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CLIENT'S COPY

Filing Instructions

Prepared for:

GRACE KLEIN COMMUNITY, INC.
1678 MONTGOMERY HWY, STE. 104
BIRMINGHAM, AL 35216

Prepared by:

PEARCE, BEVILL, LEESBURG, MOORE, P.C.
110 OFFICE PARK DR
BIRMINGHAM, AL 35223

2023 FORM 990

ELECTRONIC FILING:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER YOU HAVE REVIEWED THE RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN, DATE AND RETURN FORM 8879-TE TO OUR OFFICE. WE WILL TRANSMIT THE RETURN ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED. RETURN FORM 8879-TE TO US AS SOON AS POSSIBLE.

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2023, or fiscal year beginning _____, 2023, and ending _____, 20__

2023

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

GRACE KLEIN COMMUNITY, INC.

EIN or SSN

80-0569639

Name and title of officer or person subject to tax **JENNY WALTMAN
DIRECTOR**

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.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b <u>9,840,299.</u>
2a Form 990-EZ check here ...	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ...	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b _____
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b _____
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

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

Under penalties of perjury, I declare that 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 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize PEARCE, BEVILL, LEESBURG, MOORE, P.C. to enter my PIN 09639
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2023 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 2023 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.

63287417003

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 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 PEARCE, BEVILL, LEESBURG, MOORE, P. Date _____

ERO Must Retain This Form - See Instructions

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

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

Form **8879-TE** (2023)

LHA 302521 01-05-24

08590325 787090 30728

2023.05070 GRACE KLEIN COMMUNITY, INC. 30728__2

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

Department of the Treasury
Internal Revenue Service

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

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

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

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

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. GRACE KLEIN COMMUNITY, INC.	Taxpayer identification number (TIN) 80-0569639
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1678 MONTGOMERY HWY, STE. 104	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BIRMINGHAM, AL 35216	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **JENNY WALTMAN**
1678 MONTGOMERY HIGHWAY #104 - BIRMINGHAM, AL 35216
 Telephone No. **205-490-7516** Fax No. **205-390-2177**

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15**, 20 **24**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 calendar year 20 **23** or
 tax year beginning _____, 20 _____, and ending _____, 20 _____

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

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

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

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2023

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2023 calendar year, or tax year beginning and ending

B Check if applicable:	C Name of organization GRACE KLEIN COMMUNITY, INC.	D Employer identification number 80-0569639
<input type="checkbox"/> Address change	Doing business as	E Telephone number 205-490-7516
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1678 MONTGOMERY HWY, STE. 104	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code BIRMINGHAM, AL 35216	G Gross receipts \$ 9,854,733.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: JENNY WALTMAN 1678 MONTGOMERY HIGHWAY #104, BIRMINGHAM, AL	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	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	If "No," attach a list. See instructions
	J Website: WWW.GRACEKLEINCOMMUNITY.COM	H(c) Group exemption number
	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: 2010 M State of legal domicile: AL

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE ENTITY'S MISSION IS TO PROVIDE CHARITABLE AND EDUCATION SERVICES TO THE POOR, DISTRESSED		
	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	9
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	20
	6	Total number of volunteers (estimate if necessary)	6	6600
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	39,070.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 8,447,090.	Current Year 9,801,229.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,422.	5,780.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	26,989.	33,290.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,475,501.	9,840,299.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	7,583,934.	8,856,047.
	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)	365,692.	411,075.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) 43,183.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	295,756.	369,299.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,245,382.	9,636,421.	
19	Revenue less expenses. Subtract line 18 from line 12	230,119.	203,878.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 888,908.	End of Year 1,307,534.
	21	Total liabilities (Part X, line 26)	224,922.	383,971.
	22	Net assets or fund balances. Subtract line 21 from line 20	663,986.	923,563.

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 JENNY WALTMAN, DIRECTOR	Date		
	Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name PATRICK L DODD	Preparer's signature PATRICK L DODD	Date	Check if self-employed <input type="checkbox"/> PTIN P00405959
	Firm's name PEARCE, BEVILL, LEESBURG, MOORE, P.C.	Firm's EIN 63-0813240		
	Firm's address 110 OFFICE PARK DR BIRMINGHAM, AL 35223	Phone no. (205) 323-5440		

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 []

1 Briefly describe the organization's mission: THE ENTITY'S PRIMARY MISSION IS TO A. PROVIDE RELIEF TO THE POOR, DISTRESSED OR UNDERPRIVILEGED, B. LESSEN COMMUNITY TENSIONS, C. HELP TO ELIMINATE PREJUDICE AND DISCRIMINATION, AND D. COMBATING COMMUNITY DETERIORATION.

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

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

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

4a (Code:) (Expenses \$ 9,524,246. including grants of \$ 8,856,047.) (Revenue \$ 9,801,229.) 1.-FEEDBHM - \$7,983,872 SPENT IN CASH AND IN-KIND DONATIONS. RESCUED 2,701,510 POUNDS OF FOOD AND FED 451,750 UNIQUE PEOPLE.

2.-LOVE DOES - \$192,454 IN DONATED ITEMS AND VOLUNTEER HOURS TO DELIVER THOUSANDS OF ENCOURAGING GIFTS TO RESIDENTS OF BIRMINGHAM AND SURROUNDING AREAS.

3.-WE SEW LOVE - \$644,205 SPENT IN CASH AND IN-KIND DONATIONS; MADE THOUSANDS OF CLOTHING, HYGIENE ITEMS, AND ACCESSORIES AND SHARED THEM LOCALLY, NATIONALLY AND INTERNATIONALLY.

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 9,524,246.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included on line 1a, above, who are independent; 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NONE
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 [X] 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
JENNY WALTMAN - 205-490-7516
1678 MONTGOMERY HIGHWAY #104, BIRMINGHAM, AL 35216

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) JASON WALTMAN DIRECTOR	37.00	X					0.	0.	0.	
(2) JENNY WALTMAN DIRECTOR	50.00	X					0.	0.	0.	
(3) SHANNON HASKINS DIRECTOR	2.00	X					0.	0.	0.	
(4) LARRY KING DIRECTOR	2.00	X					0.	0.	0.	
(5) JARED THORNTON DIRECTOR	2.00	X					0.	0.	0.	
(6) SHEILA PARKS DIRECTOR	2.00	X					0.	0.	0.	
(7) ROB COMPTON DIRECTOR	2.00	X					0.	0.	0.	
(8) TINA DORIUS DIRECTOR	2.00	X					0.	0.	0.	
(9) LAURA PICKENS DIRECTOR	20.00	X					0.	0.	0.	

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes subtotal rows for 1b, 1c, and 1d.

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 0

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

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.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a 'NONE' entry in column A.

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					
	b Membership dues	1b					
	c Fundraising events	1c	6,533.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	9,794,696.				
	g Noncash contributions included in lines 1a-1f	1g	\$8,609,142.				
	h Total. Add lines 1a-1f		9,801,229.				
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		5,780.		5,780.		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	47,724.			
			(ii) Personal				
			6b Less: rental expenses ...	14,434.			
	c Rental income or (loss)	6c	33,290.				
	d Net rental income or (loss)		33,290.		33,290.		
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
			7b Less: cost or other basis and sales expenses				
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
b Less: direct expenses			8b				
c Net income or (loss) from fundraising events							
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 _____	Business Code					
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions		9,840,299.	0.	39,070.	0.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	8,856,047.	8,856,047.		
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	129,005.	129,005.		
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	253,054.	253,054.		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	29,016.	29,016.		
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	9,817.		9,817.	
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.)	15,671.	14,730.	941.	
12 Advertising and promotion	28,822.			28,822.
13 Office expenses	15,367.	15,367.		
14 Information technology	8,121.	7,634.	487.	
15 Royalties				
16 Occupancy	67,571.	64,184.	3,387.	
17 Travel	89,843.	89,843.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	17,354.	1,869.	1,124.	14,361.
20 Interest	9,654.		9,654.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	54,909.	31,986.	22,923.	
23 Insurance	22,655.	21,296.	1,359.	
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 MISCELLANEOUS	15,102.	5,101.	10,001.	
b PRINTING AND COPYING	5,322.	5,114.	208.	
c POSTAGE	4,173.		4,173.	
d LICENSES AND TAXES	3,300.		3,300.	
e All other expenses	1,618.		1,618.	
25 Total functional expenses. Add lines 1 through 24e	9,636,421.	9,524,246.	68,992.	43,183.
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) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	462,493.	1	382,808.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,050.	4	
	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		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,003,089.		
	b Less: accumulated depreciation	10b 217,938.	401,330.	10c 785,151.
	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	24,035.	15	139,575.
16 Total assets. Add lines 1 through 15 (must equal line 33)	888,908.	16	1,307,534.	
Liabilities	17 Accounts payable and accrued expenses		17	36,383.
	18 Grants payable		18	
	19 Deferred revenue		19	
	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	215,398.	23	347,588.
	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	9,524.	25	0.
	26 Total liabilities. Add lines 17 through 25	224,922.	26	383,971.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions		27	
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0.	29	0.
	30 Paid-in or capital surplus, or land, building, or equipment fund	0.	30	55,699.
	31 Retained earnings, endowment, accumulated income, or other funds	663,986.	31	867,864.
	32 Total net assets or fund balances	663,986.	32	923,563.
33 Total liabilities and net assets/fund balances	888,908.	33	1,307,534.	

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	9,840,299.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,636,421.
3	Revenue less expenses. Subtract line 2 from line 1	3	203,878.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	663,986.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	55,699.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	923,563.

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 checked="" type="checkbox"/> Cash <input 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 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.		
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 _____		

Form 990 (2023)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization GRACE KLEIN COMMUNITY, INC. Employer identification number 80-0569639

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

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

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,490,523.	3,916,274.	5,312,971.	8,447,090.	9,801,229.	28,968,087.
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	1,490,523.	3,916,274.	5,312,971.	8,447,090.	9,801,229.	28,968,087.
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.						28,968,087.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	1,490,523.	3,916,274.	5,312,971.	8,447,090.	9,801,229.	28,968,087.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	16,057.	39,475.	28,999.	46,906.	28,411.	159,848.
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						29,127,935.

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**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) **14** 99.45 %

15 Public support percentage from 2022 Schedule A, Part II, line 14 **15** %

16a 33 1/3% support test - 2023. 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

b 33 1/3% support test - 2022. 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

17a 10% -facts-and-circumstances test - 2023. 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

b 10% -facts-and-circumstances test - 2022. 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

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

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the 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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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.)						

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 2023 (line 8, column (f), divided by line 13, column (f))	15		%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	95.62	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17		%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	4.38	%

19a 33 1/3% support tests - 2023. 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 - 2022. 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 2023 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-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

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, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

GRACE KLEIN COMMUNITY, INC.

Employer identification number

80-0569639

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).

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

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

GRACE KLEIN COMMUNITY, INC.

