

Haynes Downard LLP

Certified Public Accountants and Business Advisors

November 8, 2023

Community Food Bank of Central Alabama
107 Walter Davis Drive
Birmingham, AL 35209

Dear Nicole:

Enclosed is the organization's 2022 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by November 15, 2023.

We have prepared the return from information you furnished us without verification. Upon examination of the return by tax authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

Please review the return for completeness and accuracy.

We have provided you tax advice in connection with the preparation of your U.S. federal tax return and associated tax planning services we have furnished. This advice is not intended or written to be used by any taxpayer for the purpose of avoiding penalties that may be imposed on the taxpayer by the Internal Revenue Service, and it cannot be used by any taxpayer for such purpose.

BIRMINGHAM

3161 Cahaba Heights Road, Suite 203 | Birmingham, AL 35243
Office: 205-254-3380 | Fax: 205-254-3377

JASPER

405 10th Avenue | Jasper, Alabama 35501
Office: 205-221-6109 | Fax: 205-384-9215

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

Very truly yours,

Haynes Downard LLP

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning _____, 2022, and ending _____, 20__

2022

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

Community Food Bank of Central Alabama

EIN or SSN

63-0837956

Name and title of officer or person subject to tax

Nicole Williams Chief Executive Officer

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

Table with 3 columns: Line number, Description, and Amount. Includes rows for Form 990, Form 990-EZ, Form 1120-POL, Form 990-PF, Form 8868, Form 990-T, Form 4720, Form 5227, Form 5330, and Form 8038-CP.

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that [X] I am an officer of the above entity or [] I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete.

PIN: check one box only

[X] I authorize Haynes Downard LLP to enter my PIN 37956. Enter five numbers, but do not enter all zeros.

as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[] As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

63554521212

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Chase L. Carter

Date

11/08/23

ERO Must Retain This Form - See Instructions

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8879-TE (2022)

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2022

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.

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Community Food Bank of Central Alabama Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 107 Walter Davis Drive City or town, state or province, country, and ZIP or foreign postal code Birmingham, AL 35209	D Employer identification number 63-0837956 E Telephone number 205-942-8211
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 33,767,071.
J Website: feedingal.org		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1982 M State of legal domicile: AL
F Name and address of principal officer: Nicole Williams same as C above		

Part I Summary

1	Briefly describe the organization's mission or most significant activities: Operate as central clearing house for collecting, sorting, storing, and distributing food to		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	24
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	57
6	Total number of volunteers (estimate if necessary)	6	8200
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	32,299,260.	31,881,805.
	9 Program service revenue (Part VIII, line 2g)	1,470,078.	1,426,638.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	42,215.	-309,753.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	44,290.	310,774.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	33,855,843.	33,309,464.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	27,381,175.	31,519,079.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,989,917.	2,471,999.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	362,417.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,841,200.	2,262,534.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	31,212,292.	36,253,612.	
19 Revenue less expenses. Subtract line 18 from line 12	2,643,551.	-2,944,148.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	19,652,655.	16,934,068.
	21 Total liabilities (Part X, line 26)	369,743.	626,876.
	22 Net assets or fund balances. Subtract line 21 from line 20	19,282,912.	16,307,192.

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.

Sign Here	Signature of officer Nicole Williams, Chief Executive Officer	Date	
Paid Preparer Use Only	Print/Type preparer's name Chase L. Carter	Preparer's signature Chase L. Carter	Date 11/08/23
	Firm's name Haynes Downard LLP	Firm's EIN 63-1133963	Check if self-employed <input type="checkbox"/> PTIN P02096324
	Firm's address 3161 Cahaba Heights Road, Suite 203 Birmingham, AL 35243	Phone no. 205-254-3380	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: To feed people in need today and foster collaborative solutions to end hunger tomorrow.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 35,050,088. including grants of \$ 31,519,079.) (Revenue \$ 1,569,370.) In 2022, the Community Food Bank of Central Alabama distributed 16.8 million meals to neighbors experiencing food insecurity throughout the 12-county service area in central Alabama. With the help of 230 agency partners, 7,597,483 pounds of fresh produce was distributed in an ongoing effort to provide nutritious foods to our neighbors. In partnership with our program partners, 3.37 million meals were distributed through our mobile pantry program, serving 48,000 neighbors facing hunger. We served over 800,000 meals to our senior neighbors, over 950,000 meals to families with children and 25,000 holiday boxes were distributed throughout central Alabama. The Community Food Bank reclaimed 7,786,584 pounds of food through the retail reclamation program preventing millions of pounds of food from going into landfills

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

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 35,050,088.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 57		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	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	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	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	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person 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.	17	

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
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 24		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 24		
2	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
3	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
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed AL
- 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
Nicole Williams - 205-942-8911
107 Walter Davis Drive, Birmingham, AL 35209

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - 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) Bradford, George W. Director	1.00	X					0.	0.	0.	
(2) Brown, Khalilah Director	1.00	X					0.	0.	0.	
(3) Gaines, Miriam J. Director	1.00	X					0.	0.	0.	
(4) Goodwin, III, R. Ed Director	1.00	X					0.	0.	0.	
(5) Harada, Caroline Director	1.00	X					0.	0.	0.	
(6) Jones, Brad Director	1.00	X					0.	0.	0.	
(7) Kassouf, Gerry Director	1.00	X					0.	0.	0.	
(8) Kreis, Bill Director	1.00	X					0.	0.	0.	
(9) Lecompte, David Director	1.00	X					0.	0.	0.	
(10) Mowery, James Director	1.00	X					0.	0.	0.	
(11) Owens, William Director	1.00	X					0.	0.	0.	
(12) Record, Robert Director	1.00	X					0.	0.	0.	
(13) Ritchey, Joseph Director	1.00	X					0.	0.	0.	
(14) Schuler, Susana Director	1.00	X					0.	0.	0.	
(15) Tirado, Estela Director	1.00	X					0.	0.	0.	
(16) Tucker, Alyson Director	1.00	X					0.	0.	0.	
(17) Webb, Phil Director	1.00	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) Wellen, Josh Director	1.00	X						0.	0.	0.
(19) Wilson, David Director	1.00	X						0.	0.	0.
(20) Wood, David Director	1.00	X						0.	0.	0.
(21) Bell, David Secretary	1.00	X		X				0.	0.	0.
(22) Tisdale, Clyde Treasurer	1.00	X		X				0.	0.	0.
(23) Taylor, Ellie Vice President	1.00	X		X				0.	0.	0.
(24) Kline, Mary Alice President	1.00	X		X				0.	0.	0.
(25) Williams, Nicole Chief Executive Officer	40.00			X				100,814.	0.	9,077.
1b Subtotal								100,814.	0.	9,077.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								100,814.	0.	9,077.

