANS, LA 70112	72-0959534	501(C) 3	0.	91,689.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. JUDE COMMUNITY CENTER 1530 GRAVIER ST NEW ORLEANS, LA 70112	72-0959534	501(C) 3	0.	67,214.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. KATHARINE DREXEL PREPARATORY 5116 MAGAZINE ST NEW ORLEANS, LA 70115	72-0893609	ARCHDIOCESE OF N	0.	13,785.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. LANDRY CAA 1065 HWY449 OPELOUSAS, LA 70570	72-6001257	ST LANDRY PARISH	0.	896,908.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. LEO 1501 ABUNDANCE ST NEW ORLEANS, LA 70119	72-0893609	ARCHDIOCESE OF N	0.	22,121.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. LUKES CATHOLIC CHURCH 910 CROSS GATES BLVD. SLIDELL, LA 70461	53-0196617	501(C) 3	0.	29,751.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED



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ST. MARGARET MARY 1050 ROBERT RD SLIDELL, LA 70458	72-0893609	ARCHDIOCESE OF N	0.	22,508.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. MARGARET MARY SCHOOL 1050 ROBERT RD SLIDELL, LA 70458	72-0893609	501(C) 3	0.	16,591.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. MARTIN COUNCIL ON AGING 391 CANNERY RD BREAUX BRIDGE, LA 70517	72-0758720	501(C) 3	0.	26,500.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. MARY MAGDALEN 6425 W METAIRIE AVE METAIRIE, LA 70003	72-0893609	ARCHDIOCESE OF N	0.	12,850.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. MARY MAGDALEN CHRISTIAN SERVICE CENTER - 701 CHEVIS ST - ABBEVILLE, LA 70510	72-0522760	501(C) 3	0.	240,778.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. MARY MAGDALEN CHRISTIAN SERVICE CENTER - 701 CHEVIS ST - ABBEVILLE, LA 70510	72-0522760	501(C) 3	0.	16,201.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. MARY OF THE ANGELS CHURCH 3501 NORTH MIRO STREET NEW ORLEANS, LA 70117	53-0196617	501(C) 3	0.	34,220.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. MARY'S ACADEMY ELEMENTARY 6905 CHEF MENTEUR HWY NEW ORLEANS, LA 70126	72-0893609	ARCHDIOCESE OF N	0.	26,544.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. MARY'S ACADEMY HIGH 6905 CHEF MENTEUR HWY NEW ORLEANS, LA 70126	72-0893609	ARCHDIOCESE OF N	0.	36,028.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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ST. MARY'S NATIVITY 3492 NIES ST RACELAND, LA 70394	72-0893609	ARCHDIOCESE OF N	0.	44,417.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. MATTHEW THE APOSTLE ELEMENTARY 10021 JEFFERSON HWY RIVER RIDGE, LA 70123	72-0893609	ARCHDIOCESE OF N	0.	21,093.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. NICHOLAS SOCIAL JUSTICE & COMMUNITY CONCERN - 3317 PATOUT RD - JEANERETTE, LA 70544	72-0697130	501(C) 3	0.	75,666.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. PAUL HIGH SCHOOL (COVINGTON) 917 S JAHNCKE COVINGTON, LA 70433	72-0893609	ARCHDIOCESE OF N	0.	36,422.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. PETER CLAVER CHURCH 1923 ST. PHILIP ST NEW ORLEANS, LA 70116	72-0423613	501(C) 3	0.	252,807.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. PETER ELEMENTARY (COVINGTON) 130 E TEMPERANCE ST COVINGTON, LA 70433	72-0893609	ARCHDIOCESE OF N	0.	38,937.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. PETER RESERVE 188 WEST 7TH ST RESERVE, LA 70084	72-0893609	ARCHDIOCESE OF N	0.	11,969.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. PIUS X ELEMENTARY 6600 SPANISH FORT BLVD NEW ORLEANS, LA 70124	72-0893609	ARCHDIOCESE OF N	0.	40,241.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. RITA (NEW ORLEANS) 65 FOUNTAINEBLEAU DR NEW ORLEANS, LA 70125	72-0893609	ARCHDIOCESE OF N	0.	38,735.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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ST. RITA ELEMENTARY (HARAHAN) 194 RAVAN AVE HARAHAN, LA 70123	72-0893609	ARCHDIOCESE OF N	0.	