80-0569639

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	BUFFALO ROCK 34 WEST OXMOOR ROAD BIRMINGHAM, AL 35209	\$ 527,643.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	FARMLINK P.O. BOX 744772 LOS ANGELES, CA 90074	\$ 694,403.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	FORESTWOOD FARMS 4101 COALBURG ROAD BIRMINGHAM, AL 35207	\$ 662,100.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	HOMEWOOD CITY SCHOOLS 450 DALE AVENUE HOMEWOOD, AL 35209	\$ 392,461.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	MAGIC CITY HARVEST 107 VULCAN ROAD, SUITE 462 BIRMINGHAM, AL 35209	\$ 485,326.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	PUBLIX 3300 PUBLIX CORPORATE PARKWAY LAKELAND, FL 33801	\$ 753,535.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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	REGIONAL PRODUCE 624 16TH AVENUE THOMAS BIRMINGHAM, AL 35204	\$ 322,221.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	TRADER JOE'S 205 SUMMIT BLVD # 100 BIRMINGHAM, AL 35243	\$ 941,579.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9	TYSON FOODS 2200 W. DON TYSON PARKWAY SPRINGVILLE, AZ 72762	\$ 1,130,657.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
1	FOOD _____ _____ _____	\$ <u>7,961.</u>	<u>12/21/23</u>
1	FOOD _____ _____ _____	\$ <u>12,758.</u>	<u>11/14/23</u>
1	FOOD _____ _____ _____	\$ <u>14,855.</u>	<u>11/06/23</u>
1	FOOD _____ _____ _____	\$ <u>5,179.</u>	<u>11/01/23</u>
1	FOOD _____ _____ _____	\$ <u>6,796.</u>	<u>10/30/23</u>
1	FOOD _____ _____ _____	\$ <u>8,203.</u>	<u>10/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
1	FOOD _____ _____ _____	\$ <u>36,666.</u>	<u>10/06/23</u>
1	FOOD _____ _____ _____	\$ <u>47,250.</u>	<u>10/06/23</u>
1	FOOD _____ _____ _____	\$ <u>19,136.</u>	<u>10/03/23</u>
1	FOOD _____ _____ _____	\$ <u>20,673.</u>	<u>09/26/23</u>
1	FOOD _____ _____ _____	\$ <u>14,288.</u>	<u>09/19/23</u>
1	FOOD _____ _____ _____	\$ <u>29,786.</u>	<u>09/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
1	FOOD _____ _____ _____	\$ 5,602.	09/11/23
1	FOOD _____ _____ _____	\$ 8,497.	09/05/23
1	FOOD _____ _____ _____	\$ 6,305.	08/29/23
1	FOOD _____ _____ _____	\$ 10,886.	08/21/23
1	FOOD _____ _____ _____	\$ 5,906.	08/15/23
1	FOOD _____ _____ _____	\$ 7,938.	08/01/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
1	FOOD _____ _____ _____	\$ <u>7,745.</u>	<u>07/17/23</u>
1	FOOD _____ _____ _____	\$ <u>11,979.</u>	<u>07/10/23</u>
1	FOOD _____ _____ _____	\$ <u>7,664.</u>	<u>06/29/23</u>
1	FOOD _____ _____ _____	\$ <u>4,631.</u>	<u>06/26/23</u>
1	FOOD _____ _____ _____	\$ <u>10,622.</u>	<u>06/19/23</u>
1	FOOD _____ _____ _____	\$ <u>8,422.</u>	<u>06/12/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
1	FOOD _____ _____ _____	\$ <u>6,322.</u>	<u>06/05/23</u>
1	FOOD _____ _____ _____	\$ <u>6,322.</u>	<u>06/05/23</u>
1	FOOD _____ _____ _____	\$ <u>8,815.</u>	<u>05/30/23</u>
1	FOOD _____ _____ _____	\$ <u>8,996.</u>	<u>05/22/23</u>
1	FOOD _____ _____ _____	\$ <u>10,820.</u>	<u>05/15/23</u>
1	FOOD _____ _____ _____	\$ <u>18,711.</u>	<u>05/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
1	FOOD _____ _____ _____	\$ <u>2,079.</u>	<u>04/17/23</u>
1	FOOD _____ _____ _____	\$ <u>9,450.</u>	<u>04/17/23</u>
1	FOOD _____ _____ _____	\$ <u>3,119.</u>	<u>04/10/23</u>
1	FOOD _____ _____ _____	\$ <u>9,450.</u>	<u>04/10/23</u>
1	FOOD _____ _____ _____	\$ <u>7,938.</u>	<u>04/03/23</u>
1	FOOD _____ _____ _____	\$ <u>7,447.</u>	<u>03/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
1	FOOD _____ _____ _____	\$ <u>1,899.</u>	<u>03/21/23</u>
1	FOOD _____ _____ _____	\$ <u>9,450.</u>	<u>03/21/23</u>
1	FOOD _____ _____ _____	\$ <u>473.</u>	<u>03/13/23</u>
1	FOOD _____ _____ _____	\$ <u>9,450.</u>	<u>03/13/23</u>
1	FOOD _____ _____ _____	\$ <u>539.</u>	<u>03/06/23</u>
1	FOOD _____ _____ _____	\$ <u>9,450.</u>	<u>03/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
1	FOOD _____ _____ _____	\$ <u>2,930.</u>	<u>02/28/23</u>
1	FOOD _____ _____ _____	\$ <u>9,356.</u>	<u>02/28/23</u>
1	FOOD _____ _____ _____	\$ <u>6,426.</u>	<u>02/20/23</u>
1	FOOD _____ _____ _____	\$ <u>8,240.</u>	<u>02/13/23</u>
1	FOOD _____ _____ _____	\$ <u>6,124.</u>	<u>02/06/23</u>
1	FOOD _____ _____ _____	\$ <u>9,356.</u>	<u>01/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
1	FOOD _____ _____ _____	\$ <u>6,124.</u>	<u>01/23/23</u>
1	FOOD _____ _____ _____	\$ <u>7,938.</u>	<u>01/17/23</u>
1	FOOD _____ _____ _____	\$ <u>6,549.</u>	<u>01/09/23</u>
1	FOOD _____ _____ _____	\$ <u>14,122.</u>	<u>01/03/23</u>
2	FOOD _____ _____ _____	\$ <u>83,024.</u>	<u>12/01/23</u>
2	FOOD _____ _____ _____	\$ <u>83,024.</u>	<u>11/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>2</u>	FOOD _____ _____ _____	\$ <u>169,520.</u>	<u>09/15/23</u>
<u>2</u>	FOOD _____ _____ _____	\$ <u>142,436.</u>	<u>08/25/23</u>
<u>2</u>	FOOD _____ _____ _____	\$ <u>85,999.</u>	<u>08/02/23</u>
<u>2</u>	FOOD _____ _____ _____	\$ <u>130,400.</u>	<u>06/16/23</u>
<u>3</u>	FOOD _____ _____ _____	\$ <u>3,175.</u>	<u>12/13/23</u>
<u>3</u>	FOOD _____ _____ _____	\$ <u>6,377.</u>	<u>11/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ <u>9,910.</u>	<u>11/20/23</u>
3	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>11/20/23</u>
3	FOOD _____ _____ _____	\$ <u>3,700.</u>	<u>11/15/23</u>
3	FOOD _____ _____ _____	\$ <u>1,956.</u>	<u>11/07/23</u>
3	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>11/07/23</u>
3	FOOD _____ _____ _____	\$ <u>4,042.</u>	<u>10/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ <u>3,948.</u>	<u>10/09/23</u>
3	FOOD _____ _____ _____	\$ <u>5,242.</u>	<u>10/02/23</u>
3	FOOD _____ _____ _____	\$ <u>2,660.</u>	<u>09/27/23</u>
3	FOOD _____ _____ _____	\$ <u>6,129.</u>	<u>09/14/23</u>
3	FOOD _____ _____ _____	\$ <u>12,874.</u>	<u>09/11/23</u>
3	FOOD _____ _____ _____	\$ <u>4,906.</u>	<u>08/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ <u>652.</u>	<u>08/23/23</u>
3	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>08/23/23</u>
3	FOOD _____ _____ _____	\$ <u>15,765.</u>	<u>08/21/23</u>
3	FOOD _____ _____ _____	\$ <u>5,868.</u>	<u>08/11/23</u>
3	FOOD _____ _____ _____	\$ <u>10,367.</u>	<u>08/07/23</u>
3	FOOD _____ _____ _____	\$ <u>11,866.</u>	<u>07/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>07/28/23</u>
3	FOOD _____ _____ _____	\$ <u>16,254.</u>	<u>07/27/23</u>
3	FOOD _____ _____ _____	\$ <u>10,008.</u>	<u>07/24/23</u>
3	FOOD _____ _____ _____	\$ <u>30,481.</u>	<u>07/19/23</u>
3	FOOD _____ _____ _____	\$ <u>4,205.</u>	<u>07/10/23</u>
3	FOOD _____ _____ _____	\$ <u>9,428.</u>	<u>07/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ 11,769.	06/29/23
3	FOOD _____ _____ _____	\$ 16,300.	06/29/23
3	FOOD _____ _____ _____	\$ 4,707.	06/26/23
3	FOOD _____ _____ _____	\$ 16,300.	06/26/23
3	FOOD _____ _____ _____	\$ 8,333.	06/20/23
3	FOOD _____ _____ _____	\$ 3,625.	06/13/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ <u>7,648.</u>	<u>06/09/23</u>
3	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>06/09/23</u>
3	FOOD _____ _____ _____	\$ <u>7,319.</u>	<u>06/07/23</u>
3	FOOD _____ _____ _____	\$ <u>6,262.</u>	<u>05/31/23</u>
3	FOOD _____ _____ _____	\$ <u>11,338.</u>	<u>05/24/23</u>
3	FOOD _____ _____ _____	\$ <u>1,839.</u>	<u>05/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ <u>7,390.</u>	<u>05/15/23</u>
3	FOOD _____ _____ _____	\$ <u>9,681.</u>	<u>05/10/23</u>
3	FOOD _____ _____ _____	\$ <u>8,763.</u>	<u>05/10/23</u>
3	FOOD _____ _____ _____	\$ <u>7,573.</u>	<u>05/05/23</u>
3	FOOD _____ _____ _____	\$ <u>2,119.</u>	<u>05/01/23</u>
3	FOOD _____ _____ _____	\$ <u>1,255.</u>	<u>04/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ 16,300.	04/25/23
3	FOOD _____ _____ _____	\$ 1,998.	04/20/23
3	FOOD _____ _____ _____	\$ 222.	04/18/23
3	FOOD _____ _____ _____	\$ 3,449.	04/14/23
3	FOOD _____ _____ _____	\$ 6,970.	04/12/23
3	FOOD _____ _____ _____	\$ 6,970.	04/12/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ <u>2,941.</u>	<u>04/07/23</u>
3	FOOD _____ _____ _____	\$ <u>7,035.</u>	<u>04/05/23</u>
3	FOOD _____ _____ _____	\$ <u>6,484.</u>	<u>04/03/23</u>
3	FOOD _____ _____ _____	\$ <u>1,376.</u>	<u>03/30/23</u>
3	FOOD _____ _____ _____	\$ <u>1,956.</u>	<u>03/29/23</u>
3	FOOD _____ _____ _____	\$ <u>2,282.</u>	<u>03/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ 10,921.	03/28/23
3	FOOD _____ _____ _____	\$ 8,567.	03/23/23
3	FOOD _____ _____ _____	\$ 1,108.	03/22/23
3	FOOD _____ _____ _____	\$ 7,139.	03/20/23
3	FOOD _____ _____ _____	\$ 7,817.	03/16/23
3	FOOD _____ _____ _____	\$ 6,292.	03/15/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ <u>11,938.</u>	<u>03/15/23</u>
3	FOOD _____ _____ _____	\$ <u>2,002.</u>	<u>03/09/23</u>
3	FOOD _____ _____ _____	\$ <u>5,493.</u>	<u>03/06/23</u>
3	FOOD _____ _____ _____	\$ <u>12,779.</u>	<u>03/02/23</u>
3	FOOD _____ _____ _____	\$ <u>2,184.</u>	<u>03/01/23</u>
3	FOOD _____ _____ _____	\$ <u>6,259.</u>	<u>02/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
3	FOOD _____ _____ _____	\$ <u>16,280.</u>	<u>02/27/23</u>
3	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>02/27/23</u>
3	FOOD _____ _____ _____	\$ <u>18,321.</u>	<u>02/27/23</u>
3	FOOD _____ _____ _____	\$ <u>8,606.</u>	<u>02/24/23</u>
3	FOOD _____ _____ _____	\$ <u>5,167.</u>	<u>02/21/23</u>
3	FOOD _____ _____ _____	\$ <u>3,456.</u>	<u>02/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>3</u>	FOOD _____ _____ _____	\$ <u>4,890.</u>	<u>02/16/23</u>
<u>3</u>	FOOD _____ _____ _____	\$ <u>13,985.</u>	<u>02/09/23</u>
<u>3</u>	FOOD _____ _____ _____	\$ <u>9,128.</u>	<u>02/08/23</u>
<u>3</u>	FOOD _____ _____ _____	\$ <u>31,951.</u>	<u>02/08/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>235.</u>	<u>12/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>434.</u>	<u>12/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>277.</u>	<u>12/08/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>245.</u>	<u>12/01/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>828.</u>	<u>11/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>440.</u>	<u>11/03/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>597.</u>	<u>10/27/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>421.</u>	<u>10/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,232.</u>	<u>10/05/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>2,184.</u>	<u>09/29/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>890.</u>	<u>09/22/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>124.</u>	<u>09/15/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>430.</u>	<u>09/08/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>218.</u>	<u>09/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>85.</u>	<u>08/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>274.</u>	<u>05/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>2,116.</u>	<u>05/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,620.</u>	<u>05/12/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>636.</u>	<u>05/05/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>900.</u>	<u>04/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>365.</u>	<u>04/20/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>597.</u>	<u>04/14/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>284.</u>	<u>04/07/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>381.</u>	<u>03/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>199.</u>	<u>03/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>247,939.</u>	<u>03/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>56,255.</u>	<u>03/03/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>456.</u>	<u>02/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,490.</u>	<u>02/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>245.</u>	<u>02/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>430.</u>	<u>02/10/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>424.</u>	<u>02/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>610.</u>	<u>01/27/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>606.</u>	<u>01/20/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>117.</u>	<u>12/08/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>130.</u>	<u>12/01/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>750.</u>	<u>11/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>125.</u>	<u>11/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>502.</u>	<u>10/27/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>245.</u>	<u>10/20/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>245.</u>	<u>10/13/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>391.</u>	<u>09/29/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>613.</u>	<u>09/22/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>4,945.</u>	<u>09/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>388.</u>	<u>09/01/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>251.</u>	<u>08/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>238.</u>	<u>08/18/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>469.</u>	<u>08/11/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,738.</u>	<u>05/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>632.</u>	<u>05/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>499.</u>	<u>05/12/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>476.</u>	<u>05/05/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>381.</u>	<u>04/28/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>0.</u>	<u>04/20/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>427.</u>	<u>04/14/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>254.</u>	<u>04/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>349.</u>	<u>03/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>143.</u>	<u>03/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>417.</u>	<u>03/10/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>319.</u>	<u>03/03/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>336.</u>	<u>02/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>430.</u>	<u>02/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>381.</u>	<u>02/10/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>209.</u>	<u>02/03/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>297.</u>	<u>01/13/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>587.</u>	<u>12/14/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>235.</u>	<u>12/01/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,174.</u>	<u>11/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>880.</u>	<u>10/27/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,682.</u>	<u>10/13/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>592.</u>	<u>09/15/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,193.</u>	<u>08/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>769.</u>	<u>05/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>639.</u>	<u>05/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>277.</u>	<u>05/19/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>740.</u>	<u>05/12/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>365.</u>	<u>05/12/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>365.</u>	<u>05/05/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>401.</u>	<u>05/05/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>557.</u>	<u>04/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>46.</u>	<u>04/28/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>306.</u>	<u>04/20/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>466.</u>	<u>04/14/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>450.</u>	<u>04/07/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>398.</u>	<u>03/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>874.</u>	<u>03/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>130.</u>	<u>03/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>101.</u>	<u>03/10/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>264.</u>	<u>03/03/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>111.</u>	<u>02/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>196.</u>	<u>02/10/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>176.</u>	<u>02/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>134.</u>	<u>01/27/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>147.</u>	<u>01/20/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>183.</u>	<u>01/13/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>160.</u>	<u>08/18/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>929.</u>	<u>12/15/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>773.</u>	<u>12/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>554.</u>	<u>11/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>649.</u>	<u>11/09/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>297.</u>	<u>11/03/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>355.</u>	<u>10/27/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>394.</u>	<u>10/20/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>352.</u>	<u>10/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>284.</u>	<u>09/22/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>235.</u>	<u>09/15/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>844.</u>	<u>09/15/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>368.</u>	<u>09/08/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>264.</u>	<u>08/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>36.</u>	<u>08/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,278.</u>	<u>05/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>2,892.</u>	<u>05/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>801.</u>	<u>05/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,249.</u>	<u>05/19/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>271.</u>	<u>05/12/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>965.</u>	<u>05/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>238.</u>	<u>04/28/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>114.</u>	<u>04/20/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>489.</u>	<u>04/14/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,121.</u>	<u>04/07/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>319.</u>	<u>04/07/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>668.</u>	<u>03/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>333.</u>	<u>03/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>619.</u>	<u>03/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>306.</u>	<u>03/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,327.</u>	<u>03/10/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>381.</u>	<u>03/10/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>326.</u>	<u>03/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>404.</u>	<u>03/03/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,333.</u>	<u>02/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>421.</u>	<u>02/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>456.</u>	<u>02/10/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>163.</u>	<u>02/03/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>949.</u>	<u>01/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>505.</u>	<u>01/13/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>72.</u>	<u>08/18/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>453.</u>	<u>12/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,526.</u>	<u>12/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>127.</u>	<u>12/08/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>196.</u>	<u>12/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>411.</u>	<u>11/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>417.</u>	<u>10/27/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>368.</u>	<u>10/20/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>189.</u>	<u>10/13/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>336.</u>	<u>10/05/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>342.</u>	<u>09/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>378.</u>	<u>09/22/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>284.</u>	<u>09/09/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>212.</u>	<u>09/01/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>150.</u>	<u>08/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>218.</u>	<u>08/18/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,236.</u>	<u>05/31/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>1,307.</u>	<u>05/25/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>394.</u>	<u>05/19/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>630.</u>	<u>05/12/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>274.</u>	<u>05/05/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>36.</u>	<u>04/28/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>271.</u>	<u>04/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>166.</u>	<u>04/14/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>111.</u>	<u>04/07/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>400.</u>	<u>03/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>303.</u>	<u>03/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>124.</u>	<u>03/10/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>228.</u>	<u>03/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>238.</u>	<u>02/24/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>143.</u>	<u>02/17/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>153.</u>	<u>02/10/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>108.</u>	<u>02/03/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>72.</u>	<u>01/27/23</u>