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 1

	Yes	No
3 Did the organization list any former 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
NONE		

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 0

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	1 a	Federated campaigns	1a	311,264.				
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	10,091,184.				
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	21,479,357.				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 23,557,417.				
	h	Total. Add lines 1a-1f		31,881,805.				
	Program Service Revenue	2 a	Shared fee - food distribution	Business Code	624200	1,426,638.	1,426,638.	
b								
c								
d								
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f			1,426,638.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		101,854.			101,854.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	6a	(i) Real	(ii) Personal			
	b	Less: rental expenses ...	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other			
					46,000.			
	b	Less: cost or other basis and sales expenses	7b	446,431.	11,176.			
	c	Gain or (loss)	7c	-446,431.	34,824.			
	d	Net gain or (loss)			-411,607.		-411,607.	
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a		168,042.				
				0.				
b	Less: direct expenses	8b						
c	Net income or (loss) from fundraising events			168,042.		168,042.		
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	10a						
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	Misc income	Business Code	900099	142,732.	142,732.		
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d			142,732.			
12	Total revenue. See instructions			33,309,464.	1,569,370.	0.	-141,711.	

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	31,519,079.	31,519,079.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	109,891.	43,956.	54,946.	10,989.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,892,945.	1,534,743.	248,657.	109,545.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	31,867.	28,715.	1,603.	1,549.
9 Other employee benefits	276,012.	218,051.	41,401.	16,560.
10 Payroll taxes	161,284.	127,414.	24,193.	9,677.
11 Fees for services (nonemployees):				
a Management				
b Legal	9,773.	8,307.	1,466.	
c Accounting	23,500.	19,975.	3,525.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	182,898.	155,463.	27,435.	
12 Advertising and promotion	402,278.		240,127.	162,151.
13 Office expenses	48,461.		15,058.	33,403.
14 Information technology	89,861.	80,875.	8,986.	
15 Royalties				
16 Occupancy	287,836.	259,052.	23,027.	5,757.
17 Travel	377,616.	302,093.	67,971.	7,552.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	32,645.	27,748.	4,897.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	392,126.	345,071.	47,055.	
23 Insurance	83,479.	75,131.	8,348.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a <u>Supplies</u>	261,685.	238,133.	18,318.	5,234.
b <u>Miscellaneous</u>	49,059.	47,097.	1,962.	
c <u>Membership dues and sub</u>	21,317.	19,185.	2,132.	
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	36,253,612.	35,050,088.	841,107.	362,417.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	11,512,972.	1	2,758,149.
	2 Savings and temporary cash investments	1,082,025.	2	8,804,574.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	167,385.	4	434,903.
	5 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	110,250.	7	99,303.
	8 Inventories for sale or use	3,550,945.	8	1,690,061.
	9 Prepaid expenses and deferred charges	190,261.	9	309,758.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,305,320.		
	b Less: accumulated depreciation	10b 2,468,000.		
		3,038,817.	10c	2,837,320.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 33)	19,652,655.	16	16,934,068.	
Liabilities	17 Accounts payable and accrued expenses	275,643.	17	485,126.
	18 Grants payable		18	
	19 Deferred revenue	94,100.	19	141,750.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	369,743.	26	626,876.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	18,777,800.	27	15,515,256.
	28 Net assets with donor restrictions	505,112.	28	791,936.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	19,282,912.	32	16,307,192.
33 Total liabilities and net assets/fund balances	19,652,655.	33	16,934,068.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	33,309,464.
2	Total expenses (must equal Part IX, column (A), line 25)	2	36,253,612.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,944,148.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	19,282,912.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	-31,572.
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	16,307,192.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
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 checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	X	
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	

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2021. 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 stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. 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 stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. 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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19,680,819.	23,482,298.	43,403,513.	32,299,260.	31,881,805.	150,747,695.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,540,827.	1,616,926.	1,516,401.	1,500,121.	2,637,412.	8,811,687.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	21,221,646.	25,099,224.	44,919,914.	33,799,381.	34,519,217.	159,559,382.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c Add lines 7a and 7b						0.
8 Public support. (Subtract line 7c from line 6.)						159,559,382.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6	21,221,646.	25,099,224.	44,919,914.	33,799,381.	34,519,217.	159,559,382.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	15,186.	35,659.	45,908.	19,389.	101,854.	217,996.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	15,186.	35,659.	45,908.	19,389.	101,854.	217,996.
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	21,236,832.	25,134,883.	44,965,822.	33,818,770.	34,621,071.	159,777,378.

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

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	99.86 %
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	99.90 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	.14 %
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	.10 %

19a 33 1/3% support tests - 2022. 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 - 2021. 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 on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 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>		
2 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>		
3a 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 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>		
c 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>		
4a 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 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>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
5a 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 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>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
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>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
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
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. 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
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

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.)

Multiple horizontal lines for supplemental information.

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 for the latest information.