14,992.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. ROSALIE ELEMENTARY 617 SECOND ST HARVEY, LA 70058	72-0893609	ARCHDIOCESE OF N	0.	15,814.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. SCHOLASTICA ACADEMY 122 S MASSACHUSETTS ST COVINGTON, LA 70433	72-0893609	ARCHDIOCESE OF N	0.	16,216.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. STEPHEN ELEMENTARY 4310 CHESTNUT ST NEW ORLEANS, LA 70115	72-0893609	ARCHDIOCESE OF N	0.	12,012.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. TAMMANY JR HIGH 701 CLEVELAND AVE SLIDELL, LA 70458	72-6001305	ST. TAMMANY PARI	0.	44,665.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ST. TERESA CENTER FOR WORKS OF MERCY - 305 WASHINGTON ST. - SAINT MARTINVILLE, LA 70582	81-3756179	501(C) 3	0.	176,138.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
STORM OUTREACH COMMUNITY CTR. 7505 MAIN ST HOUMA, LA 70364	54-2178253	501(C) 3	0.	210,926.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
STRIKE II MINISTRIES 250 NORTH SECOND ST PONCHATOULA, LA 70454	72-1378829	501(C) 3	0.	38,499.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TABERNACLE OF HOPE CENTER 925 W BROUSSARD ROAD LAFAYETTE, LA 70506	58-0742249	501(C) 3	0.	17,719.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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TANGI FOOD PANTRY 2410 WEST THOMAS ST HAMMOND, LA 70403	58-1788937	501(C) 3	0.	160,535.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TANGI HUMANE SOCIETY 46219 RIVER RD HAMMOND, LA 70401	26-3720306	GOVERNMENT	0.	10,314.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TCA - GERT TOWN/HOLLYGROVE/THALIA WAREHOUSE - 4518 THALIA ST - NEW ORLEANS, LA 70125	72-0599165	501(C) 3	0.	476,049.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TCHEFUNCTE MIDDLE 1530 W. CAUSEWAY APPROACH MANDVILLE, LA 70471	72-6001305	ST. TAMMANY PARI	0.	75,841.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TCU (TERREBONNE CHURCHES UNITED) FOOD BANK - 922 SUNSET AVE - HOUMA, LA 70360	72-1134481	501(C) 3	0.	30,346.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TERREBONNE PARISH CONSOLIDATED GOVERNMENT - 4800 HWY 311 - HOUMA, LA 70360	72-6001390	TERREBONNE PARIS	0.	12,496.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TERRYTOWN ELEMENTARY 550 E. FOREST LAWN DR. GRETNA, LA 70056	72-6000592	GOVERNMENT	0.	18,547.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TERRYTOWN ELEMENTARY 550 E. FOREST LAWN DR. GRETNA, LA 70056	72-6000592	JEFFERSON PARISH	0.	16,585.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THE DWELLING PLACE 701 HICKORY ST THIBODAUX, LA 70301	82-2230304	501(C) 3	0.	62,655.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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THE LEVEL UP CAMPAIGN 1123 LAMANCHE ST NEW ORLEANS, LA 70114	83-3082819	501(C) 3	0.	19,143.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THE NET CHARTER HIGH SCHOOL 12000 HAYNE BLVD NEW ORLEANS, LA 70128	27-0588087	501(C) 3	0.	7,613.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THE PURPLE LEMON 861 HWY 90 MORGAN CITY, LA 70380	84-4479661	501(C) 3	0.	232,536.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THE SALVATION ARMY GNO FOOD PANTRY 4546 SOUTH CLAIBORNE AVE NEW ORLEANS, LA 70125-5008	58-0660607	501(C) 3	0.	5,197.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THE SALVATION ARMY GNO SHELTER 4526 SOUTH CLAIBORNE AVE NEW ORLEANS, LA 70125-5008	58-0660607	501(C) 3	0.	37,246.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THE SALVATION ARMY/ARC 200 JEFFERSON HWY JEFFERSON, LA 70121	72-0411326	501(C) 3	0.	171,401.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THE SAMARITAN CENTER, INC. 402 GIROD ST MANDENVILLE, LA 70448	58-1882948	501(C) 3	0.	