<u>4</u>	FOOD _____ _____ _____	\$ <u>346.</u>	<u>01/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>4</u>	FOOD _____ _____ _____	\$ <u>218.</u>	<u>08/18/23</u>
<u>5</u>	FOOD _____ _____ _____	\$ <u>8,541.</u>	<u>12/18/23</u>
<u>5</u>	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>12/18/23</u>
<u>5</u>	FOOD _____ _____ _____	\$ <u>14,214.</u>	<u>12/18/23</u>
<u>5</u>	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>12/18/23</u>
<u>5</u>	FOOD _____ _____ _____	\$ <u>10,875.</u>	<u>12/12/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
5	FOOD _____ _____ _____	\$ <u>12,251.</u>	<u>12/06/23</u>
5	FOOD _____ _____ _____	\$ <u>12,621.</u>	<u>11/28/23</u>
5	FOOD _____ _____ _____	\$ <u>5,893.</u>	<u>11/16/23</u>
5	FOOD _____ _____ _____	\$ <u>4,394.</u>	<u>11/01/23</u>
5	FOOD _____ _____ _____	\$ <u>9,783.</u>	<u>10/26/23</u>
5	FOOD _____ _____ _____	\$ <u>5,216.</u>	<u>10/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
5	FOOD _____ _____ _____	\$ <u>5,114.</u>	<u>10/19/23</u>
5	FOOD _____ _____ _____	\$ <u>2,999.</u>	<u>10/11/23</u>
5	FOOD _____ _____ _____	\$ <u>5,627.</u>	<u>10/05/23</u>
5	FOOD _____ _____ _____	\$ <u>11,499.</u>	<u>09/19/23</u>
5	FOOD _____ _____ _____	\$ <u>6,993.</u>	<u>09/16/23</u>
5	FOOD _____ _____ _____	\$ <u>1,304.</u>	<u>09/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
5	FOOD _____ _____ _____	\$ <u>10,432.</u>	<u>08/22/23</u>
5	FOOD _____ _____ _____	\$ <u>17,148.</u>	<u>08/22/23</u>
5	FOOD _____ _____ _____	\$ <u>2,797.</u>	<u>08/18/23</u>
5	FOOD _____ _____ _____	\$ <u>10,572.</u>	<u>08/01/23</u>
5	FOOD _____ _____ _____	\$ <u>2,011.</u>	<u>07/28/23</u>
5	FOOD _____ _____ _____	\$ <u>3,215.</u>	<u>07/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
5	FOOD _____ _____ _____	\$ <u>14,923.</u>	<u>07/21/23</u>
5	FOOD _____ _____ _____	\$ <u>2,527.</u>	<u>07/18/23</u>
5	FOOD _____ _____ _____	\$ <u>1,392.</u>	<u>07/18/23</u>
5	FOOD _____ _____ _____	\$ <u>2,344.</u>	<u>07/13/23</u>
5	FOOD _____ _____ _____	\$ <u>20,091.</u>	<u>06/29/23</u>
5	FOOD _____ _____ _____	\$ <u>0.</u>	<u>06/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
5	FOOD _____ _____ _____	\$ 11,855.	06/23/23
5	FOOD _____ _____ _____	\$ 19,076.	06/21/23
5	FOOD _____ _____ _____	\$ 9,639.	06/20/23
5	FOOD _____ _____ _____	\$ 5,252.	06/15/23
5	FOOD _____ _____ _____	\$ 10,622.	06/09/23
5	FOOD _____ _____ _____	\$ 5,411.	06/07/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
5	FOOD _____ _____ _____	\$ <u>1,910.</u>	<u>06/01/23</u>
5	FOOD _____ _____ _____	\$ <u>13,608.</u>	<u>05/26/23</u>
5	FOOD _____ _____ _____	\$ <u>1,327.</u>	<u>05/25/23</u>
5	FOOD _____ _____ _____	\$ <u>6,259.</u>	<u>05/23/23</u>
5	FOOD _____ _____ _____	\$ <u>9,350.</u>	<u>05/18/23</u>
5	FOOD _____ _____ _____	\$ <u>724.</u>	<u>05/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
5	FOOD _____ _____ _____	\$ <u>4,499.</u>	<u>05/04/23</u>
5	FOOD _____ _____ _____	\$ <u>6,928.</u>	<u>04/28/23</u>
5	FOOD _____ _____ _____	\$ <u>7,120.</u>	<u>04/25/23</u>
5	FOOD _____ _____ _____	\$ <u>6,579.</u>	<u>04/20/23</u>
5	FOOD _____ _____ _____	\$ <u>2,214.</u>	<u>04/17/23</u>
5	FOOD _____ _____ _____	\$ <u>2,331.</u>	<u>04/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
5	FOOD _____ _____ _____	\$ 15,010.	04/06/23
5	FOOD _____ _____ _____	\$ 6,852.	03/23/23
5	FOOD _____ _____ _____	\$ 9,676.	03/21/23
5	FOOD _____ _____ _____	\$ 1,500.	03/13/23
5	FOOD _____ _____ _____	\$ 11,332.	03/08/23
5	FOOD _____ _____ _____	\$ 8,143.	02/23/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
5	FOOD _____ _____ _____	\$ <u>292.</u>	<u>02/21/23</u>
5	FOOD _____ _____ _____	\$ <u>7,540.</u>	<u>02/21/23</u>
5	FOOD _____ _____ _____	\$ <u>3,195.</u>	<u>02/09/23</u>
5	FOOD _____ _____ _____	\$ <u>14,381.</u>	<u>02/09/23</u>
5	FOOD _____ _____ _____	\$ <u>9,894.</u>	<u>02/07/23</u>
5	FOOD _____ _____ _____	\$ <u>10,044.</u>	<u>01/31/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
5	FOOD _____ _____ _____	\$ <u>10,023.</u>	<u>01/26/23</u>
5	FOOD _____ _____ _____	\$ <u>10,983.</u>	<u>01/12/23</u>
5	FOOD _____ _____ _____	\$ <u>4,381.</u>	<u>01/12/23</u>
6	FOOD _____ _____ _____	\$ <u>563.</u>	<u>12/05/23</u>
6	FOOD _____ _____ _____	\$ <u>436.</u>	<u>11/28/23</u>
6	FOOD _____ _____ _____	\$ <u>351.</u>	<u>11/21/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>11/15/23</u>
6	FOOD _____ _____ _____	\$ <u>377.</u>	<u>11/07/23</u>
6	FOOD _____ _____ _____	\$ <u>199.</u>	<u>10/31/23</u>
6	FOOD _____ _____ _____	\$ <u>194.</u>	<u>10/24/23</u>
6	FOOD _____ _____ _____	\$ <u>476.</u>	<u>10/17/23</u>
6	FOOD _____ _____ _____	\$ <u>248.</u>	<u>10/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>309.</u>	<u>10/03/23</u>
6	FOOD _____ _____ _____	\$ <u>398.</u>	<u>09/26/23</u>
6	FOOD _____ _____ _____	\$ <u>3,152.</u>	<u>09/19/23</u>
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>08/29/23</u>
6	FOOD _____ _____ _____	\$ <u>373.</u>	<u>08/22/23</u>
6	FOOD _____ _____ _____	\$ <u>311.</u>	<u>08/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>430.</u>	<u>08/08/23</u>
6	FOOD _____ _____ _____	\$ <u>344.</u>	<u>08/01/23</u>
6	FOOD _____ _____ _____	\$ <u>526.</u>	<u>07/29/23</u>
6	FOOD _____ _____ _____	\$ <u>627.</u>	<u>07/21/23</u>
6	FOOD _____ _____ _____	\$ <u>616.</u>	<u>07/11/23</u>
6	FOOD _____ _____ _____	\$ <u>671.</u>	<u>07/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>505.</u>	<u>06/27/23</u>
6	FOOD _____ _____ _____	\$ <u>446.</u>	<u>06/27/23</u>
6	FOOD _____ _____ _____	\$ <u>233.</u>	<u>06/27/23</u>
6	FOOD _____ _____ _____	\$ <u>460.</u>	<u>06/13/23</u>
6	FOOD _____ _____ _____	\$ <u>233.</u>	<u>06/06/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>05/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>320.</u>	<u>05/27/23</u>
6	FOOD _____ _____ _____	\$ <u>867.</u>	<u>05/22/23</u>
6	FOOD _____ _____ _____	\$ <u>392.</u>	<u>05/10/23</u>
6	FOOD _____ _____ _____	\$ <u>520.</u>	<u>05/05/23</u>
6	FOOD _____ _____ _____	\$ <u>288.</u>	<u>05/01/23</u>
6	FOOD _____ _____ _____	\$ <u>474.</u>	<u>04/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>132.</u>	<u>04/12/23</u>
6	FOOD _____ _____ _____	\$ <u>355.</u>	<u>03/31/23</u>
6	FOOD _____ _____ _____	\$ <u>560.</u>	<u>03/15/23</u>
6	FOOD _____ _____ _____	\$ <u>776.</u>	<u>03/14/23</u>
6	FOOD _____ _____ _____	\$ <u>563.</u>	<u>03/14/23</u>
6	FOOD _____ _____ _____	\$ <u>181.</u>	<u>02/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>472.</u>	<u>02/10/23</u>
6	FOOD _____ _____ _____	\$ <u>771.</u>	<u>02/10/23</u>
6	FOOD _____ _____ _____	\$ <u>269.</u>	<u>01/24/23</u>
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>01/17/23</u>
6	FOOD _____ _____ _____	\$ <u>201.</u>	<u>01/09/23</u>
6	FOOD _____ _____ _____	\$ <u>1,001.</u>	<u>12/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>264.</u>	<u>12/06/23</u>
6	FOOD _____ _____ _____	\$ <u>222.</u>	<u>11/28/23</u>
6	FOOD _____ _____ _____	\$ <u>277.</u>	<u>11/14/23</u>
6	FOOD _____ _____ _____	\$ <u>598.</u>	<u>10/31/23</u>
6	FOOD _____ _____ _____	\$ <u>564.</u>	<u>10/17/23</u>
6	FOOD _____ _____ _____	\$ <u>196.</u>	<u>10/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>212.</u>	<u>10/11/23</u>
6	FOOD _____ _____ _____	\$ <u>610.</u>	<u>10/03/23</u>
6	FOOD _____ _____ _____	\$ <u>334.</u>	<u>09/19/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>09/13/23</u>
6	FOOD _____ _____ _____	\$ <u>365.</u>	<u>08/29/23</u>
6	FOOD _____ _____ _____	\$ <u>222.</u>	<u>08/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>430.</u>	<u>08/01/23</u>
6	FOOD _____ _____ _____	\$ <u>356.</u>	<u>07/18/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>07/05/23</u>
6	FOOD _____ _____ _____	\$ <u>491.</u>	<u>06/22/23</u>
6	FOOD _____ _____ _____	\$ <u>414.</u>	<u>06/13/23</u>
6	FOOD _____ _____ _____	\$ <u>114.</u>	<u>05/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>05/16/23</u>
6	FOOD _____ _____ _____	\$ <u>1,029.</u>	<u>05/02/23</u>
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>04/18/23</u>
6	FOOD _____ _____ _____	\$ <u>434.</u>	<u>04/11/23</u>
6	FOOD _____ _____ _____	\$ <u>538.</u>	<u>04/04/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>03/21/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 378.	03/07/23
6	FOOD _____ _____ _____	\$ 359.	02/28/23
6	FOOD _____ _____ _____	\$ 179.	02/21/23
6	FOOD _____ _____ _____	\$ 359.	02/14/23
6	FOOD _____ _____ _____	\$ 280.	02/07/23
6	FOOD _____ _____ _____	\$ 398.	01/31/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>460.</u>	<u>01/24/23</u>
6	FOOD _____ _____ _____	\$ <u>424.</u>	<u>01/18/23</u>
6	FOOD _____ _____ _____	\$ <u>570.</u>	<u>01/10/23</u>
6	FOOD _____ _____ _____	\$ <u>215.</u>	<u>01/03/23</u>
6	FOOD _____ _____ _____	\$ <u>1,184.</u>	<u>12/31/23</u>
6	FOOD _____ _____ _____	\$ <u>4,178.</u>	<u>12/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>1,092.</u>	<u>12/29/23</u>
6	FOOD _____ _____ _____	\$ <u>250.</u>	<u>12/28/23</u>
6	FOOD _____ _____ _____	\$ <u>720.</u>	<u>12/28/23</u>
6	FOOD _____ _____ _____	\$ <u>665.</u>	<u>12/24/23</u>
6	FOOD _____ _____ _____	\$ <u>2,821.</u>	<u>12/24/23</u>
6	FOOD _____ _____ _____	\$ <u>2,615.</u>	<u>12/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>1,128.</u>	<u>12/22/23</u>
6	FOOD _____ _____ _____	\$ <u>682.</u>	<u>12/21/23</u>
6	FOOD _____ _____ _____	\$ <u>654.</u>	<u>12/21/23</u>
6	FOOD _____ _____ _____	\$ <u>170.</u>	<u>12/18/23</u>
6	FOOD _____ _____ _____	\$ <u>777.</u>	<u>12/17/23</u>
6	FOOD _____ _____ _____	\$ <u>1,285.</u>	<u>12/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>259.</u>	<u>12/15/23</u>
6	FOOD _____ _____ _____	\$ <u>626.</u>	<u>12/15/23</u>
6	FOOD _____ _____ _____	\$ <u>811.</u>	<u>12/14/23</u>
6	FOOD _____ _____ _____	\$ <u>1,366.</u>	<u>12/10/23</u>
6	FOOD _____ _____ _____	\$ <u>815.</u>	<u>12/10/23</u>
6	FOOD _____ _____ _____	\$ <u>661.</u>	<u>12/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>365.</u>	<u>12/07/23</u>
6	FOOD _____ _____ _____	\$ <u>635.</u>	<u>12/04/23</u>
6	FOOD _____ _____ _____	\$ <u>499.</u>	<u>12/03/23</u>
6	FOOD _____ _____ _____	\$ <u>936.</u>	<u>12/02/23</u>
6	FOOD _____ _____ _____	\$ <u>475.</u>	<u>12/01/23</u>
6	FOOD _____ _____ _____	\$ <u>382.</u>	<u>11/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>825.</u>	<u>11/30/23</u>
6	FOOD _____ _____ _____	\$ <u>59.</u>	<u>11/30/23</u>
6	FOOD _____ _____ _____	\$ <u>599.</u>	<u>11/27/23</u>
6	FOOD _____ _____ _____	\$ <u>763.</u>	<u>11/26/23</u>
6	FOOD _____ _____ _____	\$ <u>2,566.</u>	<u>11/25/23</u>
6	FOOD _____ _____ _____	\$ <u>906.</u>	<u>11/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>757.</u>	<u>11/20/23</u>
6	FOOD _____ _____ _____	\$ <u>1,434.</u>	<u>11/19/23</u>
6	FOOD _____ _____ _____	\$ <u>1,337.</u>	<u>11/19/23</u>
6	FOOD _____ _____ _____	\$ <u>537.</u>	<u>11/18/23</u>
6	FOOD _____ _____ _____	\$ <u>499.</u>	<u>11/17/23</u>
6	FOOD _____ _____ _____	\$ <u>625.</u>	<u>11/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>533.</u>	<u>11/16/23</u>
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>11/13/23</u>
6	FOOD _____ _____ _____	\$ <u>757.</u>	<u>11/11/23</u>
6	FOOD _____ _____ _____	\$ <u>763.</u>	<u>11/10/23</u>
6	FOOD _____ _____ _____	\$ <u>487.</u>	<u>11/06/23</u>
6	FOOD _____ _____ _____	\$ <u>1,105.</u>	<u>11/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>910.</u>	<u>11/04/23</u>
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>11/03/23</u>
6	FOOD _____ _____ _____	\$ <u>1,141.</u>	<u>11/03/23</u>
6	FOOD _____ _____ _____	\$ <u>1,011.</u>	<u>11/02/23</u>
6	FOOD _____ _____ _____	\$ <u>242.</u>	<u>10/30/23</u>
6	FOOD _____ _____ _____	\$ <u>805.</u>	<u>10/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>756.</u>	<u>10/28/23</u>
6	FOOD _____ _____ _____	\$ <u>1,249.</u>	<u>10/27/23</u>
6	FOOD _____ _____ _____	\$ <u>779.</u>	<u>10/26/23</u>
6	FOOD _____ _____ _____	\$ <u>450.</u>	<u>10/23/23</u>
6	FOOD _____ _____ _____	\$ <u>42.</u>	<u>10/23/23</u>
6	FOOD _____ _____ _____	\$ <u>590.</u>	<u>10/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>681.</u>	<u>10/21/23</u>
6	FOOD _____ _____ _____	\$ <u>49.</u>	<u>10/20/23</u>
6	FOOD _____ _____ _____	\$ <u>926.</u>	<u>10/20/23</u>
6	FOOD _____ _____ _____	\$ <u>587.</u>	<u>10/19/23</u>
6	FOOD _____ _____ _____	\$ <u>421.</u>	<u>10/16/23</u>
6	FOOD _____ _____ _____	\$ <u>792.</u>	<u>10/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>720.</u>	<u>10/14/23</u>
6	FOOD _____ _____ _____	\$ <u>626.</u>	<u>10/13/23</u>
6	FOOD _____ _____ _____	\$ <u>251.</u>	<u>10/12/23</u>
6	FOOD _____ _____ _____	\$ <u>469.</u>	<u>10/09/23</u>
6	FOOD _____ _____ _____	\$ <u>854.</u>	<u>10/07/23</u>
6	FOOD _____ _____ _____	\$ <u>659.</u>	<u>10/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>831.</u>	<u>10/05/23</u>
6	FOOD _____ _____ _____	\$ <u>482.</u>	<u>10/02/23</u>
6	FOOD _____ _____ _____	\$ <u>760.</u>	<u>10/01/23</u>
6	FOOD _____ _____ _____	\$ <u>1,079.</u>	<u>09/29/23</u>
6	FOOD _____ _____ _____	\$ <u>568.</u>	<u>09/25/23</u>
6	FOOD _____ _____ _____	\$ <u>1,317.</u>	<u>09/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>528.</u>	<u>09/24/23</u>
6	FOOD _____ _____ _____	\$ <u>613.</u>	<u>09/23/23</u>
6	FOOD _____ _____ _____	\$ <u>528.</u>	<u>09/22/23</u>
6	FOOD _____ _____ _____	\$ <u>872.</u>	<u>09/18/23</u>
6	FOOD _____ _____ _____	\$ <u>1,079.</u>	<u>09/16/23</u>
6	FOOD _____ _____ _____	\$ <u>544.</u>	<u>09/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>637.</u>	<u>09/14/23</u>
6	FOOD _____ _____ _____	\$ <u>743.</u>	<u>09/09/23</u>
6	FOOD _____ _____ _____	\$ <u>1,043.</u>	<u>09/08/23</u>
6	FOOD _____ _____ _____	\$ <u>505.</u>	<u>09/07/23</u>
6	FOOD _____ _____ _____	\$ <u>432.</u>	<u>09/04/23</u>
6	FOOD _____ _____ _____	\$ <u>808.</u>	<u>09/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>629.</u>	<u>09/02/23</u>
6	FOOD _____ _____ _____	\$ <u>1,040.</u>	<u>09/01/23</u>
6	FOOD _____ _____ _____	\$ <u>604.</u>	<u>08/31/23</u>
6	FOOD _____ _____ _____	\$ <u>410.</u>	<u>08/28/23</u>
6	FOOD _____ _____ _____	\$ <u>616.</u>	<u>08/27/23</u>
6	FOOD _____ _____ _____	\$ <u>737.</u>	<u>08/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>1,065.</u>	<u>08/25/23</u>
6	FOOD _____ _____ _____	\$ <u>632.</u>	<u>08/24/23</u>
6	FOOD _____ _____ _____	\$ <u>584.</u>	<u>08/21/23</u>
6	FOOD _____ _____ _____	\$ <u>505.</u>	<u>08/20/23</u>
6	FOOD _____ _____ _____	\$ <u>365.</u>	<u>08/19/23</u>
6	FOOD _____ _____ _____	\$ <u>965.</u>	<u>08/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 599.	08/18/23
6	FOOD _____ _____ _____	\$ 427.	08/17/23
6	FOOD _____ _____ _____	\$ 683.	08/14/23
6	FOOD _____ _____ _____	\$ 737.	08/13/23
6	FOOD _____ _____ _____	\$ 557.	08/12/23
6	FOOD _____ _____ _____	\$ 359.	08/11/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>389.</u>	<u>08/10/23</u>
6	FOOD _____ _____ _____	\$ <u>424.</u>	<u>08/07/23</u>
6	FOOD _____ _____ _____	\$ <u>408.</u>	<u>08/06/23</u>
6	FOOD _____ _____ _____	\$ <u>14,007.</u>	<u>08/04/23</u>
6	FOOD _____ _____ _____	\$ <u>502.</u>	<u>08/03/23</u>
6	FOOD _____ _____ _____	\$ <u>841.</u>	<u>07/31/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>773.</u>	<u>07/30/23</u>
6	FOOD _____ _____ _____	\$ <u>615.</u>	<u>07/29/23</u>
6	FOOD _____ _____ _____	\$ <u>685.</u>	<u>07/28/23</u>
6	FOOD _____ _____ _____	\$ <u>557.</u>	<u>07/27/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>07/24/23</u>
6	FOOD _____ _____ _____	\$ <u>701.</u>	<u>07/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>1,001.</u>	<u>07/22/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>07/21/23</u>
6	FOOD _____ _____ _____	\$ <u>763.</u>	<u>07/21/23</u>
6	FOOD _____ _____ _____	\$ <u>480.</u>	<u>07/20/23</u>
6	FOOD _____ _____ _____	\$ <u>456.</u>	<u>07/17/23</u>
6	FOOD _____ _____ _____	\$ <u>567.</u>	<u>07/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>424.</u>	<u>07/15/23</u>
6	FOOD _____ _____ _____	\$ <u>940.</u>	<u>07/14/23</u>
6	FOOD _____ _____ _____	\$ <u>548.</u>	<u>07/13/23</u>
6	FOOD _____ _____ _____	\$ <u>631.</u>	<u>07/10/23</u>
6	FOOD _____ _____ _____	\$ <u>766.</u>	<u>07/09/23</u>
6	FOOD _____ _____ _____	\$ <u>587.</u>	<u>07/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>810.</u>	<u>07/07/23</u>
6	FOOD _____ _____ _____	\$ <u>0.</u>	<u>07/06/23</u>
6	FOOD _____ _____ _____	\$ <u>346.</u>	<u>07/03/23</u>
6	FOOD _____ _____ _____	\$ <u>1,148.</u>	<u>07/02/23</u>
6	FOOD _____ _____ _____	\$ <u>991.</u>	<u>07/01/23</u>
6	FOOD _____ _____ _____	\$ <u>869.</u>	<u>06/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>492.</u>	<u>06/26/23</u>
6	FOOD _____ _____ _____	\$ <u>580.</u>	<u>06/25/23</u>
6	FOOD _____ _____ _____	\$ <u>678.</u>	<u>06/23/23</u>
6	FOOD _____ _____ _____	\$ <u>861.</u>	<u>06/19/23</u>
6	FOOD _____ _____ _____	\$ <u>424.</u>	<u>06/18/23</u>
6	FOOD _____ _____ _____	\$ <u>681.</u>	<u>06/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>1,120.</u>	<u>06/16/23</u>
6	FOOD _____ _____ _____	\$ <u>495.</u>	<u>06/15/23</u>
6	FOOD _____ _____ _____	\$ <u>665.</u>	<u>06/11/23</u>
6	FOOD _____ _____ _____	\$ <u>479.</u>	<u>06/10/23</u>
6	FOOD _____ _____ _____	\$ <u>670.</u>	<u>06/09/23</u>
6	FOOD _____ _____ _____	\$ <u>726.</u>	<u>06/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>548.</u>	<u>06/05/23</u>
6	FOOD _____ _____ _____	\$ <u>730.</u>	<u>06/04/23</u>
6	FOOD _____ _____ _____	\$ <u>39.</u>	<u>06/03/23</u>
6	FOOD _____ _____ _____	\$ <u>495.</u>	<u>06/03/23</u>
6	FOOD _____ _____ _____	\$ <u>748.</u>	<u>06/02/23</u>
6	FOOD _____ _____ _____	\$ <u>734.</u>	<u>06/01/23</u>