OMB No. 1545-0047

2022

Name of the organization

Community Food Bank of Central Alabama

Employer identification number

63-0837956

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

Employer identification number

Community Food Bank of Central Alabama

63-0837956

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	Publix Super Markets Charities, Inc. 2600 Delk Road Marietta, GA 30067	\$ 445,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	United Way of Central Alabama 3600 8th Ave S Birmingham, AL 35222	\$ 366,415.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Alabama Food Bank Association - Feeding Alabama PO Box 18607 Madison, AL 35804	\$ 207,340.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Michael D. Thompson 1725 Somerset Circle Birmingham, AL 35213	\$ 205,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	Feeding America 170 North Clark Street Suite 700 Chicago, IL 60601	\$ 151,029.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	Starbucks Coffee Co. 2401 Utah Avenue South Seattle, WA 98134	\$ 101,350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Honey and Ace Fund 5240 Mountain Ridge Parkway Birmingham, AL 35222	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	Junior League of Birmingham 2212 20th Ave S Birmingham, AL 35223	\$ 67,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	The Walmart Foundation 702 Southwest 8th Street Bentonville, AR 72716	\$ 65,547.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	Robert R. Meyer Foundation 1900 5th Avenue North 25th Floor Birmingham, AL 35203	\$ 62,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	The Lucille Stewart Beeson Trust PO Box 130699 Birmingham, AL 35213	\$ 45,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	The Noble Foundation 1601 22nd Street West Des Moines, IA 50266	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	Hendrick Automotive Group 6000 Monroe Rd Charlotte, NC 28212	\$ 37,380.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	Blue Cross Blue Shield of Alabama 450 Riverchase Parkway East Hoover, AL 35244	\$ 35,017.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	Community Foundation of Greater Birmingham 2100 1st Avenue North #700 Birmingham, AL 35203	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	Milla K. Averett 5 Innisbrook Lane Shoal Creek, AL 35242	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	Piggly Wiggly Food Stores of Jefferson County 3605 8th Avenue South Birmingham, AL 35222	\$ 34,015.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	American Honda Motor Co., Inc. 1800 Honda Drive Lincoln, AL 35096	\$ 33,369.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	Mr. and Mrs. Frederick P. Fish Jr. 1285 Branchwater Lane Vestavia Hills, AL 35216	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	Bank of America Charitable Foundation, Inc. 100 North Tyron Street Charlotte, NC 28202	\$ 25,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	Chick-Fil-A 5200 Buffington Road Atlanta, GA 30349	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	Mrs. J. William Lewis 3 Cherry Hills Shoal Creek, AL 35242	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	Costco PO Box 34331 Seattle, WA 98124	\$ 22,348.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	Regions Bank 1900 5th Avenue North Birmingham, AL 35203	\$ 21,425.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	America's First Federal Credit Union 1200 4th Avenue North Birmingham, AL 35203	\$ 21,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	Wells Fargo Foundation 420 20th Street North Birmingham, AL 35203	\$ 20,570.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	Britton Neal 3771 Fairhaven Drive Vestavia, AL 35223	\$ 20,027.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	Susan Mott Webb Charitable Trust PO Box 11647 Birmingham, AL 35202	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	Valley National Bank 1455 Valley Road Wayne, NJ 07470	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	Bi-Lo Winn-Dixie Foundation 5050 Edgewood Court Jacksonville, FL 32254	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	Three S Fund 2100 1st Avenue North #700 Birmingham, AL 35203	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	Hugh Kaul Foundation 250 Riverchase Parkway Hoover, AL 35244	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	Shay and Colleen Samples 2606 Caldwell Mill Lane Birmingham, AL 35243	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	Holle Family Foundation 2112 11th Avenue South Ste. 541 Birmingham, AL 35205	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	James and Eva Sartin 500 Twin Creek Road Birmingham, AL 35226	\$ 19,110.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	Shipt, Inc. 420 20th Street North Ste. 1000 Birmingham, AL 35203	\$ 18,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	Community Foundation of Northeast Alabama 1130 Quintard Ave #100 Anniston, AL 36201	\$ 17,975.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38	CVS Health 1 CVS Drive Woonsocket, RI 02895	\$ 17,860.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	Daniel Campbell 11 Hollywood Boulevard Birmingham, AL 35209	\$ 16,850.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
40	Alabama Power Foundation, Inc. 600 N 18th St. Birmingham, AL 35203-2206	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41	Jersey Mike's Franchise Systems, Inc. 2251 Landmark Place Manasquan, NJ 08736	\$ 11,777.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42	General Mills, Inc. 161 North Clark Street Chicago, IL 60601	\$ 11,577.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	Protective Life PO Box 2606 Birmingham, AL 35202	\$ 10,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	Sysco Foods 1000 Sysco Drive Calera, AL 35040	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	EBSCO PO Box 1943 Birmingham, AL 35203	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	Ferguson Cares 12500 Jefferson Avenue Newport News, VA 23602	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	JohnsonKreis Construction PO Box 381056 Birmingham, AL 35238	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	Medical Properties Trust 1000 Urban Center Drive, Suite 501 Birmingham, AL 35242	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	Aerie/American Eagle Outfitters, Inc. 77 Hot Metal Street Pittsburgh, PA 15203	\$ 8,609.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
50	Joe Piper Inc. 123 Industrial Drive Birmingham, AL 35211	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
51	The TJX Companies, Inc. 161 North Clark Street Suite 700 Chicago, IL 60601	\$ 6,302.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
52	Bayer Properties 2200 Magnolia Avenue S, Suite 101 Birmingham, AL 35205	\$ 5,639.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
53	Bay Pine Property Management LLC PO Box 130609 Birmingham, AL 35213	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
54	Wood Fruitticher 2900 Alton Road Birmingham, AL 35210	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	Norfolk Southern Foundation 3 Commercial Place Norfolk, VA 23510	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
56	Williams Blackstock Architects 2204 1st Avenue South Birmingham, AL 35233	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
57	The Daniel Foundation 510 Office Park Drive Birmingham, AL 35223	\$ 15,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
58	Strain Foundation P.O. Box 233 Free Union, VA 22940	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
59	The Kemper Foundation 200 East Randolph Street Suite 3300 Chicago, IL 60601	\$ 10,260.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
60	Roberts C/O Alabama Power Foundation PO Box 2641 Birmingham, AL 35203	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61	The Thompson Foundation PO Box 10367 Birmingham, AL 35202	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
62	Joseph S. Bruno Charitable Foundation 2151 Highland Avenue Ste. 240 Birmingham, AL 35205	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
63	The Woodforest Charitable Foundation 1330 Lake Robbins Drive The Woodlands, TX 77380	\$ 6,660.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
64	Lucas Foundation for Better Living 111 Chadwyck Court Madison, MS 39110	\$ 6,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
65	The Day Family Foundation 2001 Park Pl Ste 320 Birmingham, AL 35203	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
66	St. Denis Family Foundation 3612 Old Leeds Road Birmingham, AL 35213	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

Community Food Bank of Central Alabama

63-0837956

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
67	Bette and Fred Powell Designated Fund II c/o Community Foundation of Greater Birmingham 2100 First Avenue North, Su Birmingham, AL 35203	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
68	Sam and Donna Hendrickson 200 Bradberry Lane Birmingham, AL 35242	\$ 13,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
69	Susan Sumpter 6398 Legacy Lane Trussville, AL 35173	\$ 13,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
70	Cameron Vowell 2625 Crest Road Birmingham, AL 35223	\$ 12,600.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
71	Lynn P. Talbot 1400 Lakeshore Drive Anniston, AL 36207	\$ 10,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
72	J. Bailey Knight III 3830 South Cove Dr Birmingham, AL 35213	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73	Laura Whitworth 3916 Forest Avenue Mountain Brook, AL 35213	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
74	Steven R. Spencer 2318 Brook Manor Dr Mountain Brk, AL 35223-2302	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
75	Herbert C. Cheung 1828 Catala Rd Birmingham, AL 35216	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
76	John L. Anderson 2800 Regency Ct Birmingham, AL 35242	\$ 9,797.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
77	Jeannie T. Brasfield 3820 North Woodridge Road Birmingham, AL 35223	\$ 9,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
78	Scott and Tracy Parks 1234 Highland Parkway Morris, AL 35116	\$ 8,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
79	Laura Q. Rogers 415 Poinciana Drive Homewood, AL 35209	\$ 8,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
80	Mr. and Mrs. Price Hightower 4405 Kennesaw Drive Birmingham, AL 35213	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
81	Melvin L. Oakley 2501 Downing Place Mountain Brook, AL 35223-1944	\$ 7,260.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
82	PAUL Wells 2778 Rocky Ridge Road Vestavia, AL 35243	\$ 6,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
83	Joseph C. South III 805 Blount Point Rd Eclectic, AL 36024	\$ 6,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
84	Michael Steele 1665 Shades Pointe Drive Hoover, AL 35244-6503	\$ 6,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
85	Michael Crowe 3320 North Woodridge Road Birmingham, AL 35223	\$ 6,090.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
86	Ralph Crowe 3221 Cliff Rd Birmingham, AL 35205	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
87	Mr. and Mrs. Charles Welden 7418 Ashland Lane Vestavia Hills, AL 35242	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
88	Daniel Marks 116 Longwood Trail Pike Road, AL 36064	\$ 5,670.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
89	Linda E. Mason 3005 Westview Drive Adamsville, AL 35005	\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
90	Mim J. Gaines 641 Meadow Ridge Road Birmingham, AL 35242	\$ 5,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