205,562.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THE UNIVERSAL CHURCH 2929 METAIRIE CT. METAIRIE, LA 70002	13-3443110	501(C) 3	0.	301,825.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THE UPPERROOM BIBLE CHURCH 8600 LAKE FOREST BLVD NEW ORLEANS, LA 70127	72-1227150	501(C) 3	0.	405,813.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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THE WILLOW SCHOOL ELEMMENTARY 7315 WILLOW ST. NEW ORLEANS, LA 70118	46-5737261	ORLEANS PARISH S	0.	21,663.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THE WILLOW SCHOOL HIGH SCHOOL 5624 FRERET ST. NEW ORLEANS, LA 70115	46-5737261	ORLEANS PARISH S	0.	25,028.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
THRIVE 3600 DESIRE PKWY NEW ORLEANS, LA 70126	26-1824498	501(C) 3	0.	6,281.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TOWN OF FRANKLINTON 409 11TH AVE FRANKLINTON, LA 70438	72-6000471	GOVERNMENT	0.	7,131.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TOWN OF GRAND ISLE 3811 HWY 1 GRAND ISLE, LA 70358	72-6014896	JEFFERSON PARISH	0.	86,010.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TOWN OF KROTZ SPRINGS 224 MAIN ST KROTZ SPRINGS, LA 70750	72-6013748	CITY OF KROTZ SP	0.	172,459.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TOWN OF LOCKPORT (RECREATION BALL PARK) - 712 COLUMBUS ST. - LOCKPORT, LA 70374	72-6000690	GOVERNMENT	0.	257,747.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TOWN OF MELVILLE 1105 1ST. STREET MELVILLE, LA 71353	72-6000890	ST LANDRY PARISH	0.	661,657.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
TRUE LOVE MISSIONARY BAPTIST CHURCH - 2710 PHILLIP ST - NEW ORLEANS, LA 70113	72-1374935	501(C) 3	0.	6,995.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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TRUE VINE MINISTRIES 1555 W. WILLOW SCOTT, LA 70583	72-1063479	501(C) 3	0.	207,271.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
UNITED CHRISTIAN OUTREACH 422 CARMEL DR. LAFAYETTE, LA 70501	72-0829068	501(C) 3	0.	71,613.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
UNITED CHURCHES OF ALGIERS 1111 NEWTON ST NEW ORLEANS, LA 70114	23-7204473	501(C) 3	0.	40,940.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
UNITED GOSPEL TABERNACLE DBA HOPE CENTER - 18100 EAST MAIN ST. - GALLIANO, LA 70354	74-6068926	501(C) 3	0.	74,535.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
UNITED HOUMA NATION 5396 SHRIMPERS ROW DULAC, LA 70353	72-0742264	501(C) 3	0.	47,586.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
UNITED WAY OF ACADIANA 215 E PINHOOK RD LAFAYETTE, LA 70501	72-0513639	HAS SHFB TAX ID	0.	38,262.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
UNITED WAY OF ST. CHARLES CAMPUS 13145 HWY 90 BOUTTE, LA 70039	72-0928066	501(C) 3	0.	30,551.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
UNIVERSITY MEDICAL CENTER NEW ORLEANS CANCER CENTE - 2000 CANAL ST. - NEW ORLEANS, LA 70112	25-1925187	501(C) 3	0.	26,918.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
URBAN IMPACT MINISTRIES 2323 S GALVEZ ST NEW ORLEANS, LA 70125	72-1181908	501(C) 3	0.	77,233.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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VANDEBILT HIGH SCHOOL 209 S HOLLYWOOD DR HOUMA, LA 70360	72-0893609	ARCHDIOCESE OF N	0.	33,068.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
VICTORY FELLOWSHIP 5708 AIRLINE HWY METAIRIE, LA 70003	72-0856545	501(C) 3	0.	268,367.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
VICTORY OF HOUMA 5328 W MAIN ST HOUMA, LA 70364	82-2917701	501(C) 3	0.	150,411.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