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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
6	FOOD _____ _____ _____	\$ <u>578.</u>	<u>05/29/23</u>
6	FOOD _____ _____ _____	\$ <u>760.</u>	<u>05/28/23</u>
6	FOOD _____ _____ _____	\$ <u>528.</u>	<u>05/27/23</u>
6	FOOD _____ _____ _____	\$ <u>829.</u>	<u>05/26/23</u>
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>05/25/23</u>
6	FOOD _____ _____ _____	\$ <u>434.</u>	<u>05/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>937.</u>	<u>05/22/23</u>
6	FOOD _____ _____ _____	\$ <u>616.</u>	<u>05/21/23</u>
6	FOOD _____ _____ _____	\$ <u>832.</u>	<u>05/20/23</u>
6	FOOD _____ _____ _____	\$ <u>355.</u>	<u>05/19/23</u>
6	FOOD _____ _____ _____	\$ <u>355.</u>	<u>05/18/23</u>
6	FOOD _____ _____ _____	\$ <u>795.</u>	<u>05/15/23</u>

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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
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>05/14/23</u>
6	FOOD _____ _____ _____	\$ <u>492.</u>	<u>05/13/23</u>
6	FOOD _____ _____ _____	\$ <u>398.</u>	<u>05/12/23</u>
6	FOOD _____ _____ _____	\$ <u>333.</u>	<u>05/11/23</u>
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>05/08/23</u>
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>05/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 372.	05/06/23
6	FOOD _____ _____ _____	\$ 681.	05/05/23
6	FOOD _____ _____ _____	\$ 1,257.	05/04/23
6	FOOD _____ _____ _____	\$ 711.	05/01/23
6	FOOD _____ _____ _____	\$ 505.	04/30/23
6	FOOD _____ _____ _____	\$ 632.	04/29/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>916.</u>	<u>04/28/23</u>
6	FOOD _____ _____ _____	\$ <u>515.</u>	<u>04/27/23</u>
6	FOOD _____ _____ _____	\$ <u>82.</u>	<u>04/25/23</u>
6	FOOD _____ _____ _____	\$ <u>993.</u>	<u>04/24/23</u>
6	FOOD _____ _____ _____	\$ <u>579.</u>	<u>04/22/23</u>
6	FOOD _____ _____ _____	\$ <u>508.</u>	<u>04/21/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>293.</u>	<u>04/20/23</u>
6	FOOD _____ _____ _____	\$ <u>710.</u>	<u>04/17/23</u>
6	FOOD _____ _____ _____	\$ <u>538.</u>	<u>04/16/23</u>
6	FOOD _____ _____ _____	\$ <u>1,164.</u>	<u>04/15/23</u>
6	FOOD _____ _____ _____	\$ <u>975.</u>	<u>04/14/23</u>
6	FOOD _____ _____ _____	\$ <u>1,014.</u>	<u>04/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>590.</u>	<u>04/09/23</u>
6	FOOD _____ _____ _____	\$ <u>659.</u>	<u>04/08/23</u>
6	FOOD _____ _____ _____	\$ <u>544.</u>	<u>04/07/23</u>
6	FOOD _____ _____ _____	\$ <u>622.</u>	<u>04/06/23</u>
6	FOOD _____ _____ _____	\$ <u>975.</u>	<u>04/03/23</u>
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>04/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>479.</u>	<u>03/30/23</u>
6	FOOD _____ _____ _____	\$ <u>538.</u>	<u>03/27/23</u>
6	FOOD _____ _____ _____	\$ <u>365.</u>	<u>03/26/23</u>
6	FOOD _____ _____ _____	\$ <u>698.</u>	<u>03/24/23</u>
6	FOOD _____ _____ _____	\$ <u>375.</u>	<u>03/23/23</u>
6	FOOD _____ _____ _____	\$ <u>760.</u>	<u>03/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>03/19/23</u>
6	FOOD _____ _____ _____	\$ <u>643.</u>	<u>03/18/23</u>
6	FOOD _____ _____ _____	\$ <u>474.</u>	<u>03/17/23</u>
6	FOOD _____ _____ _____	\$ <u>89.</u>	<u>03/16/23</u>
6	FOOD _____ _____ _____	\$ <u>396.</u>	<u>03/16/23</u>
6	FOOD _____ _____ _____	\$ <u>117.</u>	<u>03/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>1,558.</u>	<u>03/13/23</u>
6	FOOD _____ _____ _____	\$ <u>387.</u>	<u>03/11/23</u>
6	FOOD _____ _____ _____	\$ <u>518.</u>	<u>03/09/23</u>
6	FOOD _____ _____ _____	\$ <u>414.</u>	<u>03/06/23</u>
6	FOOD _____ _____ _____	\$ <u>615.</u>	<u>03/04/23</u>
6	FOOD _____ _____ _____	\$ <u>440.</u>	<u>03/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>818.</u>	<u>03/02/23</u>
6	FOOD _____ _____ _____	\$ <u>3.</u>	<u>02/28/23</u>
6	FOOD _____ _____ _____	\$ <u>247.</u>	<u>02/27/23</u>
6	FOOD _____ _____ _____	\$ <u>365.</u>	<u>02/26/23</u>
6	FOOD _____ _____ _____	\$ <u>437.</u>	<u>02/25/23</u>
6	FOOD _____ _____ _____	\$ <u>600.</u>	<u>02/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>438.</u>	<u>02/23/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>02/21/23</u>
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>02/20/23</u>
6	FOOD _____ _____ _____	\$ <u>587.</u>	<u>02/19/23</u>
6	FOOD _____ _____ _____	\$ <u>502.</u>	<u>02/19/23</u>
6	FOOD _____ _____ _____	\$ <u>394.</u>	<u>02/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 238.	02/17/23
6	FOOD _____ _____ _____	\$ 300.	02/16/23
6	FOOD _____ _____ _____	\$ 374.	02/13/23
6	FOOD _____ _____ _____	\$ 0.	02/12/23
6	FOOD _____ _____ _____	\$ 359.	02/11/23
6	FOOD _____ _____ _____	\$ 750.	02/10/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>463.</u>	<u>02/10/23</u>
6	FOOD _____ _____ _____	\$ <u>593.</u>	<u>02/09/23</u>
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>02/09/23</u>
6	FOOD _____ _____ _____	\$ <u>62.</u>	<u>02/07/23</u>
6	FOOD _____ _____ _____	\$ <u>360.</u>	<u>02/06/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>02/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>494.</u>	<u>02/04/23</u>
6	FOOD _____ _____ _____	\$ <u>388.</u>	<u>02/03/23</u>
6	FOOD _____ _____ _____	\$ <u>516.</u>	<u>02/03/23</u>
6	FOOD _____ _____ _____	\$ <u>616.</u>	<u>02/02/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>02/02/23</u>
6	FOOD _____ _____ _____	\$ <u>49.</u>	<u>01/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>496.</u>	<u>01/30/23</u>
6	FOOD _____ _____ _____	\$ <u>333.</u>	<u>01/29/23</u>
6	FOOD _____ _____ _____	\$ <u>346.</u>	<u>01/28/23</u>
6	FOOD _____ _____ _____	\$ <u>923.</u>	<u>01/27/23</u>
6	FOOD _____ _____ _____	\$ <u>365.</u>	<u>01/27/23</u>
6	FOOD _____ _____ _____	\$ <u>65.</u>	<u>01/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>557.</u>	<u>01/26/23</u>
6	FOOD _____ _____ _____	\$ <u>509.</u>	<u>01/24/23</u>
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>01/23/23</u>
6	FOOD _____ _____ _____	\$ <u>414.</u>	<u>01/22/23</u>
6	FOOD _____ _____ _____	\$ <u>675.</u>	<u>01/21/23</u>
6	FOOD _____ _____ _____	\$ <u>0.</u>	<u>01/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>01/20/23</u>
6	FOOD _____ _____ _____	\$ <u>516.</u>	<u>01/19/23</u>
6	FOOD _____ _____ _____	\$ <u>1,167.</u>	<u>01/19/23</u>
6	FOOD _____ _____ _____	\$ <u>1,037.</u>	<u>01/17/23</u>
6	FOOD _____ _____ _____	\$ <u>13.</u>	<u>01/16/23</u>
6	FOOD _____ _____ _____	\$ <u>349.</u>	<u>01/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>414.</u>	<u>01/14/23</u>
6	FOOD _____ _____ _____	\$ <u>484.</u>	<u>01/13/23</u>
6	FOOD _____ _____ _____	\$ <u>82.</u>	<u>01/12/23</u>
6	FOOD _____ _____ _____	\$ <u>740.</u>	<u>01/12/23</u>
6	FOOD _____ _____ _____	\$ <u>307.</u>	<u>01/10/23</u>
6	FOOD _____ _____ _____	\$ <u>29.</u>	<u>01/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>1,318.</u>	<u>01/09/23</u>
6	FOOD _____ _____ _____	\$ <u>512.</u>	<u>01/08/23</u>
6	FOOD _____ _____ _____	\$ <u>317.</u>	<u>01/07/23</u>
6	FOOD _____ _____ _____	\$ <u>447.</u>	<u>01/06/23</u>
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>01/05/23</u>
6	FOOD _____ _____ _____	\$ <u>564.</u>	<u>01/02/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>01/01/23</u>
6	FOOD _____ _____ _____	\$ <u>450.</u>	<u>12/29/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>12/22/23</u>
6	FOOD _____ _____ _____	\$ <u>421.</u>	<u>12/21/23</u>
6	FOOD _____ _____ _____	\$ <u>538.</u>	<u>12/15/23</u>
6	FOOD _____ _____ _____	\$ <u>541.</u>	<u>12/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>12/08/23</u>
6	FOOD _____ _____ _____	\$ <u>375.</u>	<u>12/07/23</u>
6	FOOD _____ _____ _____	\$ <u>437.</u>	<u>12/01/23</u>
6	FOOD _____ _____ _____	\$ <u>469.</u>	<u>11/30/23</u>
6	FOOD _____ _____ _____	\$ <u>1,089.</u>	<u>11/24/23</u>
6	FOOD _____ _____ _____	\$ <u>603.</u>	<u>11/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>11/16/23</u>
6	FOOD _____ _____ _____	\$ <u>375.</u>	<u>11/10/23</u>
6	FOOD _____ _____ _____	\$ <u>1,832.</u>	<u>11/09/23</u>
6	FOOD _____ _____ _____	\$ <u>437.</u>	<u>10/27/23</u>
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>10/19/23</u>
6	FOOD _____ _____ _____	\$ <u>492.</u>	<u>10/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>476.</u>	<u>10/12/23</u>
6	FOOD _____ _____ _____	\$ <u>593.</u>	<u>10/06/23</u>
6	FOOD _____ _____ _____	\$ <u>486.</u>	<u>10/05/23</u>
6	FOOD _____ _____ _____	\$ <u>421.</u>	<u>10/02/23</u>
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>09/28/23</u>
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>09/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>09/21/23</u>
6	FOOD _____ _____ _____	\$ <u>153.</u>	<u>09/15/23</u>
6	FOOD _____ _____ _____	\$ <u>293.</u>	<u>09/14/23</u>
6	FOOD _____ _____ _____	\$ <u>675.</u>	<u>09/08/23</u>
6	FOOD _____ _____ _____	\$ <u>427.</u>	<u>09/07/23</u>
6	FOOD _____ _____ _____	\$ <u>482.</u>	<u>09/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>469.</u>	<u>08/31/23</u>
6	FOOD _____ _____ _____	\$ <u>623.</u>	<u>08/25/23</u>
6	FOOD _____ _____ _____	\$ <u>346.</u>	<u>08/18/23</u>
6	FOOD _____ _____ _____	\$ <u>277.</u>	<u>08/17/23</u>
6	FOOD _____ _____ _____	\$ <u>310.</u>	<u>08/11/23</u>
6	FOOD _____ _____ _____	\$ <u>434.</u>	<u>08/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>375.</u>	<u>08/04/23</u>
6	FOOD _____ _____ _____	\$ <u>398.</u>	<u>08/03/23</u>
6	FOOD _____ _____ _____	\$ <u>254.</u>	<u>07/28/23</u>
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>07/27/23</u>
6	FOOD _____ _____ _____	\$ <u>248.</u>	<u>07/21/23</u>
6	FOOD _____ _____ _____	\$ <u>267.</u>	<u>07/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>342.</u>	<u>07/14/23</u>
6	FOOD _____ _____ _____	\$ <u>254.</u>	<u>07/13/23</u>
6	FOOD _____ _____ _____	\$ <u>339.</u>	<u>07/07/23</u>
6	FOOD _____ _____ _____	\$ <u>619.</u>	<u>07/06/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>06/30/23</u>
6	FOOD _____ _____ _____	\$ <u>368.</u>	<u>06/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>773.</u>	<u>06/23/23</u>
6	FOOD _____ _____ _____	\$ <u>574.</u>	<u>06/22/23</u>
6	FOOD _____ _____ _____	\$ <u>267.</u>	<u>06/16/23</u>
6	FOOD _____ _____ _____	\$ <u>381.</u>	<u>06/15/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>06/10/23</u>
6	FOOD _____ _____ _____	\$ <u>411.</u>	<u>06/02/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>456.</u>	<u>06/01/23</u>
6	FOOD _____ _____ _____	\$ <u>333.</u>	<u>05/26/23</u>
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>05/25/23</u>
6	FOOD _____ _____ _____	\$ <u>499.</u>	<u>05/21/23</u>
6	FOOD _____ _____ _____	\$ <u>342.</u>	<u>05/19/23</u>
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>05/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>388.</u>	<u>05/16/23</u>
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>05/12/23</u>
6	FOOD _____ _____ _____	\$ <u>473.</u>	<u>05/05/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>05/04/23</u>
6	FOOD _____ _____ _____	\$ <u>411.</u>	<u>04/28/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>04/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>629.</u>	<u>04/21/23</u>
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>04/20/23</u>
6	FOOD _____ _____ _____	\$ <u>293.</u>	<u>04/14/23</u>
6	FOOD _____ _____ _____	\$ <u>375.</u>	<u>04/14/23</u>
6	FOOD _____ _____ _____	\$ <u>385.</u>	<u>04/07/23</u>
6	FOOD _____ _____ _____	\$ <u>456.</u>	<u>04/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>509.</u>	<u>03/31/23</u>
6	FOOD _____ _____ _____	\$ <u>261.</u>	<u>03/30/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>03/24/23</u>
6	FOOD _____ _____ _____	\$ <u>482.</u>	<u>03/23/23</u>
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>03/16/23</u>
6	FOOD _____ _____ _____	\$ <u>747.</u>	<u>03/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>03/09/23</u>
6	FOOD _____ _____ _____	\$ <u>381.</u>	<u>03/04/23</u>
6	FOOD _____ _____ _____	\$ <u>342.</u>	<u>03/03/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>02/24/23</u>
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>02/23/23</u>
6	FOOD _____ _____ _____	\$ <u>196.</u>	<u>02/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 306.	02/16/23
6	FOOD _____ _____ _____	\$ 183.	02/10/23
6	FOOD _____ _____ _____	\$ 333.	02/09/23
6	FOOD _____ _____ _____	\$ 264.	02/08/23
6	FOOD _____ _____ _____	\$ 486.	02/03/23
6	FOOD _____ _____ _____	\$ 365.	01/27/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>336.</u>	<u>01/26/23</u>
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>01/20/23</u>
6	FOOD _____ _____ _____	\$ <u>548.</u>	<u>01/19/23</u>
6	FOOD _____ _____ _____	\$ <u>799.</u>	<u>01/13/23</u>
6	FOOD _____ _____ _____	\$ <u>264.</u>	<u>01/06/23</u>
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>12/31/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>854.</u>	<u>12/30/23</u>
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>12/29/23</u>
6	FOOD _____ _____ _____	\$ <u>1,216.</u>	<u>12/28/23</u>
6	FOOD _____ _____ _____	\$ <u>124.</u>	<u>12/27/23</u>
6	FOOD _____ _____ _____	\$ <u>499.</u>	<u>12/24/23</u>
6	FOOD _____ _____ _____	\$ <u>319.</u>	<u>12/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>267.</u>	<u>12/23/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>12/22/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>12/21/23</u>
6	FOOD _____ _____ _____	\$ <u>342.</u>	<u>12/20/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>12/19/23</u>
6	FOOD _____ _____ _____	\$ <u>1,980.</u>	<u>12/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>385.</u>	<u>12/16/23</u>
6	FOOD _____ _____ _____	\$ <u>512.</u>	<u>12/15/23</u>
6	FOOD _____ _____ _____	\$ <u>479.</u>	<u>12/14/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>12/13/23</u>
6	FOOD _____ _____ _____	\$ <u>365.</u>	<u>12/12/23</u>
6	FOOD _____ _____ _____	\$ <u>362.</u>	<u>12/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>362.</u>	<u>12/10/23</u>
6	FOOD _____ _____ _____	\$ <u>225.</u>	<u>12/09/23</u>
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>12/08/23</u>
6	FOOD _____ _____ _____	\$ <u>309.</u>	<u>12/07/23</u>
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>12/06/23</u>
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>12/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>512.</u>	<u>12/04/23</u>
6	FOOD _____ _____ _____	\$ <u>430.</u>	<u>12/03/23</u>
6	FOOD _____ _____ _____	\$ <u>349.</u>	<u>12/02/23</u>
6	FOOD _____ _____ _____	\$ <u>456.</u>	<u>12/01/23</u>
6	FOOD _____ _____ _____	\$ <u>336.</u>	<u>11/30/23</u>
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>11/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>212.</u>	<u>11/28/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>11/27/23</u>
6	FOOD _____ _____ _____	\$ <u>430.</u>	<u>11/26/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>11/25/23</u>
6	FOOD _____ _____ _____	\$ <u>476.</u>	<u>11/24/23</u>
6	FOOD _____ _____ _____	\$ <u>441.</u>	<u>11/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>394.</u>	<u>11/22/23</u>
6	FOOD _____ _____ _____	\$ <u>505.</u>	<u>11/21/23</u>
6	FOOD _____ _____ _____	\$ <u>245.</u>	<u>11/20/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>11/19/23</u>
6	FOOD _____ _____ _____	\$ <u>411.</u>	<u>11/18/23</u>
6	FOOD _____ _____ _____	\$ <u>248.</u>	<u>11/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>11/16/23</u>
6	FOOD _____ _____ _____	\$ <u>349.</u>	<u>11/15/23</u>
6	FOOD _____ _____ _____	\$ <u>306.</u>	<u>11/14/23</u>
6	FOOD _____ _____ _____	\$ <u>443.</u>	<u>11/13/23</u>
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>11/12/23</u>
6	FOOD _____ _____ _____	\$ <u>212.</u>	<u>11/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>11/09/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>11/08/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>11/07/23</u>
6	FOOD _____ _____ _____	\$ <u>218.</u>	<u>11/06/23</u>
6	FOOD _____ _____ _____	\$ <u>466.</u>	<u>11/05/23</u>
6	FOOD _____ _____ _____	\$ <u>368.</u>	<u>11/04/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>11/03/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>11/02/23</u>
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>11/01/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>10/31/23</u>
6	FOOD _____ _____ _____	\$ <u>316.</u>	<u>10/30/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>10/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>381.</u>	<u>10/28/23</u>
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>10/27/23</u>
6	FOOD _____ _____ _____	\$ <u>336.</u>	<u>10/26/23</u>
6	FOOD _____ _____ _____	\$ <u>319.</u>	<u>10/25/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>10/24/23</u>
6	FOOD _____ _____ _____	\$ <u>365.</u>	<u>10/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>10/21/23</u>
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>10/19/23</u>
6	FOOD _____ _____ _____	\$ <u>261.</u>	<u>10/18/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>10/17/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>10/16/23</u>
6	FOOD _____ _____ _____	\$ <u>238.</u>	<u>10/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>316.</u>	<u>10/14/23</u>
6	FOOD _____ _____ _____	\$ <u>254.</u>	<u>10/13/23</u>
6	FOOD _____ _____ _____	\$ <u>186.</u>	<u>10/12/23</u>
6	FOOD _____ _____ _____	\$ <u>496.</u>	<u>10/10/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>10/09/23</u>
6	FOOD _____ _____ _____	\$ <u>254.</u>	<u>10/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>10/07/23</u>
6	FOOD _____ _____ _____	\$ <u>251.</u>	<u>10/06/23</u>
6	FOOD _____ _____ _____	\$ <u>293.</u>	<u>10/05/23</u>
6	FOOD _____ _____ _____	\$ <u>381.</u>	<u>10/03/23</u>
6	FOOD _____ _____ _____	\$ <u>163.</u>	<u>10/02/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>10/01/23</u>

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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
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>09/30/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>09/29/23</u>
6	FOOD _____ _____ _____	\$ <u>215.</u>	<u>09/28/23</u>
6	FOOD _____ _____ _____	\$ <u>417.</u>	<u>09/27/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>09/26/23</u>
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>09/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>192.</u>	<u>09/24/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>09/23/23</u>
6	FOOD _____ _____ _____	\$ <u>196.</u>	<u>09/22/23</u>
6	FOOD _____ _____ _____	\$ <u>375.</u>	<u>09/21/23</u>
6	FOOD _____ _____ _____	\$ <u>199.</u>	<u>09/20/23</u>
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>09/19/23</u>

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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
6	FOOD _____ _____ _____	\$ <u>231.</u>	<u>09/18/23</u>
6	FOOD _____ _____ _____	\$ <u>427.</u>	<u>09/17/23</u>
6	FOOD _____ _____ _____	\$ <u>248.</u>	<u>09/16/23</u>
6	FOOD _____ _____ _____	\$ <u>254.</u>	<u>09/15/23</u>
6	FOOD _____ _____ _____	\$ <u>264.</u>	<u>09/14/23</u>
6	FOOD _____ _____ _____	\$ <u>202.</u>	<u>09/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>137.</u>	<u>09/12/23</u>
6	FOOD _____ _____ _____	\$ <u>100.</u>	<u>09/11/23</u>
6	FOOD _____ _____ _____	\$ <u>163.</u>	<u>09/10/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>09/09/23</u>
6	FOOD _____ _____ _____	\$ <u>352.</u>	<u>09/08/23</u>
6	FOOD _____ _____ _____	\$ <u>411.</u>	<u>09/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>398.</u>	<u>09/06/23</u>
6	FOOD _____ _____ _____	\$ <u>408.</u>	<u>09/05/23</u>
6	FOOD _____ _____ _____	\$ <u>466.</u>	<u>09/04/23</u>
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>09/03/23</u>
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>09/02/23</u>
6	FOOD _____ _____ _____	\$ <u>220.</u>	<u>09/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>08/31/23</u>
6	FOOD _____ _____ _____	\$ <u>277.</u>	<u>08/30/23</u>
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>08/29/23</u>
6	FOOD _____ _____ _____	\$ <u>153.</u>	<u>08/28/23</u>
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>08/27/23</u>
6	FOOD _____ _____ _____	\$ <u>316.</u>	<u>08/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>88.</u>	<u>08/24/23</u>
6	FOOD _____ _____ _____	\$ <u>143.</u>	<u>08/24/23</u>
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>08/23/23</u>
6	FOOD _____ _____ _____	\$ <u>212.</u>	<u>08/21/23</u>
6	FOOD _____ _____ _____	\$ <u>336.</u>	<u>08/20/23</u>
6	FOOD _____ _____ _____	\$ <u>408.</u>	<u>08/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>08/19/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>08/16/23</u>
6	FOOD _____ _____ _____	\$ <u>189.</u>	<u>08/15/23</u>
6	FOOD _____ _____ _____	\$ <u>163.</u>	<u>08/14/23</u>
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>08/13/23</u>
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>08/12/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>241.</u>	<u>08/11/23</u>
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>08/10/23</u>
6	FOOD _____ _____ _____	\$ <u>202.</u>	<u>08/09/23</u>
6	FOOD _____ _____ _____	\$ <u>398.</u>	<u>08/08/23</u>
6	FOOD _____ _____ _____	\$ <u>218.</u>	<u>08/07/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>08/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>267.</u>	<u>08/04/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>08/03/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>08/02/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>08/01/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>07/31/23</u>
6	FOOD _____ _____ _____	\$ <u>254.</u>	<u>07/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>577.</u>	<u>07/29/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>07/28/23</u>
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>07/26/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>07/25/23</u>
6	FOOD _____ _____ _____	\$ <u>437.</u>	<u>07/24/23</u>
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>07/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>264.</u>	<u>07/21/23</u>
6	FOOD _____ _____ _____	\$ <u>306.</u>	<u>07/20/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>07/19/23</u>
6	FOOD _____ _____ _____	\$ <u>346.</u>	<u>07/18/23</u>
6	FOOD _____ _____ _____	\$ <u>306.</u>	<u>07/17/23</u>
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>07/15/23</u>