Community Food Bank of Central Alabama

63-0837956

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
91	Jennifer Massey 242 Inverness Center Dr Highland Mortgage Birmingham, AL 35242	\$ 5,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
92	Alisa Kelly Smith 6016 Laurel Grove Circle Birmingham, AL 35242-5542	\$ 5,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
93	Linda Casebeer 2109 Morris Avenue Birmingham, AL 35203	\$ 5,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
94	Clark Trimmer 742 Euclid Ave Mountain Brook, AL 35213	\$ 5,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
95	Willard McCall Jr. 2967 Shook Hill Pkwy Birmingham, AL 35223	\$ 5,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
96	Anita Jackson 5558 Saddle Ridge Drive Pinson, AL 35126	\$ 5,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

Community Food Bank of Central Alabama

63-0837956

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
97	Nancy McKinney 1070 Greymoor Rd Birmingham, AL 35242	\$ 5,105.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
98	David W. Morris 503 Matador Drive Chelsea, AL 35043	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
99	Camille Butrus 2724 Old Mill Lane Birmingham, AL 35223	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
100	Eric Carlton 1660 Warren Lane Vestavia Hills, AL 35243	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
101	Thomas T. Norton 312 Windsor Dr Birmingham, AL 35209	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
102	Catherine Baker 3291 Overton Trl Vestavia, AL 35243	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
103	Steven D. Watts 1315 Legacy Drive Birmingham, AL 35242	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
104	Birmingham Independent Insurance Agents 141 London Parkway Birmingham, AL 35211	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
105	Vestavia Hills Baptist Church 2600 Vestavia Drive Vestavia Hills, AL 35216	\$ 6,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
106	National Association of Letter Carriers- Vulcan Branch NO. 530 Post Office Box 97 Birmingham, AL 35201	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
107	Alabama Grocers Association 300 Vestavia Parkway Birmingham, AL 35216	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
108	National Association Of Letter Carriers 100 Indiana Avenue Northwest Washington, DC 20001	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
109	Talladega County 148 East St N Talladega , AL 35160	\$ 10,166.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
110	Walker County 219 19th St W Jasper, AL 35501	\$ 13,036.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
111	Blount County 306 2nd Ave Hayden, AL 35079	\$ 9,385.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
112	Shelby County 112 N Main St Columbiana , AL 35051	\$ 80,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
113	Jefferson County 1901 Hoover Ct Hoover, AL 35226	\$ 122,915.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
114	City of Birmingham 3401 Powell Ave S Birmingham, AL 35222	\$ 5,778.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
115	State of Alabama PO Box 5616 Montgomery, AL 36103	\$ 4,403,732.	Person <input checked="" 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.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization Community Food Bank of Central Alabama	Employer identification number 63-0837956
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization **Community Food Bank of Central Alabama** Employer identification number **63-0837956**

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 July 25, 2006, 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?

Yes No

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)?

Yes No

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 \$ _____

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

Schedule D (Form 990) 2022

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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - 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 | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 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		350,749.		350,749.
b Buildings		2,325,306.	622,225.	1,703,081.
c Leasehold improvements				
d Equipment		2,629,265.	1,845,775.	783,490.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,837,320.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	33,277,892.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	33,277,892.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	31,572.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	31,572.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	33,309,464.

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.

1	Total expenses and losses per audited financial statements	1	36,253,612.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	36,253,612.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	36,253,612.

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:

The Organization had no uncertain tax positions that qualify for recognition or disclosure as of December 31, 2022.

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))
		Feast of Hope (event type)	(event type)	None (total number)	
Revenue	1	Gross receipts	168,042.		168,042.
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)	168,042.		168,042.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				168,042.

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **Community Food Bank of Central Alabama** Employer identification number **63-0837956**

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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Addison First Baptist Church 115 S 2nd St Addison, AL 35540	62-0535466	501c3	0.	54,605.	Fair market value	Food	To provide food to the needy.
Adventist Community - South Park 414 S Park Rd SW Birmingham, AL 35211	52-0643036	501c3	0.	160,981.	Fair market value	Food	To provide food to the needy.
Adventist Community Services 9705 Patuxent Woods Dr Columbia, MD 21046	52-0643036	501c3	0.	151,856.	Fair market value	Food	To provide food to the needy.
Alabama Adult and Teen Challenge Lincoln - 450 Drew Ave - Lincoln, AL 35096	63-0940007	501c3	0.	70,610.	Fair market value	Food	To provide food to the needy.
Alabama Adult and Teen Challenge Women's Center - 1726 Rickwood Caverns Rd - Hayden, AL 35079	23-7271062	501c3	0.	33,121.	Fair market value	Food	To provide food to the needy.
Alabama Childhood Food Solutions 114 Canyon Ridge Rd Sylacauga, AL 35151	45-4817150	501c3	0.	752,570.	Fair market value	Food	To provide food to the needy.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **202.**