VILLA ADDITIONS D/B/A ST. TERESA'S VILLA - 1938 GAUSE BLVD - SLIDELL, LA 70460	53-0196617	HAS SHFB TAX ID	0.	15,617.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
VILLA ST. MAURICE 500 ST. MAURICE NEW ORLEANS, LA 70117	53-0196617	ARCHDIOCESE OF N	0.	19,344.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
VILLAGE OF CHATAIGNIER 5704 VINE ST CHATAIGNIER, LA 70524	72-0750410	GOVERNMENT	0.	39,162.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
VISION CHRISTIAN CENTER 4467 HWY 24 BOURG, LA 70342	95-1684062	501(C) 3	0.	110,850.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
VISITATION OF OUR LADY 3520 AMES BLVD MARRERO, LA 70072	72-0893609	ARCHDIOCESE OF N	0.	21,907.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
VOLUNTEERS OF AMERICA - VOA GAYOSO COMMUNITY HOME - 209 S GAYOSO ST - NEW ORLEANS, LA 70119	72-0709750	501(C) 3	0.	15,085.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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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VOLUNTEERS OF AMERICA GNO-VOA 1002 NAPOLEON AVE NEW ORLEANS, LA 70115	72-0709750	501(C) 3	0.	17,228.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
VOLUNTEERS OF AMERICA -VOA CRAFT COMMUNITTY HOME - 311 VALLETTE ST - NEW ORLEANS, LA 70114	72-0709750	501(C) 3	0.	8,634.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
VOLUNTEERS OF AMERICA -VOA IBERVILLE COMMUNITY HOM - 4174 IBERVILLE ST - NEW ORLEANS, LA 70119	72-0709750	501(C) 3	0.	8,681.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WALLACE COMMUNITY CENTER 3603 HWY 308 RACELAND, LA 70394	72-6000634	GOVERNMENT	0.	14,347.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WANDA HILLIARD FOOD PANTRY 315 SIXTH ST. FRANKLIN, LA 70538	72-1005319	501(C) 3	0.	551,349.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WARREN EASTON CHARTER HIGH SCHOOL 3019 CANAL ST NEW ORLEANS, LA 70119	86-1163583	501(C) 3	0.	7,046.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WASHINGTON PARISH ANIMAL SHELTER 23046 YACC RD FRANKLINTON, LA 70438	72-6001458	GOVERNMENT	0.	24,928.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WASHINGTON PARISH FOOD BANK 2208 WASHINGTON ST FRANKLINTON, LA 70438	72-1363020	501(C) 3	0.	264,402.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WATER'S EDGE 2760 POWER CENTRE PARKWAY LAKE CHARLES, LA 70601	20-8781193	501(C) 3	0.	32,771.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WATSON COMMUNITY CENTER 1300 MYRTLE ST. METAIRIE, LA 70003	72-6013920	JEFFERSON PARISH	0.	145,924.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WE CARE MINISTRY / WEST POINT CHURCH - 664 BEHRMAN HWY - GRETNA, LA 70056	72-1029001	501(C) 3	0.	123,950.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WESTBANK FRIENDSHIP CLUB 2051 EIGHTH ST HARVEY, LA 70058	72-0846349	501(C) 3	0.	26,102.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WESTLAKE UNITED METHODIST CHURCH 704 JOHNSON ST WESTLAKE, LA 70669	72-0708154	501(C) 3	0.	36,685.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WHISPERING FOREST ELEMENTARY 300 SPIEHLER ROAD SLIDELL, LA 70458	72-6001305	ST. TAMMANY PARI	0.	41,336.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
WOODLAKE ELEMENTARY 1620 LIVINGSTON STREET MANDENVILLE, LA 70448	72-6001305	ST. TAMMANY PARI	0.	37,259.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
YAHWEH WORD OF FAITH 948 CHITAMACHI TRAIL BALDWIN, LA 70514	06-1762870	501(C) 3	0.	59,261.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
YOUNGSVILLE PANTRY 3555 VEROT SCHOOL RD YOUNGSVILLE, LA 70592	72-0796891	501(C) 3	0.	376,824.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED
ZION TRAVELLERS CHURCH 86 MARTIN LUTHER KING DRIVE INDEPENDENCE, LA 70443	72-1182613	501(C) 3	0.	44,301.	WHOLESALE VALUE		TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED

**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
FOOD ASSISTANCE - COVID-19 AND DISASTER RESPONSE	353337	0.	6,757,568.	WHOLESALE VALUE	TO PROVIDE FOOD ASSISTANCE FOR PERSONS IN NEED - 4,416,711 POUNDS

**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:

SECOND HARVEST'S 501(C)3 AND GOVERNMENTAL AGENCIES ARE SUBJECT TO PERIODIC

INSPECTIONS (MONITORING VISITS) TO ASSURE THAT AGENCIES MEET ALL

REQUIREMENTS FOR MEMBERSHIP, AS OUTLINED IN THE MEMBER AGENCY HANDBOOK, AND

TO FIND WAYS THAT WE CAN SERVE OUR AGENCIES BETTER. EACH YEAR, A

REPRESENTATIVE OF THE FOOD BANK WILL VISIT EACH AGENCY, THE MONITORING

VISIT IS TO UPDATE THE AGENCY'S STATUS WITH THE FOOD BANK, AND AN EFFORT TO

BUILD UPON AND FURTHER THE RELATIONSHIP BETWEEN THE FOOD BANK AND THE

AGENCY. USUALLY AN APPOINTMENT WILL BE SET. SECOND HARVEST RESERVES THE

**Part IV Supplemental Information**

RIGHT TO INSPECT ANY AGENCY WITHOUT PRIOR NOTIFICATION. MONITORING VISITS  
CONSIST OF INSPECTIONS OF THE STORAGE AREAS AND REQUIRED RECORDS. THE  
INFORMATION GATHERED DURING THE VISIT IS RECORDED ON A STANDARD MONITORING  
FORM. SOME OF THE NON-501(C)3 AGENCIES AND NON-GOVERNMENTAL AGENCIES ARE  
SCHOOLS IN WHICH WE STORE AND DISTRIBUTE THE NATIONAL SCHOOL LUNCH  
COMMODITIES TO AND THEY ARE NOT REQUIRED TO HAVE PERIODIC INSPECTIONS. THE  
REMAINING AGENCIES ARE UNINCORPORATED CHURCHES/HOUSES OF WORSHIP WHICH ARE  
REQUIRED TO FOLLOW THE SAME PERIODIC INSPECTIONS AND GUIDELINES AS THE  
501(C)3 AGENCIES.

SCHEDULE I, PART III

SECOND HARVEST SPONSORED FOOD DISTRIBUTIONS AT VARIOUS SITES IN ITS  
SERVICE AREA IN RESPONSE TO THE FOOD NEEDS IN THE COMMUNITY AS A RESULT  
OF THE ECONOMIC AND HEALTH IMPACT OF THE COVID-19 PANDEMIC AND  
HURRICANE IDA. THE NUMBER OF RECEIPTS REPORTED IN PART III, COLUMN B,  
WAS DETERMINED BASED UPON 12.5 LBS OF FOOD DISTRIBUTED PER PERSON. FOOD  
WAS DISTRIBUTED IN 25LB BOXES OF FOOD FOR 2 PEOPLE.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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.

Name of the organization **SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA** Employer identification number **72-0956468**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |                                                                               |                                                                            |
|-------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel                        | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                                | <input type="checkbox"/> Payments for business use of personal residence   |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account                       | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |                                                              |                                                                                     |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1a</b>		X
<b>2</b>		X
<b>3</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2021

**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 and/or 1099-NEC 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) NATALIE JAYROE PRESIDENT AND CEO	(i)	164,138.	0.	0.	5,752.	13,342.	183,232.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JEFF ENTWISLE DIRECTOR	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	158,308.	0.	0.	4,898.	7,657.	170,863.	0.
(3) E. ELISHA DARCEY VICE PRESIDENT AND COO	(i)	139,974.	0.	0.	4,519.	10,847.	155,340.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

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

PART I, LINE 1A:

GROSS UP PAYMENTS WERE MADE TO EMPLOYEES WHOSE JOBS WOULD NOT ALLOW THEM TO

WORK REMOTELY, INCLUDING THOSE IN SECTION A PART VII, DURING COVID-19 AS A

HAZARD DUTY PAY FOR REPORTING TO WORK AT THE OFFICE OR AT OFFSITE FOOD

DISTRIBUTIONS. PAYMENTS AVERAGING \$200 PER PAY PERIOD WERE MADE

INTERMITTENTLY BETWEEN AUGUST 2021 AND MARCH 2022.

PART I, LINE 1B:

THERE IS NO WRITTEN POLICY COVERING PANDEMIC HAZARD BONUS PAY AS EACH

DISASTER HAS UNIQUE RESPONSE CRITERIA. THE AMOUNT WAS DETERMINED BY THE

CHIEF FINANCIAL OFFICER AND APPROVED BY THE CHIEF EXECUTIVE OFFICER.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2021**

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 **SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA** Employer identification number **72-0956468**

**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	X		2,000.	COST
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		84,878,293.	AVERAGE WHOLESALE VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( GROCERY GIFT )	X	6,299	310,911.	FACE VALUE OF CARD
26 Other ( EQUIPMENT )	X	1	221,381.	COST
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:

SECOND HARVEST EMPLOYS FOOD SOURCING PERSONS TO SOLICIT DONATIONS OF

FOOD PRODUCTS FOR US TO DISTRIBUTE.