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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
6	FOOD _____ _____ _____	\$ <u>251.</u>	<u>07/14/23</u>
6	FOOD _____ _____ _____	\$ <u>251.</u>	<u>07/14/23</u>
6	FOOD _____ _____ _____	\$ <u>248.</u>	<u>07/13/23</u>
6	FOOD _____ _____ _____	\$ <u>202.</u>	<u>07/12/23</u>
6	FOOD _____ _____ _____	\$ <u>225.</u>	<u>07/11/23</u>
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>07/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>222.</u>	<u>07/09/23</u>
6	FOOD _____ _____ _____	\$ <u>277.</u>	<u>07/08/23</u>
6	FOOD _____ _____ _____	\$ <u>342.</u>	<u>07/07/23</u>
6	FOOD _____ _____ _____	\$ <u>202.</u>	<u>07/06/23</u>
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>07/05/23</u>
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>07/04/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>07/03/23</u>
6	FOOD _____ _____ _____	\$ <u>267.</u>	<u>07/02/23</u>
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>07/01/23</u>
6	FOOD _____ _____ _____	\$ <u>222.</u>	<u>06/30/23</u>
6	FOOD _____ _____ _____	\$ <u>734.</u>	<u>06/29/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>06/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ _____ 0.	06/27/23
6	FOOD _____ _____ _____	\$ _____ 290.	06/26/23
6	FOOD _____ _____ _____	\$ _____ 186.	06/25/23
6	FOOD _____ _____ _____	\$ _____ 287.	06/24/23
6	FOOD _____ _____ _____	\$ _____ 235.	06/23/23
6	FOOD _____ _____ _____	\$ _____ 306.	06/22/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>06/21/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>06/21/23</u>
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>06/20/23</u>
6	FOOD _____ _____ _____	\$ <u>447.</u>	<u>06/19/23</u>
6	FOOD _____ _____ _____	\$ <u>385.</u>	<u>06/18/23</u>
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>06/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>06/16/23</u>
6	FOOD _____ _____ _____	\$ <u>316.</u>	<u>06/15/23</u>
6	FOOD _____ _____ _____	\$ <u>310.</u>	<u>06/14/23</u>
6	FOOD _____ _____ _____	\$ <u>293.</u>	<u>06/13/23</u>
6	FOOD _____ _____ _____	\$ <u>215.</u>	<u>06/12/23</u>
6	FOOD _____ _____ _____	\$ <u>293.</u>	<u>06/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>06/10/23</u>
6	FOOD _____ _____ _____	\$ <u>215.</u>	<u>06/09/23</u>
6	FOOD _____ _____ _____	\$ <u>186.</u>	<u>06/08/23</u>
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>06/07/23</u>
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>06/06/23</u>
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>06/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>316.</u>	<u>06/05/23</u>
6	FOOD _____ _____ _____	\$ <u>241.</u>	<u>06/04/23</u>
6	FOOD _____ _____ _____	\$ <u>163.</u>	<u>06/03/23</u>
6	FOOD _____ _____ _____	\$ <u>447.</u>	<u>06/01/23</u>
6	FOOD _____ _____ _____	\$ <u>306.</u>	<u>05/31/23</u>
6	FOOD _____ _____ _____	\$ <u>398.</u>	<u>05/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>450.</u>	<u>05/29/23</u>
6	FOOD _____ _____ _____	\$ <u>222.</u>	<u>05/28/23</u>
6	FOOD _____ _____ _____	\$ <u>355.</u>	<u>05/28/23</u>
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>05/26/23</u>
6	FOOD _____ _____ _____	\$ <u>42.</u>	<u>05/25/23</u>
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>05/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>368.</u>	<u>05/23/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>05/22/23</u>
6	FOOD _____ _____ _____	\$ <u>447.</u>	<u>05/21/23</u>
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>05/20/23</u>
6	FOOD _____ _____ _____	\$ <u>333.</u>	<u>05/19/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>05/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>05/17/23</u>
6	FOOD _____ _____ _____	\$ <u>0.</u>	<u>05/16/23</u>
6	FOOD _____ _____ _____	\$ <u>421.</u>	<u>05/16/23</u>
6	FOOD _____ _____ _____	\$ <u>398.</u>	<u>05/15/23</u>
6	FOOD _____ _____ _____	\$ <u>215.</u>	<u>05/14/23</u>
6	FOOD _____ _____ _____	\$ <u>528.</u>	<u>05/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>05/11/23</u>
6	FOOD _____ _____ _____	\$ <u>212.</u>	<u>05/10/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>05/09/23</u>
6	FOOD _____ _____ _____	\$ <u>339.</u>	<u>05/08/23</u>
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>05/07/23</u>
6	FOOD _____ _____ _____	\$ <u>124.</u>	<u>05/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 336.	05/05/23
6	FOOD _____ _____ _____	\$ 306.	05/04/23
6	FOOD _____ _____ _____	\$ 264.	05/03/23
6	FOOD _____ _____ _____	\$ 245.	05/02/23
6	FOOD _____ _____ _____	\$ 326.	05/01/23
6	FOOD _____ _____ _____	\$ 548.	04/30/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>04/29/23</u>
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>04/28/23</u>
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>04/27/23</u>
6	FOOD _____ _____ _____	\$ <u>205.</u>	<u>04/26/23</u>
6	FOOD _____ _____ _____	\$ <u>209.</u>	<u>04/25/23</u>
6	FOOD _____ _____ _____	\$ <u>473.</u>	<u>04/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>333.</u>	<u>04/23/23</u>
6	FOOD _____ _____ _____	\$ <u>365.</u>	<u>04/22/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>04/21/23</u>
6	FOOD _____ _____ _____	\$ <u>333.</u>	<u>04/20/23</u>
6	FOOD _____ _____ _____	\$ <u>248.</u>	<u>04/18/23</u>
6	FOOD _____ _____ _____	\$ <u>310.</u>	<u>04/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>170.</u>	<u>04/17/23</u>
6	FOOD _____ _____ _____	\$ <u>310.</u>	<u>04/16/23</u>
6	FOOD _____ _____ _____	\$ <u>336.</u>	<u>04/15/23</u>
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>04/13/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>04/12/23</u>
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>04/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 929.	04/09/23
6	FOOD _____ _____ _____	\$ 512.	04/08/23
6	FOOD _____ _____ _____	\$ 326.	04/07/23
6	FOOD _____ _____ _____	\$ 313.	04/06/23
6	FOOD _____ _____ _____	\$ 0.	04/05/23
6	FOOD _____ _____ _____	\$ 218.	04/04/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>04/03/23</u>
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>04/02/23</u>
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>04/01/23</u>
6	FOOD _____ _____ _____	\$ <u>267.</u>	<u>03/31/23</u>
6	FOOD _____ _____ _____	\$ <u>574.</u>	<u>03/30/23</u>
6	FOOD _____ _____ _____	\$ <u>613.</u>	<u>03/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>03/27/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>03/26/23</u>
6	FOOD _____ _____ _____	\$ <u>212.</u>	<u>03/25/23</u>
6	FOOD _____ _____ _____	\$ <u>215.</u>	<u>03/24/23</u>
6	FOOD _____ _____ _____	\$ <u>421.</u>	<u>03/23/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>03/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>222.</u>	<u>03/21/23</u>
6	FOOD _____ _____ _____	\$ <u>0.</u>	<u>03/20/23</u>
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>03/19/23</u>
6	FOOD _____ _____ _____	\$ <u>124.</u>	<u>03/18/23</u>
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>03/17/23</u>
6	FOOD _____ _____ _____	\$ <u>711.</u>	<u>03/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>264.</u>	<u>03/14/23</u>
6	FOOD _____ _____ _____	\$ <u>352.</u>	<u>03/13/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>03/12/23</u>
6	FOOD _____ _____ _____	\$ <u>342.</u>	<u>03/11/23</u>
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>03/10/23</u>
6	FOOD _____ _____ _____	\$ <u>215.</u>	<u>03/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>03/08/23</u>
6	FOOD _____ _____ _____	\$ <u>170.</u>	<u>03/07/23</u>
6	FOOD _____ _____ _____	\$ <u>401.</u>	<u>03/06/23</u>
6	FOOD _____ _____ _____	\$ <u>254.</u>	<u>03/05/23</u>
6	FOOD _____ _____ _____	\$ <u>617.</u>	<u>03/04/23</u>
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>03/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>231.</u>	<u>03/02/23</u>
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>03/01/23</u>
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>02/28/23</u>
6	FOOD _____ _____ _____	\$ <u>462.</u>	<u>02/27/23</u>
6	FOOD _____ _____ _____	\$ <u>196.</u>	<u>02/26/23</u>
6	FOOD _____ _____ _____	\$ <u>825.</u>	<u>02/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>375.</u>	<u>02/24/23</u>
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>02/23/23</u>
6	FOOD _____ _____ _____	\$ <u>310.</u>	<u>02/22/23</u>
6	FOOD _____ _____ _____	\$ <u>192.</u>	<u>02/21/23</u>
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>02/20/23</u>
6	FOOD _____ _____ _____	\$ <u>231.</u>	<u>02/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>619.</u>	<u>02/18/23</u>
6	FOOD _____ _____ _____	\$ <u>293.</u>	<u>02/18/23</u>
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>02/17/23</u>
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>02/16/23</u>
6	FOOD _____ _____ _____	\$ <u>238.</u>	<u>02/14/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>02/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>515.</u>	<u>02/12/23</u>
6	FOOD _____ _____ _____	\$ <u>225.</u>	<u>02/11/23</u>
6	FOOD _____ _____ _____	\$ <u>231.</u>	<u>02/10/23</u>
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>02/09/23</u>
6	FOOD _____ _____ _____	\$ <u>261.</u>	<u>02/07/23</u>
6	FOOD _____ _____ _____	\$ <u>225.</u>	<u>02/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>02/05/23</u>
6	FOOD _____ _____ _____	\$ <u>192.</u>	<u>02/04/23</u>
6	FOOD _____ _____ _____	\$ <u>277.</u>	<u>02/03/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>02/02/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>02/01/23</u>
6	FOOD _____ _____ _____	\$ <u>290.</u>	<u>01/31/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>339.</u>	<u>01/30/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>01/29/23</u>
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>01/28/23</u>
6	FOOD _____ _____ _____	\$ <u>277.</u>	<u>01/27/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>01/26/23</u>
6	FOOD _____ _____ _____	\$ <u>306.</u>	<u>01/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>26.</u>	<u>01/24/23</u>
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>01/23/23</u>
6	FOOD _____ _____ _____	\$ <u>430.</u>	<u>01/22/23</u>
6	FOOD _____ _____ _____	\$ <u>205.</u>	<u>01/21/23</u>
6	FOOD _____ _____ _____	\$ <u>316.</u>	<u>01/20/23</u>
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>01/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>01/18/23</u>
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>01/17/23</u>
6	FOOD _____ _____ _____	\$ <u>310.</u>	<u>01/16/23</u>
6	FOOD _____ _____ _____	\$ <u>362.</u>	<u>01/15/23</u>
6	FOOD _____ _____ _____	\$ <u>218.</u>	<u>01/14/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>01/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>251.</u>	<u>01/12/23</u>
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>01/11/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>01/10/23</u>
6	FOOD _____ _____ _____	\$ <u>241.</u>	<u>01/09/23</u>
6	FOOD _____ _____ _____	\$ <u>306.</u>	<u>01/08/23</u>
6	FOOD _____ _____ _____	\$ <u>261.</u>	<u>01/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>352.</u>	<u>01/06/23</u>
6	FOOD _____ _____ _____	\$ <u>65.</u>	<u>01/05/23</u>
6	FOOD _____ _____ _____	\$ <u>218.</u>	<u>01/04/23</u>
6	FOOD _____ _____ _____	\$ <u>310.</u>	<u>01/03/23</u>
6	FOOD _____ _____ _____	\$ <u>870.</u>	<u>01/02/23</u>
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>12/31/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>404.</u>	<u>12/24/23</u>
6	FOOD _____ _____ _____	\$ <u>551.</u>	<u>12/17/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>12/10/23</u>
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>12/03/23</u>
6	FOOD _____ _____ _____	\$ <u>319.</u>	<u>11/26/23</u>
6	FOOD _____ _____ _____	\$ <u>1,506.</u>	<u>11/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>205.</u>	<u>11/12/23</u>
6	FOOD _____ _____ _____	\$ <u>264.</u>	<u>11/05/23</u>
6	FOOD _____ _____ _____	\$ <u>831.</u>	<u>10/31/23</u>
6	FOOD _____ _____ _____	\$ <u>394.</u>	<u>10/29/23</u>
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>10/22/23</u>
6	FOOD _____ _____ _____	\$ <u>388.</u>	<u>10/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>10/15/23</u>
6	FOOD _____ _____ _____	\$ <u>421.</u>	<u>10/08/23</u>
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>09/24/23</u>
6	FOOD _____ _____ _____	\$ <u>424.</u>	<u>09/17/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>09/10/23</u>
6	FOOD _____ _____ _____	\$ <u>456.</u>	<u>09/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>463.</u>	<u>08/27/23</u>
6	FOOD _____ _____ _____	\$ <u>502.</u>	<u>08/20/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>08/13/23</u>
6	FOOD _____ _____ _____	\$ <u>577.</u>	<u>08/06/23</u>
6	FOOD _____ _____ _____	\$ <u>430.</u>	<u>08/04/23</u>
6	FOOD _____ _____ _____	\$ <u>421.</u>	<u>07/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>398.</u>	<u>07/23/23</u>
6	FOOD _____ _____ _____	\$ <u>362.</u>	<u>07/16/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>07/09/23</u>
6	FOOD _____ _____ _____	\$ <u>277.</u>	<u>07/02/23</u>
6	FOOD _____ _____ _____	\$ <u>548.</u>	<u>06/25/23</u>
6	FOOD _____ _____ _____	\$ <u>417.</u>	<u>06/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>06/11/23</u>
6	FOOD _____ _____ _____	\$ <u>352.</u>	<u>05/28/23</u>
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>05/21/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>05/14/23</u>
6	FOOD _____ _____ _____	\$ <u>414.</u>	<u>05/07/23</u>
6	FOOD _____ _____ _____	\$ <u>339.</u>	<u>04/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>04/23/23</u>
6	FOOD _____ _____ _____	\$ <u>388.</u>	<u>04/16/23</u>
6	FOOD _____ _____ _____	\$ <u>681.</u>	<u>04/14/23</u>
6	FOOD _____ _____ _____	\$ <u>985.</u>	<u>04/08/23</u>
6	FOOD _____ _____ _____	\$ <u>339.</u>	<u>04/02/23</u>
6	FOOD _____ _____ _____	\$ <u>333.</u>	<u>03/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 261.	03/19/23
6	FOOD _____ _____ _____	\$ 111.	03/12/23
6	FOOD _____ _____ _____	\$ 306.	03/12/23
6	FOOD _____ _____ _____	\$ 235.	03/05/23
6	FOOD _____ _____ _____	\$ 258.	02/26/23
6	FOOD _____ _____ _____	\$ 46.	02/19/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>153.</u>	<u>02/12/23</u>
6	FOOD _____ _____ _____	\$ <u>342.</u>	<u>02/05/23</u>
6	FOOD _____ _____ _____	\$ <u>316.</u>	<u>01/29/23</u>
6	FOOD _____ _____ _____	\$ <u>362.</u>	<u>01/22/23</u>
6	FOOD _____ _____ _____	\$ <u>408.</u>	<u>01/15/23</u>
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>01/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>01/04/23</u>
6	FOOD _____ _____ _____	\$ <u>339.</u>	<u>01/01/23</u>
6	FOOD _____ _____ _____	\$ <u>763.</u>	<u>12/31/23</u>
6	FOOD _____ _____ _____	\$ <u>720.</u>	<u>12/30/23</u>
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>12/29/23</u>
6	FOOD _____ _____ _____	\$ <u>554.</u>	<u>12/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>346.</u>	<u>12/27/23</u>
6	FOOD _____ _____ _____	\$ <u>417.</u>	<u>12/26/23</u>
6	FOOD _____ _____ _____	\$ <u>975.</u>	<u>12/25/23</u>
6	FOOD _____ _____ _____	\$ <u>466.</u>	<u>12/24/23</u>
6	FOOD _____ _____ _____	\$ <u>525.</u>	<u>12/23/23</u>
6	FOOD _____ _____ _____	\$ <u>672.</u>	<u>12/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>512.</u>	<u>12/20/23</u>
6	FOOD _____ _____ _____	\$ <u>626.</u>	<u>12/19/23</u>
6	FOOD _____ _____ _____	\$ <u>805.</u>	<u>12/18/23</u>
6	FOOD _____ _____ _____	\$ <u>910.</u>	<u>12/16/23</u>
6	FOOD _____ _____ _____	\$ <u>688.</u>	<u>12/15/23</u>
6	FOOD _____ _____ _____	\$ <u>1,740.</u>	<u>12/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>394.</u>	<u>12/13/23</u>
6	FOOD _____ _____ _____	\$ <u>779.</u>	<u>12/13/23</u>
6	FOOD _____ _____ _____	\$ <u>551.</u>	<u>12/10/23</u>
6	FOOD _____ _____ _____	\$ <u>727.</u>	<u>12/09/23</u>
6	FOOD _____ _____ _____	\$ <u>1,045.</u>	<u>12/08/23</u>
6	FOOD _____ _____ _____	\$ <u>616.</u>	<u>12/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>434.</u>	<u>12/06/23</u>
6	FOOD _____ _____ _____	\$ <u>520.</u>	<u>12/05/23</u>
6	FOOD _____ _____ _____	\$ <u>815.</u>	<u>12/04/23</u>
6	FOOD _____ _____ _____	\$ <u>505.</u>	<u>12/02/23</u>
6	FOOD _____ _____ _____	\$ <u>1,046.</u>	<u>12/01/23</u>
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>11/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>11/29/23</u>
6	FOOD _____ _____ _____	\$ <u>440.</u>	<u>11/28/23</u>