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2022

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
Alabaster Church of God 530 1st Ave W Alabaster, AL 35007		501c3	0.	46,365.	Fair market value	Food	To provide food to the needy.
Aletheia House 2717 Ensley Ave Birmingham, AL 35218	63-0644067	501c3	0.	28,756.	Fair market value	Food	To provide food to the needy.
All Saints Interfaith Center 1513 Noble St Anniston, AL 36201	63-0581368	501c3	0.	151,039.	Fair market value	Food	To provide food to the needy.
Anniston Soup Bowl 301 W 15th St Anniston, AL 36201	63-0882726	501c3	0.	50,769.	Fair market value	Food	To provide food to the needy.
Argo Community Food Bank 100 Blackjack Rd Trussville, AL 35173	27-1954811	501c3	0.	75,290.	Fair market value	Food	To provide food to the needy.
Argo First Baptist Church 6748 Hwy 78 Cordova, AL 35550		501c3	0.	6,162.	Fair market value	Food	To provide food to the needy.
Ashland First Methodist Church - Clay Co. Food Bank - 83192 Highway 9 - Ashland, AL 36251	36-2167731	501c3	0.	80,567.	Fair market value	Food	To provide food to the needy.
Ashville First Methodist Church 292 7th St Ashville, AL 35953		501c3	0.	6,851.	Fair market value	Food	To provide food to the needy.
Avondale Samaritan Place 3829 5th Ave S Birmingham, AL 35222	43-3177106	501c3	0.	181,663.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Bethel Baptist Church 24975 Highway 25 Columbiana, AL 35051	36-2177311	501c3	0.	26,492.	Fair market value	Food	To provide food to the needy.
Bethel United Methodist Church 9417 Thermal Rd Warrior, AL 35180		501c3	0.	11,137.	Fair market value	Food	To provide food to the needy.
Birmingham AIDS Outreach 205 32nd St S Birmingham, AL 35233	63-0948495	501c3	0.	293,709.	Fair market value	Food	To provide food to the needy.
Birmingham Hispanic SDA Church 42 5th Ave S Birmingham, AL 35205		501c3	0.	30,918.	Fair market value	Food	To provide food to the needy.
Blountsville United Methodist Church - 415 College St - Blountsville, AL 35031	63-0803999	501c3	0.	60,232.	Fair market value	Food	To provide food to the needy.
Bluff Park United Methodist Church 733 Valley St Hoover, AL 35226	63-6004723	501c3	0.	51,799.	Fair market value	Food	To provide food to the needy.
Boldo United Methodist Church 55 Gray Rd Jasper, AL 35504		501c3	0.	17,676.	Fair market value	Food	To provide food to the needy.
Bradford Sanctuary of Praise 8294 Bradford Rd Pinson, AL 35126		501c3	0.	25,407.	Fair market value	Food	To provide food to the needy.
Brother Bryan Mission 1616 2nd Ave N Birmingham, AL 35203	63-0322672	501c3	0.	88,657.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Build-A-Bridge 107 Walter Davis Drive Birmingham, AL 35209		501c3	0.	430,402.	Fair market value	Food	To provide food to the needy.
Cahaba Medical Care 260 Walnut St Centreville, AL 35042	27-3605364	501c3	0.	8,034.	Fair market value	Food	To provide food to the needy.
Calvary Resurrection Christian 356 Killough Springs Rd Birmingham, AL 35215		501c3	0.	20,470.	Fair market value	Food	To provide food to the needy.
Camp Mitnick 4436 Calumet Loop Jasper, AL 35501	63-1134482	501c3	0.	29,827.	Fair market value	Food	To provide food to the needy.
Cane Creek Missionary Baptist 963 Warrior Jasper Rd Warrior, AL 35180	62-0535346	501c3	0.	119,177.	Fair market value	Food	To provide food to the needy.
Catholic Center of Concern 712 4th Ct W Birmingham, AL 35204		501c3	0.	34,445.	Fair market value	Food	To provide food to the needy.
Cedar Bluff First United Methodist Church - 3600 Old Highway 9 - Cedar Bluff, AL 35959		501c3	0.	25,628.	Fair market value	Food	To provide food to the needy.
Chandler Springs Assembly 1401 Horns Lake Rd Talladega, AL 35160		501c3	0.	57,773.	Fair market value	Food	To provide food to the needy.
Changed Lives Christian Center 1308 26th Ave N Birmingham, AL 35204	26-0872042	501c3	0.	18,630.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Christ Central Church 1295 2nd Ave Calera, AL 35040	63-0340853	501c3	0.	41,247.	Fair market value	Food	To provide food to the needy.
Christian Love Pantry 205 Edwin Holladay Pl Ste 105 Pell City, AL 35125	63-1048552	501c3	0.	67,993.	Fair market value	Food	To provide food to the needy.
Christian Service Mission 3600 3rd Ave S Birmingham, AL 35222	63-0594603	501c3	0.	556,930.	Fair market value	Food	To provide food to the needy.
Christian's Place Mission 300 4th St Nauvoo, AL 35578	36-2167731	501c3	0.	94,597.	Fair market value	Food	To provide food to the needy.
Church of God of the Union Assembly - 1230 Simmons St - Bessemer, AL 35020		501c3	0.	86,708.	Fair market value	Food	To provide food to the needy.
Church of the Highlands Dream Center - 5705 1st Ave N - Birmingham, AL 35212		501c3	0.	26,790.	Fair market value	Food	To provide food to the needy.
Church of the Reconciler 112 14th St N Birmingham, AL 35203		501c3	0.	56,809.	Fair market value	Food	To provide food to the needy.
Clearview Worship Center 901 Cedar Bluff Rd Centre, AL 35960		501c3	0.	49,174.	Fair market value	Food	To provide food to the needy.
Community Care Development Network 1920 Old Springville Rd Center Point, AL 35215	81-0955665	501c3	0.	238,843.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Community Enabler Developer 104 F St Anniston, AL 36201	63-0765763	501c3	0.	19,329.	Fair market value	Food	To provide food to the needy.
Connecting Pointe 2200 Alton Rd Birmingham, AL 35210		501c3	0.	35,428.	Fair market value	Food	To provide food to the needy.
Cornerstone Church 2694 Hwy 58 Helena, AL 35080		501c3	0.	169,274.	Fair market value	Food	To provide food to the needy.
Crumly Chapel United Methodist Church - 336 Crumley Chapel Rd - Birmingham, AL 35214	63-0859380	501c3	0.	54,320.	Fair market value	Food	To provide food to the needy.
Dilworth Church of God 3688 Hull Rd Empire, AL 35063	63-1090230	501c3	0.	11,034.	Fair market value	Food	To provide food to the needy.
Disabled American Veterans 238 2nd Ave N Birmingham, AL 35204	63-0420395	501c3	0.	179,548.	Fair market value	Food	To provide food to the needy.
Eagle's Rest 2814 Blue Water Road Oakman, AL 35579	63-1276174	501c3	0.	52,242.	Fair market value	Food	To provide food to the needy.
ELCD - East Lake House 7901 First Avenue South Birmingham, AL 35206	63-0849453	501c3	0.	6,259.	Fair market value	Food	To provide food to the needy.
ELCD - Highland Manor 1103 Rich Arrington Jr. Blvd South Birmingham, AL 35205	63-0849453	501c3	0.	13,604.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ELCD - Princeton Towers 909 Princeton Avenue SW Birmingham, AL 35211	63-0849453	501c3	0.	51,437.	Fair market value	Food	To provide food to the needy.
ELCD - Villa Maria 500 82nd St. South Birmingham, AL 35206	63-0849453	501c3	0.	12,949.	Fair market value	Food	To provide food to the needy.
Eldridge Church of Christ 54115 Highway 13 Eldridge, AL 35554	47-0939116	501c3	0.	42,700.	Fair market value	Food	To provide food to the needy.
Etowah Baptist Association 853 Walnut St Gadsden, AL 35901		501c3	0.	5,984.	Fair market value	Food	To provide food to the needy.
Etowah Baptist Missions Center 215 Wall St Gadsden, AL 35904		501c3	0.	24,630.	Fair market value	Food	To provide food to the needy.
Faith Church of the Nazarene 4820 Skyline Dr Warrior, AL 35180		501c3	0.	208,835.	Fair market value	Food	To provide food to the needy.
Family Care Center 1470 W Main St Centre, AL 35960	52-2420945	501c3	0.	81,711.	Fair market value	Food	To provide food to the needy.
Family Worship Center 2001 Ave Z Birmingham, AL 35208	63-1175988	501c3	0.	18,424.	Fair market value	Food	To provide food to the needy.
Feed My Sheep 3226 Grasselli Ave SW Birmingham, AL 35211	20-3138135	501c3	0.	138,043.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Feeding Cleburne 21393 Main St Ranburne, AL 36273	47-5428083	501c3	0.	172,067.	Fair market value	Food	To provide food to the needy.
Fellowship House 1625 12th Ave S Birmingham, AL 35205	63-0509822	501c3	0.	41,462.	Fair market value	Food	To provide food to the needy.
First Baptist Church Alabaster 903 3rd Ave NW Alabaster, AL 35007	63-0683074	501c3	0.	118,490.	Fair market value	Food	To provide food to the needy.
First Baptist Church Gadsden 235 S 5th St Gadsden, AL 35901	63-0370178	501c3	0.	5,771.	Fair market value	Food	To provide food to the needy.
First Baptist Church Haleyville 1103 21st St Haleyville, AL 35565	62-0535346	501c3	0.	139,354.	Fair market value	Food	To provide food to the needy.
First Baptist Church Hayden 5080 AL-160 Hayden, AL 35079	63-0837631	501c3	0.	45,722.	Fair market value	Food	To provide food to the needy.
First Methodist Church Hueytown 110 Sunset Dr Hueytown, AL 35023	36-2167731	501c3	0.	106,611.	Fair market value	Food	To provide food to the needy.
First Seventh Day Adventist Adamsville - 4205 Main St - Adamsville, AL 35005		501c3	0.	18,063.	Fair market value	Food	To provide food to the needy.