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization	SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA	Employer identification number	72-0956468
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ADVOCACY, EDUCATION AND DISASTER RESPONSE.

FORM 990, PART VI, SECTION A, LINE 6:

SECOND HARVEST OF GREATER NEW ORLEANS AND ACADIANA HAS ONE CLASS OF

MEMBERSHIP, AND THE SOLE MEMBER OF THE CORPORATION IS THE ARCHBISHOP OR

ADMINISTRATOR OF THE ARCHDIOCESE OF NEW ORLEANS.

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

THE CORPORATE MEMBER HAS THE POWER TO APPOINT OR REMOVE THE MEMBERS OF THE

BOARD OF DIRECTORS. THE CORPORATE MEMBER ALSO HAS THE POWER TO APPOINT OR

REMOVE THE CHAIRMAN OR THE CEO.

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

MEMBER OF THE CORPORATION HAS THE AUTHORITY TO HIRE/FIRE THE CEO TO APPOINT

THE BOARD AND BOARD CHAIR, AND TO REVISE THE ARTICLES AND BY-LAWS.

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

REVIEWED BY AUDIT COMMITTEE.

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

ANNUALLY THE BOARD OF DIRECTORS ARE ASKED TO READ AND SIGN THE POLICY.

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

COMPARISONS ARE MADE TO SIMILAR ORGANIZATIONS LOCALLY AND WITHIN OUR

NATIONAL NETWORK.

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

Schedule O (Form 990) 2021

Name of the organization SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA	Employer identification number 72-0956468
------------------------------------------------------------------------------------------	----------------------------------------------

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

INFORMATION IS POSTED ON THE ORGANIZATION'S WEBSITE. ALL INFORMATION IS  
ALSO AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

IN-KIND EXPENSES -377,572.

FORM 990, PART XII, LINE 2C:

COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT. NO  
CHANGE FROM THE PRIOR YEAR.

**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

**2021**

**Open to Public Inspection**

Name of the organization **SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA** Employer identification number **72-0956468**

**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
THE ROMAN CATHOLIC CHURCH OF THE ARCHDIOCESE OF NEW ORLEANS - 72-0408966, 7887 WALMSLEY AVENUE, NEW ORLEANS, LA 70125	TO OPERATE AND PROVIDE SUPPORT TO COMMUNITY SOCIAL SERVICE PROGRAMS	LOUISIANA	501(C)(3)	LINE 7			X

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

Schedule R (Form 990) 2021

**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

**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) THE ROMAN CATHOLIC CHURCH OF THE ARCHDIOCESE OF NEW ORLEANS	P	386,416.	AMOUNT PAID
(2)			
(3)			
(4)			
(5)			
(6)			







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

For calendar year 2021 or other tax year beginning JUL 1, 2021, and ending JUN 30, 2022

2021

Department of the Treasury Internal Revenue Service

Go to 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

Form header section containing: A Check box if address changed, B Exempt under section 501(c)(3), C Book value of all assets at end of year, D Employer identification number, E Group exemption number, F Check box if an amended return.

Form continuation section containing: G Check organization type, H Check if filing only to, I Check if a 501(c)(3) organization filing a consolidated return, J Enter the number of attached Schedules A, K During the tax year, was the corporation a subsidiary, L The books are in care of

Part I Total Unrelated Business Taxable Income

Table with 11 rows for Part I: Total Unrelated Business Taxable Income. Columns include line number, description, and amount. Total amount is 0.

Part II Tax Computation

Table with 7 rows for Part II: Tax Computation. Columns include line number, description, and amount. Total amount is 0.

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 amounts due. 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	Current 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 2020 overpayment credited to 2021 .....	<b>6a</b>		
b	2021 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 checked="" type="checkbox"/> Form 4136 697. <input type="checkbox"/> Other .....			
7	<b>Total payments.</b> Add lines 6a through 6g .....	<b>7</b>		697.
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>		697.
11	Enter the amount of line 10 you want: <b>Credited to 2022 estimated tax</b> .....	<b>11</b>		697.