6	FOOD _____ _____ _____	\$ <u>752.</u>	<u>11/27/23</u>
6	FOOD _____ _____ _____	\$ <u>685.</u>	<u>11/26/23</u>
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>11/25/23</u>
6	FOOD _____ _____ _____	\$ <u>456.</u>	<u>11/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>381.</u>	<u>11/24/23</u>
6	FOOD _____ _____ _____	\$ <u>1,056.</u>	<u>11/22/23</u>
6	FOOD _____ _____ _____	\$ <u>567.</u>	<u>11/22/23</u>
6	FOOD _____ _____ _____	\$ <u>783.</u>	<u>11/20/23</u>
6	FOOD _____ _____ _____	\$ <u>515.</u>	<u>11/19/23</u>
6	FOOD _____ _____ _____	\$ <u>802.</u>	<u>11/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>368.</u>	<u>11/17/23</u>
6	FOOD _____ _____ _____	\$ <u>434.</u>	<u>11/15/23</u>
6	FOOD _____ _____ _____	\$ <u>535.</u>	<u>11/13/23</u>
6	FOOD _____ _____ _____	\$ <u>482.</u>	<u>11/12/23</u>
6	FOOD _____ _____ _____	\$ <u>453.</u>	<u>11/11/23</u>
6	FOOD _____ _____ _____	\$ <u>505.</u>	<u>11/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>1,882.</u>	<u>11/09/23</u>
6	FOOD _____ _____ _____	\$ <u>734.</u>	<u>11/08/23</u>
6	FOOD _____ _____ _____	\$ <u>408.</u>	<u>11/07/23</u>
6	FOOD _____ _____ _____	\$ <u>548.</u>	<u>11/06/23</u>
6	FOOD _____ _____ _____	\$ <u>567.</u>	<u>11/05/23</u>
6	FOOD _____ _____ _____	\$ <u>737.</u>	<u>11/04/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>580.</u>	<u>11/03/23</u>
6	FOOD _____ _____ _____	\$ <u>584.</u>	<u>11/02/23</u>
6	FOOD _____ _____ _____	\$ <u>1,242.</u>	<u>11/01/23</u>
6	FOOD _____ _____ _____	\$ <u>1,336.</u>	<u>10/30/23</u>
6	FOOD _____ _____ _____	\$ <u>779.</u>	<u>10/29/23</u>
6	FOOD _____ _____ _____	\$ <u>626.</u>	<u>10/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>750.</u>	<u>10/27/23</u>
6	FOOD _____ _____ _____	\$ <u>440.</u>	<u>10/27/23</u>
6	FOOD _____ _____ _____	\$ <u>548.</u>	<u>10/26/23</u>
6	FOOD _____ _____ _____	\$ <u>541.</u>	<u>10/24/23</u>
6	FOOD _____ _____ _____	\$ <u>802.</u>	<u>10/23/23</u>
6	FOOD _____ _____ _____	\$ <u>1,239.</u>	<u>10/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>496.</u>	<u>10/22/23</u>
6	FOOD _____ _____ _____	\$ <u>773.</u>	<u>10/21/23</u>
6	FOOD _____ _____ _____	\$ <u>597.</u>	<u>10/19/23</u>
6	FOOD _____ _____ _____	\$ <u>734.</u>	<u>10/18/23</u>
6	FOOD _____ _____ _____	\$ <u>698.</u>	<u>10/17/23</u>
6	FOOD _____ _____ _____	\$ <u>898.</u>	<u>10/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>512.</u>	<u>10/15/23</u>
6	FOOD _____ _____ _____	\$ <u>674.</u>	<u>10/14/23</u>
6	FOOD _____ _____ _____	\$ <u>463.</u>	<u>10/13/23</u>
6	FOOD _____ _____ _____	\$ <u>463.</u>	<u>10/13/23</u>
6	FOOD _____ _____ _____	\$ <u>453.</u>	<u>10/11/23</u>
6	FOOD _____ _____ _____	\$ <u>469.</u>	<u>10/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>479.</u>	<u>10/08/23</u>
6	FOOD _____ _____ _____	\$ <u>1,020.</u>	<u>10/05/23</u>
6	FOOD _____ _____ _____	\$ <u>411.</u>	<u>10/05/23</u>
6	FOOD _____ _____ _____	\$ <u>590.</u>	<u>10/03/23</u>
6	FOOD _____ _____ _____	\$ <u>580.</u>	<u>10/02/23</u>
6	FOOD _____ _____ _____	\$ <u>293.</u>	<u>10/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 597.	09/30/23
6	FOOD _____ _____ _____	\$ 652.	09/29/23
6	FOOD _____ _____ _____	\$ 846.	09/28/23
6	FOOD _____ _____ _____	\$ 235.	09/27/23
6	FOOD _____ _____ _____	\$ 799.	09/26/23
6	FOOD _____ _____ _____	\$ 936.	09/25/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>734.</u>	<u>09/24/23</u>
6	FOOD _____ _____ _____	\$ <u>584.</u>	<u>09/23/23</u>
6	FOOD _____ _____ _____	\$ <u>456.</u>	<u>09/22/23</u>
6	FOOD _____ _____ _____	\$ <u>1,030.</u>	<u>09/21/23</u>
6	FOOD _____ _____ _____	\$ <u>466.</u>	<u>09/20/23</u>
6	FOOD _____ _____ _____	\$ <u>525.</u>	<u>09/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>906.</u>	<u>09/18/23</u>
6	FOOD _____ _____ _____	\$ <u>717.</u>	<u>09/17/23</u>
6	FOOD _____ _____ _____	\$ <u>1,242.</u>	<u>09/16/23</u>
6	FOOD _____ _____ _____	\$ <u>1,118.</u>	<u>09/15/23</u>
6	FOOD _____ _____ _____	\$ <u>841.</u>	<u>09/14/23</u>
6	FOOD _____ _____ _____	\$ <u>544.</u>	<u>09/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>538.</u>	<u>09/12/23</u>
6	FOOD _____ _____ _____	\$ <u>535.</u>	<u>09/11/23</u>
6	FOOD _____ _____ _____	\$ <u>652.</u>	<u>09/10/23</u>
6	FOOD _____ _____ _____	\$ <u>681.</u>	<u>09/09/23</u>
6	FOOD _____ _____ _____	\$ <u>466.</u>	<u>09/08/23</u>
6	FOOD _____ _____ _____	\$ <u>1,020.</u>	<u>09/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>645.</u>	<u>09/06/23</u>
6	FOOD _____ _____ _____	\$ <u>0.</u>	<u>09/06/23</u>
6	FOOD _____ _____ _____	\$ <u>707.</u>	<u>09/04/23</u>
6	FOOD _____ _____ _____	\$ <u>587.</u>	<u>09/03/23</u>
6	FOOD _____ _____ _____	\$ <u>613.</u>	<u>09/02/23</u>
6	FOOD _____ _____ _____	\$ <u>509.</u>	<u>09/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>466.</u>	<u>08/31/23</u>
6	FOOD _____ _____ _____	\$ <u>659.</u>	<u>08/30/23</u>
6	FOOD _____ _____ _____	\$ <u>567.</u>	<u>08/29/23</u>
6	FOOD _____ _____ _____	\$ <u>659.</u>	<u>08/28/23</u>
6	FOOD _____ _____ _____	\$ <u>230.</u>	<u>08/28/23</u>
6	FOOD _____ _____ _____	\$ <u>799.</u>	<u>08/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>958.</u>	<u>08/26/23</u>
6	FOOD _____ _____ _____	\$ <u>590.</u>	<u>08/25/23</u>
6	FOOD _____ _____ _____	\$ <u>1,079.</u>	<u>08/24/23</u>
6	FOOD _____ _____ _____	\$ <u>685.</u>	<u>08/23/23</u>
6	FOOD _____ _____ _____	\$ <u>561.</u>	<u>08/22/23</u>
6	FOOD _____ _____ _____	\$ <u>782.</u>	<u>08/21/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>499.</u>	<u>08/21/23</u>
6	FOOD _____ _____ _____	\$ <u>782.</u>	<u>08/20/23</u>
6	FOOD _____ _____ _____	\$ <u>818.</u>	<u>08/19/23</u>
6	FOOD _____ _____ _____	\$ <u>453.</u>	<u>08/18/23</u>
6	FOOD _____ _____ _____	\$ <u>580.</u>	<u>08/17/23</u>
6	FOOD _____ _____ _____	\$ <u>466.</u>	<u>08/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>08/16/23</u>
6	FOOD _____ _____ _____	\$ <u>437.</u>	<u>08/14/23</u>
6	FOOD _____ _____ _____	\$ <u>685.</u>	<u>08/13/23</u>
6	FOOD _____ _____ _____	\$ <u>561.</u>	<u>08/12/23</u>
6	FOOD _____ _____ _____	\$ <u>346.</u>	<u>08/11/23</u>
6	FOOD _____ _____ _____	\$ <u>617.</u>	<u>08/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>08/09/23</u>
6	FOOD _____ _____ _____	\$ <u>333.</u>	<u>08/08/23</u>
6	FOOD _____ _____ _____	\$ <u>408.</u>	<u>08/07/23</u>
6	FOOD _____ _____ _____	\$ <u>580.</u>	<u>08/06/23</u>
6	FOOD _____ _____ _____	\$ <u>678.</u>	<u>08/04/23</u>
6	FOOD _____ _____ _____	\$ <u>688.</u>	<u>08/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>427.</u>	<u>08/02/23</u>
6	FOOD _____ _____ _____	\$ <u>538.</u>	<u>08/01/23</u>
6	FOOD _____ _____ _____	\$ <u>603.</u>	<u>07/31/23</u>
6	FOOD _____ _____ _____	\$ <u>685.</u>	<u>07/30/23</u>
6	FOOD _____ _____ _____	\$ <u>479.</u>	<u>07/29/23</u>
6	FOOD _____ _____ _____	\$ <u>1,188.</u>	<u>07/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>571.</u>	<u>07/27/23</u>
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>07/26/23</u>
6	FOOD _____ _____ _____	\$ <u>445.</u>	<u>07/24/23</u>
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>07/23/23</u>
6	FOOD _____ _____ _____	\$ <u>447.</u>	<u>07/22/23</u>
6	FOOD _____ _____ _____	\$ <u>567.</u>	<u>07/21/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>417.</u>	<u>07/20/23</u>
6	FOOD _____ _____ _____	\$ <u>440.</u>	<u>07/19/23</u>
6	FOOD _____ _____ _____	\$ <u>590.</u>	<u>07/18/23</u>
6	FOOD _____ _____ _____	\$ <u>613.</u>	<u>07/17/23</u>
6	FOOD _____ _____ _____	\$ <u>496.</u>	<u>07/17/23</u>
6	FOOD _____ _____ _____	\$ <u>539.</u>	<u>07/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>478.</u>	<u>07/14/23</u>
6	FOOD _____ _____ _____	\$ <u>1,008.</u>	<u>07/13/23</u>
6	FOOD _____ _____ _____	\$ <u>349.</u>	<u>07/12/23</u>
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>07/11/23</u>
6	FOOD _____ _____ _____	\$ <u>695.</u>	<u>07/10/23</u>
6	FOOD _____ _____ _____	\$ <u>492.</u>	<u>07/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>531.</u>	<u>07/08/23</u>
6	FOOD _____ _____ _____	\$ <u>541.</u>	<u>07/07/23</u>
6	FOOD _____ _____ _____	\$ <u>727.</u>	<u>07/06/23</u>
6	FOOD _____ _____ _____	\$ <u>652.</u>	<u>07/05/23</u>
6	FOOD _____ _____ _____	\$ <u>634.</u>	<u>07/04/23</u>
6	FOOD _____ _____ _____	\$ <u>1,122.</u>	<u>07/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>887.</u>	<u>07/02/23</u>
6	FOOD _____ _____ _____	\$ <u>649.</u>	<u>07/01/23</u>
6	FOOD _____ _____ _____	\$ <u>587.</u>	<u>06/30/23</u>
6	FOOD _____ _____ _____	\$ <u>469.</u>	<u>06/27/23</u>
6	FOOD _____ _____ _____	\$ <u>802.</u>	<u>06/26/23</u>
6	FOOD _____ _____ _____	\$ <u>434.</u>	<u>06/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>482.</u>	<u>06/24/23</u>
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>06/23/23</u>
6	FOOD _____ _____ _____	\$ <u>616.</u>	<u>06/23/23</u>
6	FOOD _____ _____ _____	\$ <u>509.</u>	<u>06/21/23</u>
6	FOOD _____ _____ _____	\$ <u>363.</u>	<u>06/20/23</u>
6	FOOD _____ _____ _____	\$ <u>528.</u>	<u>06/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>1,017.</u>	<u>06/18/23</u>
6	FOOD _____ _____ _____	\$ <u>838.</u>	<u>06/17/23</u>
6	FOOD _____ _____ _____	\$ <u>508.</u>	<u>06/16/23</u>
6	FOOD _____ _____ _____	\$ <u>600.</u>	<u>06/15/23</u>
6	FOOD _____ _____ _____	\$ <u>453.</u>	<u>06/14/23</u>
6	FOOD _____ _____ _____	\$ <u>421.</u>	<u>06/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>577.</u>	<u>06/12/23</u>
6	FOOD _____ _____ _____	\$ <u>408.</u>	<u>06/11/23</u>
6	FOOD _____ _____ _____	\$ <u>515.</u>	<u>06/10/23</u>
6	FOOD _____ _____ _____	\$ <u>552.</u>	<u>06/09/23</u>
6	FOOD _____ _____ _____	\$ <u>310.</u>	<u>06/08/23</u>
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>06/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>641.</u>	<u>06/06/23</u>
6	FOOD _____ _____ _____	\$ <u>597.</u>	<u>06/05/23</u>
6	FOOD _____ _____ _____	\$ <u>848.</u>	<u>06/04/23</u>
6	FOOD _____ _____ _____	\$ <u>411.</u>	<u>06/03/23</u>
6	FOOD _____ _____ _____	\$ <u>447.</u>	<u>06/02/23</u>
6	FOOD _____ _____ _____	\$ <u>897.</u>	<u>06/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>05/30/23</u>
6	FOOD _____ _____ _____	\$ <u>1,041.</u>	<u>05/29/23</u>
6	FOOD _____ _____ _____	\$ <u>1,046.</u>	<u>05/28/23</u>
6	FOOD _____ _____ _____	\$ <u>453.</u>	<u>05/27/23</u>
6	FOOD _____ _____ _____	\$ <u>414.</u>	<u>05/26/23</u>
6	FOOD _____ _____ _____	\$ <u>342.</u>	<u>05/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>525.</u>	<u>05/24/23</u>
6	FOOD _____ _____ _____	\$ <u>456.</u>	<u>05/24/23</u>
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>05/23/23</u>
6	FOOD _____ _____ _____	\$ <u>613.</u>	<u>05/22/23</u>
6	FOOD _____ _____ _____	\$ <u>616.</u>	<u>05/21/23</u>
6	FOOD _____ _____ _____	\$ <u>430.</u>	<u>05/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>476.</u>	<u>05/20/23</u>
6	FOOD _____ _____ _____	\$ <u>644.</u>	<u>05/19/23</u>
6	FOOD _____ _____ _____	\$ <u>463.</u>	<u>05/17/23</u>
6	FOOD _____ _____ _____	\$ <u>644.</u>	<u>05/16/23</u>
6	FOOD _____ _____ _____	\$ <u>502.</u>	<u>05/15/23</u>
6	FOOD _____ _____ _____	\$ <u>502.</u>	<u>05/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>05/14/23</u>
6	FOOD _____ _____ _____	\$ <u>410.</u>	<u>05/13/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>05/12/23</u>
6	FOOD _____ _____ _____	\$ <u>437.</u>	<u>05/11/23</u>
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>05/10/23</u>
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>05/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>05/08/23</u>
6	FOOD _____ _____ _____	\$ <u>600.</u>	<u>05/07/23</u>
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>05/06/23</u>
6	FOOD _____ _____ _____	\$ <u>525.</u>	<u>05/05/23</u>
6	FOOD _____ _____ _____	\$ <u>717.</u>	<u>05/05/23</u>
6	FOOD _____ _____ _____	\$ <u>417.</u>	<u>05/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 346.	05/02/23
6	FOOD _____ _____ _____	\$ 355.	05/01/23
6	FOOD _____ _____ _____	\$ 645.	04/30/23
6	FOOD _____ _____ _____	\$ 284.	04/29/23
6	FOOD _____ _____ _____	\$ 546.	04/29/23
6	FOOD _____ _____ _____	\$ 388.	04/28/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>482.</u>	<u>04/27/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>04/26/23</u>
6	FOOD _____ _____ _____	\$ <u>614.</u>	<u>04/25/23</u>
6	FOOD _____ _____ _____	\$ <u>600.</u>	<u>04/23/23</u>
6	FOOD _____ _____ _____	\$ <u>437.</u>	<u>04/22/23</u>
6	FOOD _____ _____ _____	\$ <u>580.</u>	<u>04/21/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>479.</u>	<u>04/20/23</u>
6	FOOD _____ _____ _____	\$ <u>883.</u>	<u>04/19/23</u>
6	FOOD _____ _____ _____	\$ <u>515.</u>	<u>04/18/23</u>
6	FOOD _____ _____ _____	\$ <u>381.</u>	<u>04/17/23</u>
6	FOOD _____ _____ _____	\$ <u>587.</u>	<u>04/16/23</u>
6	FOOD _____ _____ _____	\$ <u>486.</u>	<u>04/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>675.</u>	<u>04/14/23</u>
6	FOOD _____ _____ _____	\$ <u>476.</u>	<u>04/13/23</u>
6	FOOD _____ _____ _____	\$ <u>205.</u>	<u>04/11/23</u>
6	FOOD _____ _____ _____	\$ <u>319.</u>	<u>04/10/23</u>
6	FOOD _____ _____ _____	\$ <u>998.</u>	<u>04/10/23</u>
6	FOOD _____ _____ _____	\$ <u>730.</u>	<u>04/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>479.</u>	<u>04/08/23</u>
6	FOOD _____ _____ _____	\$ <u>958.</u>	<u>04/07/23</u>
6	FOOD _____ _____ _____	\$ <u>1,014.</u>	<u>04/06/23</u>
6	FOOD _____ _____ _____	\$ <u>802.</u>	<u>04/05/23</u>
6	FOOD _____ _____ _____	\$ <u>522.</u>	<u>04/04/23</u>
6	FOOD _____ _____ _____	\$ <u>577.</u>	<u>04/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>535.</u>	<u>04/02/23</u>
6	FOOD _____ _____ _____	\$ <u>831.</u>	<u>04/01/23</u>
6	FOOD _____ _____ _____	\$ <u>593.</u>	<u>03/31/23</u>
6	FOOD _____ _____ _____	\$ <u>711.</u>	<u>03/28/23</u>
6	FOOD _____ _____ _____	\$ <u>632.</u>	<u>03/27/23</u>
6	FOOD _____ _____ _____	\$ <u>802.</u>	<u>03/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>456.</u>	<u>03/25/23</u>
6	FOOD _____ _____ _____	\$ <u>525.</u>	<u>03/24/23</u>
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>03/24/23</u>
6	FOOD _____ _____ _____	\$ <u>486.</u>	<u>03/22/23</u>
6	FOOD _____ _____ _____	\$ <u>619.</u>	<u>03/21/23</u>
6	FOOD _____ _____ _____	\$ <u>404.</u>	<u>03/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>734.</u>	<u>03/19/23</u>
6	FOOD _____ _____ _____	\$ <u>626.</u>	<u>03/18/23</u>
6	FOOD _____ _____ _____	\$ <u>701.</u>	<u>03/17/23</u>
6	FOOD _____ _____ _____	\$ <u>722.</u>	<u>03/16/23</u>
6	FOOD _____ _____ _____	\$ <u>662.</u>	<u>03/14/23</u>
6	FOOD _____ _____ _____	\$ <u>655.</u>	<u>03/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>408.</u>	<u>03/12/23</u>
6	FOOD _____ _____ _____	\$ <u>479.</u>	<u>03/11/23</u>
6	FOOD _____ _____ _____	\$ <u>424.</u>	<u>03/10/23</u>
6	FOOD _____ _____ _____	\$ <u>698.</u>	<u>03/10/23</u>
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>03/08/23</u>
6	FOOD _____ _____ _____	\$ <u>707.</u>	<u>03/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>634.</u>	<u>03/06/23</u>
6	FOOD _____ _____ _____	\$ <u>579.</u>	<u>03/03/23</u>
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>03/02/23</u>
6	FOOD _____ _____ _____	\$ <u>460.</u>	<u>02/28/23</u>
6	FOOD _____ _____ _____	\$ <u>563.</u>	<u>02/27/23</u>
6	FOOD _____ _____ _____	\$ <u>482.</u>	<u>02/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>512.</u>	<u>02/25/23</u>
6	FOOD _____ _____ _____	\$ <u>522.</u>	<u>02/24/23</u>
6	FOOD _____ _____ _____	\$ <u>199.</u>	<u>02/23/23</u>
6	FOOD _____ _____ _____	\$ <u>616.</u>	<u>02/22/23</u>
6	FOOD _____ _____ _____	\$ <u>1,271.</u>	<u>02/22/23</u>
6	FOOD _____ _____ _____	\$ <u>1,099.</u>	<u>02/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>02/21/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>02/20/23</u>
6	FOOD _____ _____ _____	\$ <u>554.</u>	<u>02/19/23</u>
6	FOOD _____ _____ _____	\$ <u>1,418.</u>	<u>02/18/23</u>
6	FOOD _____ _____ _____	\$ <u>394.</u>	<u>02/17/23</u>
6	FOOD _____ _____ _____	\$ <u>972.</u>	<u>02/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>1,148.</u>	<u>02/15/23</u>
6	FOOD _____ _____ _____	\$ <u>530.</u>	<u>02/14/23</u>
6	FOOD _____ _____ _____	\$ <u>1,050.</u>	<u>02/13/23</u>
6	FOOD _____ _____ _____	\$ <u>404.</u>	<u>02/13/23</u>
6	FOOD _____ _____ _____	\$ <u>880.</u>	<u>02/12/23</u>
6	FOOD _____ _____ _____	\$ <u>443.</u>	<u>02/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>743.</u>	<u>02/11/23</u>