First United Methodist Church Attalla - 601 4th St NW - Attalla, AL 35954	63-0717780	501c3	0.	23,768.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Freedom Rain, Inc. 7916 2nd Ave S Birmingham, AL 35206	72-1344856	501c3	0.	1,563,966.	Fair market value	Food	To provide food to the needy.
Friendship Missionary Baptist 1674 County Rd 40 Prattville, AL 36067		501c3	0.	29,414.	Fair market value	Food	To provide food to the needy.
Full Deliverance Church of God 1117 Rutledge Dr Birmingham, AL 35208	63-1208819	501c3	0.	41,225.	Fair market value	Food	To provide food to the needy.
Fultondale Baptist Church 409 Main St Fultondale, AL 35068	63-0506854	501c3	0.	49,177.	Fair market value	Food	To provide food to the needy.
Gadsden Christian Fellowship 719 Nunnally Ave Gadsden, AL 35903	63-0835439	501c3	0.	16,212.	Fair market value	Food	To provide food to the needy.
Gardendale First Baptist Church 316 Mountain Chrest Pkwy Gardendale, AL 35071		501c3	0.	5,561.	Fair market value	Food	To provide food to the needy.
Garywood Church 2730 Allison-Bonnett Memorial Dr Bessemer, AL 35023	44-0577787	501c3	0.	54,921.	Fair market value	Food	To provide food to the needy.
Good Works 7857 Luhrig Rd Athens, OH 45701	84-4921387	501c3	0.	121,247.	Fair market value	Food	To provide food to the needy.
Grace Episcopal Church 5712 1st Ave N Birmingham, AL 35212	63-0288860	501c3	0.	104,699.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Greater Birmingham Ministries 2304 12th Ave N Birmingham, AL 35234	63-0577439	501c3	0.	70,585.	Fair market value	Food	To provide food to the needy.
Greater Saint John Baptist Church 2401 Carlos Ave SW Birmingham, AL 35211		501c3	0.	56,344.	Fair market value	Food	To provide food to the needy.
Green Valley Baptist Church 1815 Patton Chapel Rd Hoover, AL 35226	63-0503309	501c3	0.	23,694.	Fair market value	Food	To provide food to the needy.
Harper Springs Baptist Church 525 Harper Springs Rd Sylacauga, AL 35150		501c3	0.	9,463.	Fair market value	Food	To provide food to the needy.
HEARTS of Cleburne 21517 Main St Ranburne, AL 36273	63-1270917	501c3	0.	101,120.	Fair market value	Food	To provide food to the needy.
Holy Rosary Food Pantry 7414 Georgia Rd Birmingham, AL 35212	63-0581368	501c3	0.	378,015.	Fair market value	Food	To provide food to the needy.
Homewood Church of Christ 265 W Oxmoor Rd Birmingham, AL 35209	63-0886712	501c3	0.	28,436.	Fair market value	Food	To provide food to the needy.
Hope House 2106 Cahaba Rd Mountain Brook, AL 35223	63-1235727	501c3	0.	93,312.	Fair market value	Food	To provide food to the needy.
Hope House Church 1602 10th Ave Jasper, AL 35501	45-5277650	501c3	0.	15,748.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
House of Love 508 Jordan Ave Tallassee, AL 36078		501c3	0.	75,145.	Fair market value	Food	To provide food to the needy.
I Care Christian Ministries 2241 Forestdale Blvd Birmingham, AL 35214	47-2676456	501c3	0.	35,739.	Fair market value	Food	To provide food to the needy.
I.J. Community Development 1027 11th St N Bessemer, AL 35020	72-1345120	501c3	0.	78,932.	Fair market value	Food	To provide food to the needy.
Jacksonville Christian Outreach Center - 206 Francis St W - Jacksonville, AL 36265		501c3	0.	26,679.	Fair market value	Food	To provide food to the needy.
James B and Vah's Emporium CDC, Inc - 3112 Ave F - Birmingham, AL 35218		501c3	0.	28,982.	Fair market value	Food	To provide food to the needy.
Jesus is the Way, Truth, Life 811 15th Street Anniston, AL 36201	74-3207150	501c3	0.	120,883.	Fair market value	Food	To provide food to the needy.
Joe Brooks Food Ministry PO Box 55029 Birmingham, AL 35255	53-0204696	501c3	0.	52,037.	Fair market value	Food	To provide food to the needy.
Kikstart Incorporated 4500 Katies Way Ste 110 Bessemer, AL 35022	27-0545619	501c3	0.	273,984.	Fair market value	Food	To provide food to the needy.
King's Home 221 Kings Home Dr Chelsea, AL 35043	63-0760276	501c3	0.	269,720.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Leeds Outreach 1000 Park Dr Leeds, AL 35094		501c3	0.	141,221.	Fair market value	Food	To provide food to the needy.
Life Changers Christian Church 1529 Tomahawk Rd Birmingham, AL 35214		501c3	0.	14,828.	Fair market value	Food	To provide food to the needy.
LifeChurch Birmingham 5567 Chalkville Rd Birmingham, AL 35235		501c3	0.	26,963.	Fair market value	Food	To provide food to the needy.
Lincoln Food Pantry 225 Magnolia St Lincoln, AL 35096	45-1275918	501c3	0.	88,400.	Fair market value	Food	To provide food to the needy.
Lineville Baptist Church 60315 AL-49 Lineville, AL 36266		501c3	0.	18,052.	Fair market value	Food	To provide food to the needy.
Living Abundant Life 1625 Kent Dairy Rd Alabaster, AL 35007		501c3	0.	6,249.	Fair market value	Food	To provide food to the needy.
Love in Action 1026 Commerce Blvd Pelham, AL 35124	63-6102776	501c3	0.	157,364.	Fair market value	Food	To provide food to the needy.
Main Street Ministries 24911 AL-195 Double Springs, AL 35553	62-0535346	501c3	0.	125,524.	Fair market value	Food	To provide food to the needy.
Manna Ministries 333 Smokey Rd Alabaster, AL 35007	58-2058855	501c3	0.	417,293.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Matthew 25-35 Outreach Organization - 107 Walter Davis Drive - Birmingham, AL 35209		501c3	0.	19,414.	Fair market value	Food	To provide food to the needy.
Meals on Wheels 3620 8th Ave S Birmingham, AL 35222	81-3348268	501c3	0.	28,210.	Fair market value	Food	To provide food to the needy.
Metro West Ministries 6124 Myron Massey Blvd Fairfield, AL 35064	72-1345459	501c3	0.	254,830.	Fair market value	Food	To provide food to the needy.
Ministries of Deliverance 2531 9th Ave N Bessemer, AL 35020	63-1170359	501c3	0.	213,705.	Fair market value	Food	To provide food to the needy.
Mission of Hope 38 Cut N Curl Rd Dora, AL 35062	63-1253204	501c3	0.	232,669.	Fair market value	Food	To provide food to the needy.
Mt. Liberty/Turning Point Missionary Baptist - 851 Morrisville Rd - Anniston, AL 36201		501c3	0.	7,451.	Fair market value	Food	To provide food to the needy.
Mt. Pilgrim People's Development Center - 143 Seminole Cir - Fairfield, AL 35064	63-0821185	501c3	0.	92,404.	Fair market value	Food	To provide food to the needy.
Mt. Pisgah Baptist Church 100 Cemetery Rd Cropwell, AL 35054		501c3	0.	9,130.	Fair market value	Food	To provide food to the needy.
Mt. Vernon Baptist Church 7600 Naples Ave Birmingham, AL 35206	62-0535346	501c3	0.	57,618.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NAME Ministries Inc 701 18th St Ensley Birmingham, AL 35218		501c3	0.	15,694.	Fair market value	Food	To provide food to the needy.
New Beginnings - Talladega 900 E Renfroe Rd Talladega, AL 35160	83-2667234	501c3	0.	53,639.	Fair market value	Food	To provide food to the needy.
New Hope Baptist Pell City 75 Cogswell Ave Pell City, AL 35125	63-0871391	501c3	0.	58,634.	Fair market value	Food	To provide food to the needy.
New Life Interfaith Ministries, Inc - 1600 8th Ave N - Bessemer, AL 35020		501c3	0.	38,723.	Fair market value	Food	To provide food to the needy.
New Life Pentacostal Church 400 Roebuck Pkwy Birmingham, AL 35206	53-0966517	501c3	0.	46,522.	Fair market value	Food	To provide food to the needy.
New Life SDA Church 5626 Ash St Birmingham, AL 35207		501c3	0.	129,901.	Fair market value	Food	To provide food to the needy.
New Pilgrim Baptist Church 708 Goldwire Pl SW Birmingham, AL 35211	63-0600188	501c3	0.	83,934.	Fair market value	Food	To provide food to the needy.
New Prospect Baptist Church 202 Co Rd 3463 Haleyville, AL 35565	62-0535346	501c3	0.	17,091.	Fair market value	Food	To provide food to the needy.
North Glencoe Baptist Church 1119 Chastain Blvd Gadsden, AL 35903	63-0758738	501c3	0.	21,909.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
North Jefferson Baptist Caring Center - 3396 Mt Olive Rd - Mt Olive, AL 35117	63-0696633	501c3	0.	43,811.	Fair market value	Food	To provide food to the needy.
Nurturing Golden Hearts 1112 4th Ave N Bessemer, AL 35021		501c3	0.	101,621.	Fair market value	Food	To provide food to the needy.
Oak Mountain Missions 2699 Pelham Pkwy Pelham, AL 35124	63-1288041	501c3	0.	118,880.	Fair market value	Food	To provide food to the needy.
Open Door Church 120 Laurel Woods Dr Helena, AL 35080	63-1005114	501c3	0.	92,300.	Fair market value	Food	To provide food to the needy.
Palmerdale Methodist Church 7776 AL-75 Pinson, AL 35126	63-0718941	501c3	0.	35,534.	Fair market value	Food	To provide food to the needy.
Parrish First Baptist Church 95 1st St Parrish, AL 35580		501c3	0.	18,771.	Fair market value	Food	To provide food to the needy.
PATCH		501c3	0.	26,157.	Fair market value	Food	To provide food to the needy.
Paul Mitchell Ministries 1425 Lomb Ave Birmingham, AL 35208	74-3206400	501c3	0.	19,116.	Fair market value	Food	To provide food to the needy.
Piedmont Benevolence Center 20222 AL-9 Piedmont, AL 36272	63-1287238	501c3	0.	596,148.	Fair market value	Food	To provide food to the needy.