<b>Part IV Statements Regarding Certain Activities and Other Information</b> (see instructions)			
1	At any time during the 2021 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 .....	<b>Yes</b>	<b>No</b>
			X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? .....		X
	If "Yes," see instructions for other forms the organization may have to file.		
3	Enter the amount of tax-exempt interest received or accrued during the tax year .....		
4	Enter available pre-2018 NOL carryovers here .....		
5	Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
		\$	
		\$	
6a	Did the organization change its method of accounting? (see instructions) .....		X
b	If 6a 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 6b. 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	PRESIDENT / CEO	<b>May the IRS discuss this return with the preparer shown below (see instructions)?</b> <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	KEITH TREGLE			P01336681
	Firm's name	Firm's EIN		
	BOURGEOIS BENNETT, L.L.C.		72-0136870	
	111 VETERANS BLVD., SUITE 1700			
	Firm's address		Phone no.	
	METAIRIE, LA 70005		504.831.4949	

FORM 990-T

PRE-2018 NET OPERATING LOSS DEDUCTION

STATEMENT 1

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/13	23,438.	23,438.	0.	0.
06/30/14	78,238.	32,872.	45,366.	45,366.
06/30/15	3,101.	0.	3,101.	3,101.
06/30/17	34,577.	0.	34,577.	34,577.
06/30/18	210,537.	0.	210,537.	210,537.
NOL CARRYOVER AVAILABLE THIS YEAR			293,581.	293,581.

# Credit for Federal Tax Paid on Fuels

▶ Go to [www.irs.gov/Form4136](http://www.irs.gov/Form4136) for instructions and the latest information.

Name (as shown on your income tax return)  
**SECOND HARVEST FOOD BANK GREATER NEW  
 ORLEANS AND ACADIANA**

**Taxpayer identification number**  
 72-0956468

**Caution:** Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 or 14), 3d, 4c, and 5, claimant has not waived the right to make the claim. For claims on lines 1c and 2b (type of use 13 or 14), claimant certifies that a certificate has not been provided to the credit card issuer.

**1 Nontaxable Use of Gasoline**

**Note:** CRN is credit reference number.

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Off-highway business use	\$ .183	}	\$	362
b	Use on a farm for farming purposes	.183			
c	Other nontaxable use (see <b>Caution</b> above line 1)	.183			
d	Exported	.184			411

**2 Nontaxable Use of Aviation Gasoline**

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Use in commercial aviation (other than foreign trade)	\$ .15		\$	354
b	Other nontaxable use (see <b>Caution</b> above line 1)	.193			324
c	Exported	.194			412
d	LUST tax on aviation fuels used in foreign trade	.001			433

**3 Nontaxable Use of Undyed Diesel Fuel**

Claimant certifies that the diesel fuel did not contain visible evidence of dye.

**Exception.** If any of the diesel fuel included in this claim **did** contain visible evidence of dye, attach an explanation and check here

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Nontaxable use	\$ .243	}	\$	360
b	Use on a farm for farming purposes	.243			
c	Use in trains	.243			353
d	Use in certain intercity and local buses (see <b>Caution</b> above line 1)	.17			350
e	Exported	.244			413

**4 Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)**

Claimant certifies that the kerosene did not contain visible evidence of dye.

**Exception.** If any of the kerosene included in this claim **did** contain visible evidence of dye, attach an explanation and check here

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Nontaxable use taxed at \$.244	\$ .243	}	\$	346
b	Use on a farm for farming purposes	.243			
c	Use in certain intercity and local buses (see <b>Caution</b> above line 1)	.17			347
d	Exported	.244			414
e	Nontaxable use taxed at \$.044	.043			377
f	Nontaxable use taxed at \$.219	.218			369

LHA **For Paperwork Reduction Act Notice, see the separate instructions.**

**5 Kerosene Used in Aviation**

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244	\$ .200		\$	417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219	.175			355
c	Nontaxable use (other than use by state or local government) taxed at \$.244	.243			346
d	Nontaxable use (other than use by state or local government) taxed at \$.219	.218			369
e	LUST tax on aviation fuels used in foreign trade	.001			433

**6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel**

Registration No. ►

Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye.

**Exception.** If any of the diesel fuel included in this claim **did** contain visible evidence of dye, attach an explanation and check here .....

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Use by a state or local government	\$ .243	\$	360
b	Use in certain intercity and local buses	.17		350

**7 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation)**

Registration No. ►

Claimant certifies that it sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye.

**Exception.** If any of the kerosene included in this claim **did** contain visible evidence of dye, attach an explanation and check here .....

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Use by a state or local government	\$ .243	\$	346
b	Sales from a blocked pump	.243		
c	Use in certain intercity and local buses	.17		

**8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation.**

Registration No. ►

Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted.