6	FOOD _____ _____ _____	\$ <u>1,112.</u>	<u>02/09/23</u>
6	FOOD _____ _____ _____	\$ <u>567.</u>	<u>02/08/23</u>
6	FOOD _____ _____ _____	\$ <u>547.</u>	<u>02/06/23</u>
6	FOOD _____ _____ _____	\$ <u>571.</u>	<u>02/05/23</u>
6	FOOD _____ _____ _____	\$ <u>463.</u>	<u>02/04/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>750.</u>	<u>02/03/23</u>
6	FOOD _____ _____ _____	\$ <u>649.</u>	<u>02/03/23</u>
6	FOOD _____ _____ _____	\$ <u>437.</u>	<u>02/01/23</u>
6	FOOD _____ _____ _____	\$ <u>427.</u>	<u>01/31/23</u>
6	FOOD _____ _____ _____	\$ <u>538.</u>	<u>01/30/23</u>
6	FOOD _____ _____ _____	\$ <u>571.</u>	<u>01/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>616.</u>	<u>01/28/23</u>
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>01/27/23</u>
6	FOOD _____ _____ _____	\$ <u>475.</u>	<u>01/26/23</u>
6	FOOD _____ _____ _____	\$ <u>173.</u>	<u>01/25/23</u>
6	FOOD _____ _____ _____	\$ <u>531.</u>	<u>01/25/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>01/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>541.</u>	<u>01/24/23</u>
6	FOOD _____ _____ _____	\$ <u>502.</u>	<u>01/23/23</u>
6	FOOD _____ _____ _____	\$ <u>750.</u>	<u>01/22/23</u>
6	FOOD _____ _____ _____	\$ <u>544.</u>	<u>01/21/23</u>
6	FOOD _____ _____ _____	\$ <u>691.</u>	<u>01/20/23</u>
6	FOOD _____ _____ _____	\$ <u>1,073.</u>	<u>01/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>469.</u>	<u>01/18/23</u>
6	FOOD _____ _____ _____	\$ <u>466.</u>	<u>01/17/23</u>
6	FOOD _____ _____ _____	\$ <u>629.</u>	<u>01/17/23</u>
6	FOOD _____ _____ _____	\$ <u>932.</u>	<u>01/16/23</u>
6	FOOD _____ _____ _____	\$ <u>469.</u>	<u>01/15/23</u>
6	FOOD _____ _____ _____	\$ <u>639.</u>	<u>01/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>971.</u>	<u>01/13/23</u>
6	FOOD _____ _____ _____	\$ <u>629.</u>	<u>01/12/23</u>
6	FOOD _____ _____ _____	\$ <u>505.</u>	<u>01/11/23</u>
6	FOOD _____ _____ _____	\$ <u>398.</u>	<u>01/10/23</u>
6	FOOD _____ _____ _____	\$ <u>418.</u>	<u>01/09/23</u>
6	FOOD _____ _____ _____	\$ <u>515.</u>	<u>01/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>851.</u>	<u>01/07/23</u>
6	FOOD _____ _____ _____	\$ <u>349.</u>	<u>01/06/23</u>
6	FOOD _____ _____ _____	\$ <u>112.</u>	<u>01/03/23</u>
6	FOOD _____ _____ _____	\$ <u>1,340.</u>	<u>01/02/23</u>
6	FOOD _____ _____ _____	\$ <u>636.</u>	<u>01/01/23</u>
6	FOOD _____ _____ _____	\$ <u>593.</u>	<u>12/31/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>349.</u>	<u>12/30/23</u>
6	FOOD _____ _____ _____	\$ <u>854.</u>	<u>12/27/23</u>
6	FOOD _____ _____ _____	\$ <u>401.</u>	<u>12/24/23</u>
6	FOOD _____ _____ _____	\$ <u>698.</u>	<u>12/23/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>12/20/23</u>
6	FOOD _____ _____ _____	\$ <u>466.</u>	<u>12/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>603.</u>	<u>12/16/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>12/13/23</u>
6	FOOD _____ _____ _____	\$ <u>502.</u>	<u>12/10/23</u>
6	FOOD _____ _____ _____	\$ <u>535.</u>	<u>12/09/23</u>
6	FOOD _____ _____ _____	\$ <u>473.</u>	<u>12/06/23</u>
6	FOOD _____ _____ _____	\$ <u>293.</u>	<u>12/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>12/02/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>11/29/23</u>
6	FOOD _____ _____ _____	\$ <u>502.</u>	<u>11/26/23</u>
6	FOOD _____ _____ _____	\$ <u>567.</u>	<u>11/25/23</u>
6	FOOD _____ _____ _____	\$ <u>541.</u>	<u>11/22/23</u>
6	FOOD _____ _____ _____	\$ <u>675.</u>	<u>11/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>11/18/23</u>
6	FOOD _____ _____ _____	\$ <u>691.</u>	<u>11/15/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>11/12/23</u>
6	FOOD _____ _____ _____	\$ <u>600.</u>	<u>11/11/23</u>
6	FOOD _____ _____ _____	\$ <u>1,095.</u>	<u>11/08/23</u>
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>11/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>413.</u>	<u>11/04/23</u>
6	FOOD _____ _____ _____	\$ <u>600.</u>	<u>11/01/23</u>
6	FOOD _____ _____ _____	\$ <u>0.</u>	<u>10/29/23</u>
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>10/28/23</u>
6	FOOD _____ _____ _____	\$ <u>678.</u>	<u>10/25/23</u>
6	FOOD _____ _____ _____	\$ <u>466.</u>	<u>10/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>339.</u>	<u>10/21/23</u>
6	FOOD _____ _____ _____	\$ <u>394.</u>	<u>10/18/23</u>
6	FOOD _____ _____ _____	\$ <u>482.</u>	<u>10/15/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>10/14/23</u>
6	FOOD _____ _____ _____	\$ <u>460.</u>	<u>10/11/23</u>
6	FOOD _____ _____ _____	\$ <u>404.</u>	<u>10/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>10/07/23</u>
6	FOOD _____ _____ _____	\$ <u>355.</u>	<u>10/04/23</u>
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>10/01/23</u>
6	FOOD _____ _____ _____	\$ <u>518.</u>	<u>09/30/23</u>
6	FOOD _____ _____ _____	\$ <u>254.</u>	<u>09/27/23</u>
6	FOOD _____ _____ _____	\$ <u>557.</u>	<u>09/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>09/23/23</u>
6	FOOD _____ _____ _____	\$ <u>440.</u>	<u>09/20/23</u>
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>09/17/23</u>
6	FOOD _____ _____ _____	\$ <u>1,162.</u>	<u>09/16/23</u>
6	FOOD _____ _____ _____	\$ <u>535.</u>	<u>09/13/23</u>
6	FOOD _____ _____ _____	\$ <u>585.</u>	<u>09/12/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>306.</u>	<u>09/10/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>09/09/23</u>
6	FOOD _____ _____ _____	\$ <u>465.</u>	<u>09/05/23</u>
6	FOOD _____ _____ _____	\$ <u>297.</u>	<u>09/02/23</u>
6	FOOD _____ _____ _____	\$ <u>306.</u>	<u>08/30/23</u>
6	FOOD _____ _____ _____	\$ <u>225.</u>	<u>08/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>411.</u>	<u>08/26/23</u>
6	FOOD _____ _____ _____	\$ <u>339.</u>	<u>08/23/23</u>
6	FOOD _____ _____ _____	\$ <u>401.</u>	<u>08/20/23</u>
6	FOOD _____ _____ _____	\$ <u>163.</u>	<u>08/19/23</u>
6	FOOD _____ _____ _____	\$ <u>186.</u>	<u>08/17/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>08/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>222.</u>	<u>08/12/23</u>
6	FOOD _____ _____ _____	\$ <u>199.</u>	<u>08/09/23</u>
6	FOOD _____ _____ _____	\$ <u>329.</u>	<u>08/06/23</u>
6	FOOD _____ _____ _____	\$ <u>381.</u>	<u>08/05/23</u>
6	FOOD _____ _____ _____	\$ <u>365.</u>	<u>08/02/23</u>
6	FOOD _____ _____ _____	\$ <u>306.</u>	<u>07/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>355.</u>	<u>07/29/23</u>
6	FOOD _____ _____ _____	\$ <u>254.</u>	<u>07/27/23</u>
6	FOOD _____ _____ _____	\$ <u>336.</u>	<u>07/26/23</u>
6	FOOD _____ _____ _____	\$ <u>359.</u>	<u>07/23/23</u>
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>07/22/23</u>
6	FOOD _____ _____ _____	\$ <u>124.</u>	<u>07/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 310.	07/16/23
6	FOOD _____ _____ _____	\$ 192.	07/15/23
6	FOOD _____ _____ _____	\$ 192.	07/15/23
6	FOOD _____ _____ _____	\$ 179.	07/12/23
6	FOOD _____ _____ _____	\$ 467.	07/08/23
6	FOOD _____ _____ _____	\$ 629.	07/05/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>293.</u>	<u>07/02/23</u>
6	FOOD _____ _____ _____	\$ <u>405.</u>	<u>06/28/23</u>
6	FOOD _____ _____ _____	\$ <u>769.</u>	<u>06/24/23</u>
6	FOOD _____ _____ _____	\$ <u>769.</u>	<u>06/24/23</u>
6	FOOD _____ _____ _____	\$ <u>404.</u>	<u>06/21/23</u>
6	FOOD _____ _____ _____	\$ <u>245.</u>	<u>06/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>600.</u>	<u>06/17/23</u>
6	FOOD _____ _____ _____	\$ <u>173.</u>	<u>06/10/23</u>
6	FOOD _____ _____ _____	\$ <u>613.</u>	<u>06/04/23</u>
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>06/03/23</u>
6	FOOD _____ _____ _____	\$ <u>196.</u>	<u>05/31/23</u>
6	FOOD _____ _____ _____	\$ <u>78.</u>	<u>05/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>261.</u>	<u>05/27/23</u>
6	FOOD _____ _____ _____	\$ <u>101.</u>	<u>05/24/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>05/21/23</u>
6	FOOD _____ _____ _____	\$ <u>215.</u>	<u>05/20/23</u>
6	FOOD _____ _____ _____	\$ <u>114.</u>	<u>05/17/23</u>
6	FOOD _____ _____ _____	\$ <u>319.</u>	<u>05/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>267.</u>	<u>05/13/23</u>
6	FOOD _____ _____ _____	\$ <u>342.</u>	<u>05/10/23</u>
6	FOOD _____ _____ _____	\$ <u>326.</u>	<u>05/07/23</u>
6	FOOD _____ _____ _____	\$ <u>267.</u>	<u>05/06/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>05/03/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>04/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>616.</u>	<u>04/29/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>04/26/23</u>
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>04/23/23</u>
6	FOOD _____ _____ _____	\$ <u>284.</u>	<u>04/22/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>04/19/23</u>
6	FOOD _____ _____ _____	\$ <u>245.</u>	<u>04/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 391.	04/15/23
6	FOOD _____ _____ _____	\$ 351.	04/12/23
6	FOOD _____ _____ _____	\$ 720.	04/09/23
6	FOOD _____ _____ _____	\$ 421.	04/08/23
6	FOOD _____ _____ _____	\$ 114.	04/05/23
6	FOOD _____ _____ _____	\$ 235.	04/01/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>215.</u>	<u>03/29/23</u>
6	FOOD _____ _____ _____	\$ <u>473.</u>	<u>03/26/23</u>
6	FOOD _____ _____ _____	\$ <u>525.</u>	<u>03/25/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>03/22/23</u>
6	FOOD _____ _____ _____	\$ <u>336.</u>	<u>03/19/23</u>
6	FOOD _____ _____ _____	\$ <u>225.</u>	<u>03/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>03/15/23</u>
6	FOOD _____ _____ _____	\$ <u>316.</u>	<u>03/12/23</u>
6	FOOD _____ _____ _____	\$ <u>290.</u>	<u>03/11/23</u>
6	FOOD _____ _____ _____	\$ <u>124.</u>	<u>03/08/23</u>
6	FOOD _____ _____ _____	\$ <u>261.</u>	<u>03/05/23</u>
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>03/04/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>104.</u>	<u>03/01/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>02/26/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>02/25/23</u>
6	FOOD _____ _____ _____	\$ <u>114.</u>	<u>02/22/23</u>
6	FOOD _____ _____ _____	\$ <u>176.</u>	<u>02/19/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>02/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>02/15/23</u>
6	FOOD _____ _____ _____	\$ <u>362.</u>	<u>02/12/23</u>
6	FOOD _____ _____ _____	\$ <u>267.</u>	<u>02/11/23</u>
6	FOOD _____ _____ _____	\$ <u>88.</u>	<u>02/08/23</u>
6	FOOD _____ _____ _____	\$ <u>313.</u>	<u>02/05/23</u>
6	FOOD _____ _____ _____	\$ <u>176.</u>	<u>02/04/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>140.</u>	<u>02/01/23</u>
6	FOOD _____ _____ _____	\$ <u>372.</u>	<u>01/28/23</u>
6	FOOD _____ _____ _____	\$ <u>241.</u>	<u>01/21/23</u>
6	FOOD _____ _____ _____	\$ <u>333.</u>	<u>01/15/23</u>
6	FOOD _____ _____ _____	\$ <u>303.</u>	<u>01/14/23</u>
6	FOOD _____ _____ _____	\$ <u>264.</u>	<u>01/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>209.</u>	<u>01/05/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>01/01/23</u>
6	FOOD _____ _____ _____	\$ <u>740.</u>	<u>08/21/23</u>
6	FOOD _____ _____ _____	\$ <u>1,108.</u>	<u>07/25/23</u>
6	FOOD _____ _____ _____	\$ <u>763.</u>	<u>10/27/23</u>
6	FOOD _____ _____ _____	\$ <u>632.</u>	<u>10/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>890.</u>	<u>09/29/23</u>
6	FOOD _____ _____ _____	\$ <u>662.</u>	<u>09/18/23</u>
6	FOOD _____ _____ _____	\$ <u>355.</u>	<u>08/16/23</u>
6	FOOD _____ _____ _____	\$ <u>300.</u>	<u>08/07/23</u>
6	FOOD _____ _____ _____	\$ <u>557.</u>	<u>08/04/23</u>
6	FOOD _____ _____ _____	\$ <u>753.</u>	<u>07/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>499.</u>	<u>06/19/23</u>
6	FOOD _____ _____ _____	\$ <u>1,079.</u>	<u>06/12/23</u>
6	FOOD _____ _____ _____	\$ <u>788.</u>	<u>06/08/23</u>
6	FOOD _____ _____ _____	\$ <u>522.</u>	<u>06/07/23</u>
6	FOOD _____ _____ _____	\$ <u>600.</u>	<u>06/06/23</u>
6	FOOD _____ _____ _____	\$ <u>730.</u>	<u>06/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>496.</u>	<u>06/01/23</u>
6	FOOD _____ _____ _____	\$ <u>561.</u>	<u>05/25/23</u>
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>05/22/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>05/18/23</u>
6	FOOD _____ _____ _____	\$ <u>645.</u>	<u>05/16/23</u>
6	FOOD _____ _____ _____	\$ <u>1,020.</u>	<u>05/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>818.</u>	<u>05/10/23</u>
6	FOOD _____ _____ _____	\$ <u>665.</u>	<u>05/04/23</u>
6	FOOD _____ _____ _____	\$ <u>531.</u>	<u>05/02/23</u>
6	FOOD _____ _____ _____	\$ <u>1,493.</u>	<u>04/28/23</u>
6	FOOD _____ _____ _____	\$ <u>698.</u>	<u>04/26/23</u>
6	FOOD _____ _____ _____	\$ <u>701.</u>	<u>04/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>900.</u>	<u>04/17/23</u>
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>04/11/23</u>
6	FOOD _____ _____ _____	\$ <u>880.</u>	<u>04/10/23</u>
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>04/06/23</u>
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>04/05/23</u>
6	FOOD _____ _____ _____	\$ <u>362.</u>	<u>04/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>486.</u>	<u>03/28/23</u>
6	FOOD _____ _____ _____	\$ <u>711.</u>	<u>03/27/23</u>
6	FOOD _____ _____ _____	\$ <u>636.</u>	<u>03/23/23</u>
6	FOOD _____ _____ _____	\$ <u>720.</u>	<u>03/20/23</u>
6	FOOD _____ _____ _____	\$ <u>391.</u>	<u>03/16/23</u>
6	FOOD _____ _____ _____	\$ <u>587.</u>	<u>03/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>844.</u>	<u>03/13/23</u>
6	FOOD _____ _____ _____	\$ <u>316.</u>	<u>03/09/23</u>
6	FOOD _____ _____ _____	\$ <u>766.</u>	<u>03/08/23</u>
6	FOOD _____ _____ _____	\$ <u>691.</u>	<u>03/06/23</u>
6	FOOD _____ _____ _____	\$ <u>98.</u>	<u>02/28/23</u>
6	FOOD _____ _____ _____	\$ <u>600.</u>	<u>02/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>535.</u>	<u>02/23/23</u>
6	FOOD _____ _____ _____	\$ <u>437.</u>	<u>02/21/23</u>
6	FOOD _____ _____ _____	\$ <u>417.</u>	<u>02/16/23</u>
6	FOOD _____ _____ _____	\$ <u>378.</u>	<u>02/14/23</u>
6	FOOD _____ _____ _____	\$ <u>401.</u>	<u>02/13/23</u>
6	FOOD _____ _____ _____	\$ <u>186.</u>	<u>02/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>401.</u>	<u>02/08/23</u>
6	FOOD _____ _____ _____	\$ <u>528.</u>	<u>02/07/23</u>
6	FOOD _____ _____ _____	\$ <u>479.</u>	<u>02/06/23</u>
6	FOOD _____ _____ _____	\$ <u>981.</u>	<u>02/03/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>01/30/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>01/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>01/16/23</u>
6	FOOD _____ _____ _____	\$ <u>59.</u>	<u>01/12/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>01/09/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>01/06/23</u>
6	FOOD _____ _____ _____	\$ <u>427.</u>	<u>01/04/23</u>
6	FOOD _____ _____ _____	\$ <u>613.</u>	<u>05/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>776.</u>	<u>10/13/23</u>
6	FOOD _____ _____ _____	\$ <u>453.</u>	<u>08/25/23</u>
6	FOOD _____ _____ _____	\$ <u>287.</u>	<u>08/15/23</u>
6	FOOD _____ _____ _____	\$ <u>421.</u>	<u>07/31/23</u>
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>07/27/23</u>
6	FOOD _____ _____ _____	\$ <u>707.</u>	<u>07/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>773.</u>	<u>07/17/23</u>
6	FOOD _____ _____ _____	\$ <u>672.</u>	<u>07/13/23</u>
6	FOOD _____ _____ _____	\$ <u>890.</u>	<u>07/07/23</u>
6	FOOD _____ _____ _____	\$ <u>505.</u>	<u>07/03/23</u>
6	FOOD _____ _____ _____	\$ <u>538.</u>	<u>06/29/23</u>
6	FOOD _____ _____ _____	\$ <u>675.</u>	<u>06/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>851.</u>	<u>06/22/23</u>
6	FOOD _____ _____ _____	\$ <u>502.</u>	<u>06/16/23</u>
6	FOOD _____ _____ _____	\$ <u>958.</u>	<u>06/14/23</u>
6	FOOD _____ _____ _____	\$ <u>1,099.</u>	<u>06/13/23</u>
6	FOOD _____ _____ _____	\$ <u>747.</u>	<u>05/03/23</u>
6	FOOD _____ _____ _____	\$ <u>323.</u>	<u>01/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>114.</u>	<u>01/24/23</u>
6	FOOD _____ _____ _____	\$ <u>117.</u>	<u>12/29/23</u>
6	FOOD _____ _____ _____	\$ <u>124.</u>	<u>12/28/23</u>
6	FOOD _____ _____ _____	\$ <u>104.</u>	<u>12/27/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>12/24/23</u>
6	FOOD _____ _____ _____	\$ <u>133.</u>	<u>12/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>12/23/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>12/20/23</u>
6	FOOD _____ _____ _____	\$ <u>88.</u>	<u>12/19/23</u>
6	FOOD _____ _____ _____	\$ <u>153.</u>	<u>12/19/23</u>
6	FOOD _____ _____ _____	\$ <u>137.</u>	<u>12/19/23</u>
6	FOOD _____ _____ _____	\$ <u>121.</u>	<u>12/17/23</u>