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
Rainbow Church of Christ 2201 Rainbow Dr Gadsden, AL 35901		501c3	0.	11,268.	Fair market value	Food	To provide food to the needy.
Red Door Kitchen 500 South St W Talladega, AL 35160	63-0894825	501c3	0.	7,251.	Fair market value	Food	To provide food to the needy.
Redeemed Christian Church of God 2230 Green Springs Hwy S Birmingham, AL 35205	26-4464755	501c3	0.	20,612.	Fair market value	Food	To provide food to the needy.
Redeemed Ministries 1415 Fairview Church Rd Cleveland, AL 35049	47-3578126	501c3	0.	45,585.	Fair market value	Food	To provide food to the needy.
Royal Pines 5 Guinns Cove Rd Hayden, AL 35079	63-0358757	501c3	0.	41,556.	Fair market value	Food	To provide food to the needy.
Salvation Army Adult Rehab 1401 F L Shuttlesworth Dr Birmingham, AL 35234	63-0302172	501c3	0.	88,031.	Fair market value	Food	To provide food to the needy.
Salvation Army Anniston 420 Noble St Anniston, AL 36201	58-0660607	501c3	0.	124,461.	Fair market value	Food	To provide food to the needy.
Salvation Army City Command 2015 26th Ave N Birmingham, AL 35234	58-0660607	501c3	0.	77,526.	Fair market value	Food	To provide food to the needy.
Salvation Army Gadsden 114 N 11th St Gadsden, AL 35901	58-0660607	501c3	0.	15,403.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Samaritan House 1301 Allison Mill Rd Talladega, AL 35160	63-0977252	501c3	0.	118,747.	Fair market value	Food	To provide food to the needy.
Servant of Jesus 3113 McCoy Ave Anniston, AL 36201	20-2316381	501c3	0.	173,822.	Fair market value	Food	To provide food to the needy.
Serving You Ministries, Inc. 6523 1st Ave N Birmingham, AL 35206	26-3953935	501c3	0.	169,303.	Fair market value	Food	To provide food to the needy.
Shelby Baptist Association 205 Walton St Columbiana, AL 35051	72-1583037	501c3	0.	50,326.	Fair market value	Food	To provide food to the needy.
Shelby Emergency Assistance 160 Shoshone Dr Montevallo, AL 35115	63-0816556	501c3	0.	25,203.	Fair market value	Food	To provide food to the needy.
Shepherd's Supply, Inc. 768 Kerr Rd Moody, AL 35004	26-1901982	501c3	0.	248,191.	Fair market value	Food	To provide food to the needy.
Siberton Baptist Church 627 Jones St SE Attalla, AL 35954	62-0535346	501c3	0.	63,746.	Fair market value	Food	To provide food to the needy.
Sixth Ave Baptist Church 1101 Martin Luther King Jr Dr Birmingham, AL 35211	63-0587137	501c3	0.	60,610.	Fair market value	Food	To provide food to the needy.
Smithfield Backpack Buddies 300- Fourth Court N Birmingham, AL 35204		501c3	0.	47,094.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
South Highland Presbyterian Church 2035 Highland Ave Birmingham, AL 35205	23-6393377	501c3	0.	21,837.	Fair market value	Food	To provide food to the needy.
Southside Baptist Church 1016 19th St S Birmingham, AL 35205	63-0302178	501c3	0.	176,516.	Fair market value	Food	To provide food to the needy.
St. Andrew's Episcopal Church 1024 12th St S Birmingham, AL 35205	63-0302156	501c3	0.	104,904.	Fair market value	Food	To provide food to the needy.
St. Catherine's Episcopal Church 571 Holt Rd NE Marietta, GA 30068	31-1629166	501c3	0.	7,243.	Fair market value	Food	To provide food to the needy.
St. Mark's Episcopal Church 228 Dennison Ave SW Birmingham, AL 35211	31-1629166	501c3	0.	29,040.	Fair market value	Food	To provide food to the needy.
St. Mary's Episcopal Church 178 E 4th St Prattville, AL 36067	31-1162916	501c3	0.	341,204.	Fair market value	Food	To provide food to the needy.
Steele United Methodist Church 3375 Pope Ave Steele, AL 35987	63-0866565	501c3	0.	18,129.	Fair market value	Food	To provide food to the needy.
Sumiton Church of God 50 Hosanna Dr Sumiton, AL 35148	63-0878911	501c3	0.	85,491.	Fair market value	Food	To provide food to the needy.
Sycamore House of Compassion PO Box 55029 Birmingham, AL 35255		501c3	0.	114,879.	Fair market value	Food	To provide food to the needy.