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Use in commercial aviation (other than foreign trade) taxed at \$.219	\$ .175		\$	355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244	.200			417
c	Nonexempt use in noncommercial aviation	.025			418
d	Other nontaxable uses taxed at \$.244	.243			346
e	Other nontaxable uses taxed at \$.219	.218			369
f	LUST tax on aviation fuels used in foreign trade	.001			433

**9 Reserved for future use**

Registration No. ►

	(b) Rate	(c) Gallons of alcohol	(d) Amount of credit	(e) CRN
a Reserved for future use			\$	
b Reserved for future use				

**10 Biodiesel or Renewable Diesel Mixture Credit**

Registration No. ►

**Biodiesel mixtures.** Claimant produced a mixture by mixing biodiesel with diesel fuel. The biodiesel used to produce the mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller. **Renewable diesel mixtures.** Claimant produced a mixture by mixing renewable diesel with liquid fuel (other than renewable diesel). The renewable diesel used to produce the renewable diesel mixture was derived from biomass, met EPA's registration requirements for fuels and fuel additives, and met ASTM D975, D396, or other equivalent standard approved by the IRS. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller, both of which have been edited as discussed in the instructions for line 10. See the instructions for line 10 for information about renewable diesel used in aviation.

	(b) Rate	(c) Gallons of biodiesel or renewable diesel	(d) Amount of credit	(e) CRN
a Biodiesel (other than agri-biodiesel) mixtures	\$ 1.00		\$	388
b Agri-biodiesel mixtures	1.00			390
c Renewable diesel mixtures	1.00			307

**11 Nontaxable Use of Alternative Fuel**

**Caution:** There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See instructions.

	(a) Type of use	(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
a Liquefied petroleum gas (LPG)	2	\$ .183	3,810	\$ 697.	419
b "P Series" fuels		.183			420
c Compressed natural gas (CNG)		.183			421
d Liquefied hydrogen		.183			422
e Fischer-Tropsch process liquid fuel from coal (including peat)		.243			423
f Liquid fuel derived from biomass		.243			424
g Liquefied natural gas (LNG)		.243			425
h Liquefied gas derived from biomass		.183			435

**12 Alternative Fuel Credit**

Registration No. ►

	(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
a Liquefied petroleum gas (LPG) (see instructions)	\$ .50		\$	426
b "P Series" fuels	.50			427
c Compressed natural gas (CNG) (see instructions)	.50			428
d Liquefied hydrogen	.50			429
e Fischer-Tropsch process liquid fuel from coal (including peat)	.50			430
f Liquid fuel derived from biomass	.50			431
g Liquefied natural gas (LNG) (see instructions)	.50			432
h Liquefied gas derived from biomass	.50			436
i Compressed gas derived from biomass	.50			437

**13 Registered Credit Card Issuers**

		Registration No. ▶		
	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Diesel fuel sold for the exclusive use of a state or local government	\$ .243		\$	360
b Kerosene sold for the exclusive use of a state or local government	.243			346
c Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at \$.219	.218			369

**14 Nontaxable Use of a Diesel-Water Fuel Emulsion**

**Caution:** There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See instructions.

	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Nontaxable use		\$ .197		\$	309
b Exported		.198			306

**15 Diesel-Water Fuel Emulsion Blending**

		Registration No. ▶		
	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
Blender credit	\$ .046		\$	310

**16 Exported Dyed Fuels and Exported Gasoline Blendstocks**

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Exported dyed diesel fuel and exported gasoline blendstocks taxed at \$ .001	\$ .001		\$	415
b Exported dyed kerosene	.001			416

<b>17 Total income tax credit claimed.</b> Add lines 1 through 16, column (d). Enter here and on Schedule 3 (Form 1040), line 12; Form 1120, Schedule J, line 20b; Form 1120-S, line 23c; Form 1041, Schedule G, line 16b; or the proper line of other returns	▶	<b>17</b>	\$ 697.	
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# 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. SECOND HARVEST FOOD BANK GREATER NEW ORLEANS AND ACADIANA	Taxpayer identification number (TIN)  72-0956468
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. 700 EDWARDS AVENUE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW ORLEANS, LA 70123	

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 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
Form 990-T (corporation)	07		

NATALIE JAYROE

- The books are in the care of ▶ 700 EDWARDS AVENUE - NEW ORLEANS, LA 70123

Telephone No. ▶ 504-734-1322

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 15, 2023, 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, 2021, and ending JUN 30, 2022.

**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-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>	\$	697.
<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-TE and Form 8879-TE for payment instructions.