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
The Church at Southside 400 22nd St S Birmingham, AL 35233	46-2362507	501c3	0.	11,804.	Fair market value	Food	To provide food to the needy.
The Community Kitchens of Birmingham - 5712 1st Ave N - Birmingham, AL 35212	63-0988804	501c3	0.	38,403.	Fair market value	Food	To provide food to the needy.
The Foundry Rescue Mission 1804 6th Ave N Bessemer, AL 35020	63-0624278	501c3	0.	122,673.	Fair market value	Food	To provide food to the needy.
The Grace Place 1630 Powder Plant Rd Bessemer, AL 35022	47-2708825	501c3	0.	31,834.	Fair market value	Food	To provide food to the needy.
The Healing Place 5709 Trussville Clay Rd Trussville, AL 35173	63-1140931	501c3	0.	82,135.	Fair market value	Food	To provide food to the needy.
The HUB Community Development Corporation, Inc. - 3420 2nd Ave N - Birmingham, AL 35222	46-1657585	501c3	0.	44,209.	Fair market value	Food	To provide food to the needy.
The Leaf at Faith Church Midfield 910 9th St Midfield, AL 35228		501c3	0.	97,950.	Fair market value	Food	To provide food to the needy.
The Ministry Center at Green Springs - 2230 Green Springs Hwy - Birmingham, AL 35205	63-0377187	501c3	0.	31,229.	Fair market value	Food	To provide food to the needy.
The Refuge of Blount County 75 Cemetery Rd Atloona, AL 35952		501c3	0.	52,440.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Sanctuary 46639 US-280 Sylacauga, AL 35150	62-0484177	501c3	0.	137,479.	Fair market value	Food	To provide food to the needy.
Thirgood Memorial CME Church 517 Center St Birmingham, AL 35204	26-4126634	501c3	0.	22,233.	Fair market value	Food	To provide food to the needy.
Titusville Development Corp 300 Kappa Ave S Birmingham, AL 35205	63-0964639	501c3	0.	78,291.	Fair market value	Food	To provide food to the needy.
Trinity United Methodist Church 914 Oak Grove Rd Birmingham, AL 35209	22-1723319	501c3	0.	289,703.	Fair market value	Food	To provide food to the needy.
Triumph Youth & Adult Community Development Corporation - 1431 13th Ave N - Bessemer, AL 35020	20-2186731	501c3	0.	79,238.	Fair market value	Food	To provide food to the needy.
True Vine Evangelical 4129 40th Terrace N Birmingham, AL 35217	63-1212886	501c3	0.	74,487.	Fair market value	Food	To provide food to the needy.
UAB Blazer Kitchen 1613 11th Ave S Birmingham, AL 35205	63-6005396	501c3	0.	287,009.	Fair market value	Food	To provide food to the needy.
United Community Center, Inc. 3617 Hickory Ave SW Birmingham, AL 35221	63-0678752	501c3	0.	8,782.	Fair market value	Food	To provide food to the needy.
Upper Room Church 656 Co Rd 8 Montevallo, AL 35115	63-1151792	501c3	0.	31,902.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Urban Ministry, Inc. 1229 Cotton Ave SW Birmingham, AL 35211	63-0717761	501c3	0.	41,877.	Fair market value	Food	To provide food to the needy.
Vestavia Hills Methodist Church 2061 Kentucky Ave Vestavia Hills, AL 35216	63-0378123	501c3	0.	130,496.	Fair market value	Food	To provide food to the needy.
Vise Grove SDA 303 Co Rd 116 Heflin, AL 36264	46-1391222	501c3	0.	6,119.	Fair market value	Food	To provide food to the needy.
Walk of Faith Ministries 9290 AL-124 Carbon Hill, AL 35549	20-3138135	501c3	0.	14,619.	Fair market value	Food	To provide food to the needy.
Waterstone Church 210 Brake St S Warrior, AL 35180	63-0765642	501c3	0.	36,423.	Fair market value	Food	To provide food to the needy.
Way of the Cross 101 N 24th St Gadsden, AL 35904	63-1284175	501c3	0.	228,365.	Fair market value	Food	To provide food to the needy.
Westside Baptist Church 67700 AL-77 Talladega, AL 35160	63-0721891	501c3	0.	8,165.	Fair market value	Food	To provide food to the needy.
White Springs Baptist Church 4411 Rainbow Dr Rainbow City, AL 35906	63-0413219	501c3	0.	195,153.	Fair market value	Food	To provide food to the needy.
Woodlawn Community Table 139 54th St N Birmingham, AL 35212	58-1982972	501c3	0.	213,037.	Fair market value	Food	To provide food to the needy.

Schedule I (Form 990)

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization: **Community Food Bank of Central Alabama**
Employer identification number: **63-0837956**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (Donated food in)	X	13,143,295	23,557,417.	Fair market value
26	Other ()				
27	Other ()				
28	Other ()				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 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.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

**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 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

Community Food Bank of Central Alabama

Employer identification number

63-0837956

Form 990, Part I, Line 1, Description of Organization Mission:

qualified organizations which serve the needy through their programs.

Form 990, Part III, Line 4a, Program Service Accomplishments:

and ensuring the wholesome food is distributed to neighbors
experiencing food insecurity. Over 8,200 volunteers gave their time
alongside the staff to provide food to our neighbors facing hunger.

Form 990, Part VI, Section B, line 11b:

Form 990 is provided to Board members for/at a regularly scheduled meeting.

Form 990, Part VI, Section B, Line 12c:

Member requited to remove conflict or resign position.

Form 990, Part VI, Section B, Line 15:

Board Evaluates and approves compensation for the executive director and
general oversight of all others.

Form 990, Part VI, Section C, Line 19:

Documents are made available by appointment at the Organization's
administrative offices during regular business hours.

Form 990, Part XII, Line 2c:

The Organization has not changed its oversight process from the prior
year.