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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
6	FOOD _____ _____ _____	\$ <u>33.</u>	<u>12/15/23</u>
6	FOOD _____ _____ _____	\$ <u>137.</u>	<u>12/15/23</u>
6	FOOD _____ _____ _____	\$ <u>137.</u>	<u>12/13/23</u>
6	FOOD _____ _____ _____	\$ <u>88.</u>	<u>12/13/23</u>
6	FOOD _____ _____ _____	\$ <u>26.</u>	<u>12/11/23</u>
6	FOOD _____ _____ _____	\$ <u>124.</u>	<u>12/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>114.</u>	<u>12/09/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>12/08/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>12/06/23</u>
6	FOOD _____ _____ _____	\$ <u>114.</u>	<u>12/05/23</u>
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>12/04/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>12/02/23</u>

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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
6	FOOD _____ _____ _____	\$ <u>130.</u>	<u>11/29/23</u>
6	FOOD _____ _____ _____	\$ <u>143.</u>	<u>11/28/23</u>
6	FOOD _____ _____ _____	\$ <u>199.</u>	<u>11/27/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>11/26/23</u>
6	FOOD _____ _____ _____	\$ <u>209.</u>	<u>11/25/23</u>
6	FOOD _____ _____ _____	\$ <u>209.</u>	<u>11/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>189.</u>	<u>11/22/23</u>
6	FOOD _____ _____ _____	\$ <u>134.</u>	<u>11/20/23</u>
6	FOOD _____ _____ _____	\$ <u>245.</u>	<u>11/19/23</u>
6	FOOD _____ _____ _____	\$ <u>173.</u>	<u>11/17/23</u>
6	FOOD _____ _____ _____	\$ <u>137.</u>	<u>11/15/23</u>
6	FOOD _____ _____ _____	\$ <u>101.</u>	<u>11/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>336.</u>	<u>11/13/23</u>
6	FOOD _____ _____ _____	\$ <u>205.</u>	<u>11/08/23</u>
6	FOOD _____ _____ _____	\$ <u>127.</u>	<u>11/07/23</u>
6	FOOD _____ _____ _____	\$ <u>163.</u>	<u>11/06/23</u>
6	FOOD _____ _____ _____	\$ <u>173.</u>	<u>11/04/23</u>
6	FOOD _____ _____ _____	\$ <u>264.</u>	<u>11/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>245.</u>	<u>11/02/23</u>
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>11/01/23</u>
6	FOOD _____ _____ _____	\$ <u>25.</u>	<u>10/30/23</u>
6	FOOD _____ _____ _____	\$ <u>306.</u>	<u>10/30/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>10/29/23</u>
6	FOOD _____ _____ _____	\$ <u>140.</u>	<u>10/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>137.</u>	<u>10/24/23</u>
6	FOOD _____ _____ _____	\$ <u>469.</u>	<u>10/23/23</u>
6	FOOD _____ _____ _____	\$ <u>114.</u>	<u>10/22/23</u>
6	FOOD _____ _____ _____	\$ <u>173.</u>	<u>10/21/23</u>
6	FOOD _____ _____ _____	\$ <u>189.</u>	<u>10/18/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>10/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>121.</u>	<u>10/15/23</u>
6	FOOD _____ _____ _____	\$ <u>78.</u>	<u>10/14/23</u>
6	FOOD _____ _____ _____	\$ <u>238.</u>	<u>10/11/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>10/10/23</u>
6	FOOD _____ _____ _____	\$ <u>202.</u>	<u>10/09/23</u>
6	FOOD _____ _____ _____	\$ <u>173.</u>	<u>10/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>10/07/23</u>
6	FOOD _____ _____ _____	\$ <u>261.</u>	<u>10/06/23</u>
6	FOOD _____ _____ _____	\$ <u>202.</u>	<u>10/03/23</u>
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>10/02/23</u>
6	FOOD _____ _____ _____	\$ <u>280.</u>	<u>10/01/23</u>
6	FOOD _____ _____ _____	\$ <u>209.</u>	<u>09/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>469.</u>	<u>09/29/23</u>
6	FOOD _____ _____ _____	\$ <u>685.</u>	<u>09/28/23</u>
6	FOOD _____ _____ _____	\$ <u>212.</u>	<u>09/27/23</u>
6	FOOD _____ _____ _____	\$ <u>166.</u>	<u>09/26/23</u>
6	FOOD _____ _____ _____	\$ <u>85.</u>	<u>09/25/23</u>
6	FOOD _____ _____ _____	\$ <u>218.</u>	<u>09/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>222.</u>	<u>09/23/23</u>
6	FOOD _____ _____ _____	\$ <u>209.</u>	<u>09/22/23</u>
6	FOOD _____ _____ _____	\$ <u>215.</u>	<u>09/21/23</u>
6	FOOD _____ _____ _____	\$ <u>176.</u>	<u>09/20/23</u>
6	FOOD _____ _____ _____	\$ <u>189.</u>	<u>09/19/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>09/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>170.</u>	<u>09/17/23</u>
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>09/16/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>09/15/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>09/13/23</u>
6	FOOD _____ _____ _____	\$ <u>137.</u>	<u>09/12/23</u>
6	FOOD _____ _____ _____	\$ <u>250.</u>	<u>09/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 228.	09/09/23
6	FOOD _____ _____ _____	\$ 127.	09/08/23
6	FOOD _____ _____ _____	\$ 300.	09/06/23
6	FOOD _____ _____ _____	\$ 176.	09/05/23
6	FOOD _____ _____ _____	\$ 196.	09/02/23
6	FOOD _____ _____ _____	\$ 136.	09/01/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>68.</u>	<u>08/29/23</u>
6	FOOD _____ _____ _____	\$ <u>88.</u>	<u>08/28/23</u>
6	FOOD _____ _____ _____	\$ <u>170.</u>	<u>08/27/23</u>
6	FOOD _____ _____ _____	\$ <u>59.</u>	<u>08/26/23</u>
6	FOOD _____ _____ _____	\$ <u>199.</u>	<u>08/25/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>08/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>189.</u>	<u>08/22/23</u>
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>08/21/23</u>
6	FOOD _____ _____ _____	\$ <u>199.</u>	<u>08/19/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>08/18/23</u>
6	FOOD _____ _____ _____	\$ <u>316.</u>	<u>08/17/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>08/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>134.</u>	<u>08/15/23</u>
6	FOOD _____ _____ _____	\$ <u>104.</u>	<u>08/14/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>08/13/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>08/12/23</u>
6	FOOD _____ _____ _____	\$ <u>127.</u>	<u>08/11/23</u>
6	FOOD _____ _____ _____	\$ <u>104.</u>	<u>08/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>114.</u>	<u>08/08/23</u>
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>08/07/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>08/06/23</u>
6	FOOD _____ _____ _____	\$ <u>82.</u>	<u>08/05/23</u>
6	FOOD _____ _____ _____	\$ <u>130.</u>	<u>08/04/23</u>
6	FOOD _____ _____ _____	\$ <u>258.</u>	<u>08/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>205.</u>	<u>08/02/23</u>
6	FOOD _____ _____ _____	\$ <u>121.</u>	<u>08/01/23</u>
6	FOOD _____ _____ _____	\$ <u>130.</u>	<u>07/31/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>07/30/23</u>
6	FOOD _____ _____ _____	\$ <u>134.</u>	<u>07/29/23</u>
6	FOOD _____ _____ _____	\$ <u>111.</u>	<u>07/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>140.</u>	<u>07/27/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>07/26/23</u>
6	FOOD _____ _____ _____	\$ <u>130.</u>	<u>07/25/23</u>
6	FOOD _____ _____ _____	\$ <u>108.</u>	<u>07/24/23</u>
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>07/23/23</u>
6	FOOD _____ _____ _____	\$ <u>170.</u>	<u>07/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>196.</u>	<u>07/21/23</u>
6	FOOD _____ _____ _____	\$ <u>176.</u>	<u>07/20/23</u>
6	FOOD _____ _____ _____	\$ <u>189.</u>	<u>07/19/23</u>
6	FOOD _____ _____ _____	\$ <u>91.</u>	<u>07/18/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>07/17/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>07/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>166.</u>	<u>07/15/23</u>
6	FOOD _____ _____ _____	\$ <u>52.</u>	<u>07/14/23</u>
6	FOOD _____ _____ _____	\$ <u>121.</u>	<u>07/13/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>07/12/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>07/11/23</u>
6	FOOD _____ _____ _____	\$ <u>186.</u>	<u>07/10/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>166.</u>	<u>07/09/23</u>
6	FOOD _____ _____ _____	\$ <u>153.</u>	<u>07/08/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>07/07/23</u>
6	FOOD _____ _____ _____	\$ <u>176.</u>	<u>07/06/23</u>
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>07/05/23</u>
6	FOOD _____ _____ _____	\$ <u>205.</u>	<u>07/04/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>251.</u>	<u>07/03/23</u>
6	FOOD _____ _____ _____	\$ <u>202.</u>	<u>06/30/23</u>
6	FOOD _____ _____ _____	\$ <u>212.</u>	<u>06/28/23</u>
6	FOOD _____ _____ _____	\$ <u>134.</u>	<u>06/27/23</u>
6	FOOD _____ _____ _____	\$ <u>111.</u>	<u>06/26/23</u>
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>06/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>06/24/23</u>
6	FOOD _____ _____ _____	\$ <u>199.</u>	<u>06/23/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>06/22/23</u>
6	FOOD _____ _____ _____	\$ <u>453.</u>	<u>06/22/23</u>
6	FOOD _____ _____ _____	\$ <u>225.</u>	<u>06/21/23</u>
6	FOOD _____ _____ _____	\$ <u>98.</u>	<u>06/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>205.</u>	<u>06/19/23</u>
6	FOOD _____ _____ _____	\$ <u>111.</u>	<u>06/18/23</u>
6	FOOD _____ _____ _____	\$ <u>186.</u>	<u>06/17/23</u>
6	FOOD _____ _____ _____	\$ <u>196.</u>	<u>06/16/23</u>
6	FOOD _____ _____ _____	\$ <u>98.</u>	<u>06/15/23</u>
6	FOOD _____ _____ _____	\$ <u>176.</u>	<u>06/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>75.</u>	<u>06/13/23</u>
6	FOOD _____ _____ _____	\$ <u>186.</u>	<u>06/12/23</u>
6	FOOD _____ _____ _____	\$ <u>170.</u>	<u>06/11/23</u>
6	FOOD _____ _____ _____	\$ <u>202.</u>	<u>06/10/23</u>
6	FOOD _____ _____ _____	\$ <u>245.</u>	<u>06/09/23</u>
6	FOOD _____ _____ _____	\$ <u>108.</u>	<u>06/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>271.</u>	<u>06/07/23</u>
6	FOOD _____ _____ _____	\$ <u>114.</u>	<u>06/06/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>06/05/23</u>
6	FOOD _____ _____ _____	\$ <u>205.</u>	<u>06/04/23</u>
6	FOOD _____ _____ _____	\$ <u>160.</u>	<u>06/03/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>06/02/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>98.</u>	<u>06/01/23</u>
6	FOOD _____ _____ _____	\$ <u>209.</u>	<u>05/31/23</u>
6	FOOD _____ _____ _____	\$ <u>134.</u>	<u>05/30/23</u>
6	FOOD _____ _____ _____	\$ <u>134.</u>	<u>05/29/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>05/29/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>05/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>228.</u>	<u>05/27/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>05/26/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>05/25/23</u>
6	FOOD _____ _____ _____	\$ <u>205.</u>	<u>05/24/23</u>
6	FOOD _____ _____ _____	\$ <u>101.</u>	<u>05/23/23</u>
6	FOOD _____ _____ _____	\$ <u>186.</u>	<u>05/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>241.</u>	<u>05/21/23</u>
6	FOOD _____ _____ _____	\$ <u>231.</u>	<u>05/20/23</u>
6	FOOD _____ _____ _____	\$ <u>143.</u>	<u>05/19/23</u>
6	FOOD _____ _____ _____	\$ <u>59.</u>	<u>05/18/23</u>
6	FOOD _____ _____ _____	\$ <u>212.</u>	<u>05/17/23</u>
6	FOOD _____ _____ _____	\$ <u>104.</u>	<u>05/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 111.	05/14/23
6	FOOD _____ _____ _____	\$ 147.	05/13/23
6	FOOD _____ _____ _____	\$ 140.	05/12/23
6	FOOD _____ _____ _____	\$ 160.	05/11/23
6	FOOD _____ _____ _____	\$ 163.	05/10/23
6	FOOD _____ _____ _____	\$ 186.	05/09/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>108.</u>	<u>05/07/23</u>
6	FOOD _____ _____ _____	\$ <u>179.</u>	<u>05/06/23</u>
6	FOOD _____ _____ _____	\$ <u>137.</u>	<u>05/05/23</u>
6	FOOD _____ _____ _____	\$ <u>235.</u>	<u>05/04/23</u>
6	FOOD _____ _____ _____	\$ <u>65.</u>	<u>05/04/23</u>
6	FOOD _____ _____ _____	\$ <u>121.</u>	<u>05/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>163.</u>	<u>05/02/23</u>
6	FOOD _____ _____ _____	\$ <u>62.</u>	<u>05/02/23</u>
6	FOOD _____ _____ _____	\$ <u>111.</u>	<u>05/01/23</u>
6	FOOD _____ _____ _____	\$ <u>117.</u>	<u>04/30/23</u>
6	FOOD _____ _____ _____	\$ <u>82.</u>	<u>04/29/23</u>
6	FOOD _____ _____ _____	\$ <u>173.</u>	<u>04/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>170.</u>	<u>04/28/23</u>
6	FOOD _____ _____ _____	\$ <u>173.</u>	<u>04/27/23</u>
6	FOOD _____ _____ _____	\$ <u>196.</u>	<u>04/26/23</u>
6	FOOD _____ _____ _____	\$ <u>489.</u>	<u>04/25/23</u>
6	FOOD _____ _____ _____	\$ <u>163.</u>	<u>04/24/23</u>
6	FOOD _____ _____ _____	\$ <u>143.</u>	<u>04/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>04/22/23</u>
6	FOOD _____ _____ _____	\$ <u>717.</u>	<u>04/21/23</u>
6	FOOD _____ _____ _____	\$ <u>186.</u>	<u>04/21/23</u>
6	FOOD _____ _____ _____	\$ <u>176.</u>	<u>04/20/23</u>
6	FOOD _____ _____ _____	\$ <u>183.</u>	<u>04/19/23</u>
6	FOOD _____ _____ _____	\$ <u>108.</u>	<u>04/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>111.</u>	<u>04/17/23</u>
6	FOOD _____ _____ _____	\$ <u>130.</u>	<u>04/16/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>04/15/23</u>
6	FOOD _____ _____ _____	\$ <u>163.</u>	<u>04/14/23</u>
6	FOOD _____ _____ _____	\$ <u>134.</u>	<u>04/13/23</u>
6	FOOD _____ _____ _____	\$ <u>130.</u>	<u>04/12/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>121.</u>	<u>04/11/23</u>
6	FOOD _____ _____ _____	\$ <u>375.</u>	<u>04/08/23</u>
6	FOOD _____ _____ _____	\$ <u>137.</u>	<u>04/08/23</u>
6	FOOD _____ _____ _____	\$ <u>130.</u>	<u>04/07/23</u>
6	FOOD _____ _____ _____	\$ <u>176.</u>	<u>04/06/23</u>
6	FOOD _____ _____ _____	\$ <u>78.</u>	<u>04/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>124.</u>	<u>04/04/23</u>
6	FOOD _____ _____ _____	\$ <u>68.</u>	<u>04/03/23</u>
6	FOOD _____ _____ _____	\$ <u>130.</u>	<u>04/02/23</u>
6	FOOD _____ _____ _____	\$ <u>196.</u>	<u>04/01/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>03/31/23</u>
6	FOOD _____ _____ _____	\$ <u>473.</u>	<u>03/31/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>209.</u>	<u>03/30/23</u>
6	FOOD _____ _____ _____	\$ <u>140.</u>	<u>03/28/23</u>
6	FOOD _____ _____ _____	\$ <u>170.</u>	<u>03/27/23</u>
6	FOOD _____ _____ _____	\$ <u>209.</u>	<u>03/26/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>03/25/23</u>
6	FOOD _____ _____ _____	\$ <u>124.</u>	<u>03/24/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 108.	03/23/23
6	FOOD _____ _____ _____	\$ 150.	03/22/23
6	FOOD _____ _____ _____	\$ 82.	03/20/23
6	FOOD _____ _____ _____	\$ 78.	03/19/23
6	FOOD _____ _____ _____	\$ 173.	03/17/23
6	FOOD _____ _____ _____	\$ 170.	03/15/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>03/14/23</u>
6	FOOD _____ _____ _____	\$ <u>134.</u>	<u>03/13/23</u>
6	FOOD _____ _____ _____	\$ <u>143.</u>	<u>03/12/23</u>
6	FOOD _____ _____ _____	\$ <u>166.</u>	<u>03/11/23</u>
6	FOOD _____ _____ _____	\$ <u>150.</u>	<u>03/10/23</u>
6	FOOD _____ _____ _____	\$ <u>192.</u>	<u>03/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 170.	03/08/23
6	FOOD _____ _____ _____	\$ 183.	03/07/23
6	FOOD _____ _____ _____	\$ 78.	03/06/23
6	FOOD _____ _____ _____	\$ 130.	03/05/23
6	FOOD _____ _____ _____	\$ 137.	03/04/23
6	FOOD _____ _____ _____	\$ 150.	03/03/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>127.</u>	<u>03/02/23</u>
6	FOOD _____ _____ _____	\$ <u>176.</u>	<u>03/01/23</u>
6	FOOD _____ _____ _____	\$ <u>130.</u>	<u>02/28/23</u>
6	FOOD _____ _____ _____	\$ <u>163.</u>	<u>02/27/23</u>
6	FOOD _____ _____ _____	\$ <u>199.</u>	<u>02/26/23</u>
6	FOOD _____ _____ _____	\$ <u>218.</u>	<u>02/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 170.	02/24/23
6	FOOD _____ _____ _____	\$ 140.	02/23/23
6	FOOD _____ _____ _____	\$ 163.	02/22/23
6	FOOD _____ _____ _____	\$ 189.	02/21/23
6	FOOD _____ _____ _____	\$ 72.	02/20/23
6	FOOD _____ _____ _____	\$ 163.	02/19/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 127.	02/18/23
6	FOOD _____ _____ _____	\$ 170.	02/17/23
6	FOOD _____ _____ _____	\$ 108.	02/16/23
6	FOOD _____ _____ _____	\$ 68.	02/15/23
6	FOOD _____ _____ _____	\$ 121.	02/14/23
6	FOOD _____ _____ _____	\$ 150.	02/13/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 176.	02/12/23
6	FOOD _____ _____ _____	\$ 143.	02/11/23
6	FOOD _____ _____ _____	\$ 75.	02/10/23
6	FOOD _____ _____ _____	\$ 130.	02/09/23
6	FOOD _____ _____ _____	\$ 127.	02/08/23
6	FOOD _____ _____ _____	\$ 111.	02/07/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>62.</u>	<u>02/06/23</u>
6	FOOD _____ _____ _____	\$ <u>72.</u>	<u>02/05/23</u>
6	FOOD _____ _____ _____	\$ <u>59.</u>	<u>02/04/23</u>
6	FOOD _____ _____ _____	\$ <u>55.</u>	<u>02/03/23</u>
6	FOOD _____ _____ _____	\$ <u>98.</u>	<u>02/02/23</u>
6	FOOD _____ _____ _____	\$ <u>274.</u>	<u>02/02/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>114.</u>	<u>02/01/23</u>
6	FOOD _____ _____ _____	\$ <u>170.</u>	<u>01/31/23</u>
6	FOOD _____ _____ _____	\$ <u>104.</u>	<u>01/30/23</u>
6	FOOD _____ _____ _____	\$ <u>140.</u>	<u>01/29/23</u>
6	FOOD _____ _____ _____	\$ <u>91.</u>	<u>01/28/23</u>
6	FOOD _____ _____ _____	\$ <u>13.</u>	<u>01/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>143.</u>	<u>01/26/23</u>
6	FOOD _____ _____ _____	\$ <u>124.</u>	<u>01/24/23</u>
6	FOOD _____ _____ _____	\$ <u>59.</u>	<u>01/22/23</u>
6	FOOD _____ _____ _____	\$ <u>153.</u>	<u>01/21/23</u>
6	FOOD _____ _____ _____	\$ <u>72.</u>	<u>01/20/23</u>
6	FOOD _____ _____ _____	\$ <u>91.</u>	<u>01/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ 163.	01/18/23
6	FOOD _____ _____ _____	\$ 147.	01/17/23
6	FOOD _____ _____ _____	\$ 130.	01/16/23
6	FOOD _____ _____ _____	\$ 36.	01/15/23
6	FOOD _____ _____ _____	\$ 10.	01/15/23
6	FOOD _____ _____ _____	\$ 179.	01/14/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>78.</u>	<u>01/14/23</u>
6	FOOD _____ _____ _____	\$ <u>117.</u>	<u>01/13/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>01/12/23</u>
6	FOOD _____ _____ _____	\$ <u>156.</u>	<u>01/11/23</u>
6	FOOD _____ _____ _____	\$ <u>147.</u>	<u>01/10/23</u>
6	FOOD _____ _____ _____	\$ <u>143.</u>	<u>01/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>153.</u>	<u>01/08/23</u>
6	FOOD _____ _____ _____	\$ <u>127.</u>	<u>01/07/23</u>
6	FOOD _____ _____ _____	\$ <u>202.</u>	<u>01/06/23</u>
6	FOOD _____ _____ _____	\$ <u>78.</u>	<u>01/05/23</u>
6	FOOD _____ _____ _____	\$ <u>140.</u>	<u>01/04/23</u>
6	FOOD _____ _____ _____	\$ <u>117.</u>	<u>01/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
6	FOOD _____ _____ _____	\$ <u>153.</u>	<u>01/02/23</u>
6	FOOD _____ _____ _____	\$ <u>111.</u>	<u>01/01/23</u>
7	FOOD _____ _____ _____	\$ <u>1,376.</u>	<u>12/14/23</u>
7	FOOD _____ _____ _____	\$ <u>408.</u>	<u>12/09/23</u>
7	FOOD _____ _____ _____	\$ <u>4,776.</u>	<u>12/09/23</u>
7	FOOD _____ _____ _____	\$ <u>3,948.</u>	<u>12/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ <u>4,020.</u>	<u>11/29/23</u>
7	FOOD _____ _____ _____	\$ <u>6,455.</u>	<u>11/28/23</u>
7	FOOD _____ _____ _____	\$ <u>2,178.</u>	<u>11/21/23</u>
7	FOOD _____ _____ _____	\$ <u>16,998.</u>	<u>11/20/23</u>
7	FOOD _____ _____ _____	\$ <u>5,933.</u>	<u>11/15/23</u>
7	FOOD _____ _____ _____	\$ <u>3,716.</u>	<u>11/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ 509.	11/10/23
7	FOOD _____ _____ _____	\$ 1,050.	11/08/23
7	FOOD _____ _____ _____	\$ 3,648.	11/06/23
7	FOOD _____ _____ _____	\$ 1,105.	11/03/23
7	FOOD _____ _____ _____	\$ 1,105.	10/30/23
7	FOOD _____ _____ _____	\$ 10,706.	10/27/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ <u>1,069.</u>	<u>10/23/23</u>
7	FOOD _____ _____ _____	\$ <u>750.</u>	<u>10/23/23</u>
7	FOOD _____ _____ _____	\$ <u>1,956.</u>	<u>10/19/23</u>
7	FOOD _____ _____ _____	\$ <u>3,566.</u>	<u>10/17/23</u>
7	FOOD _____ _____ _____	\$ <u>3,945.</u>	<u>10/11/23</u>
7	FOOD _____ _____ _____	\$ <u>571.</u>	<u>10/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ <u>2,980.</u>	<u>10/09/23</u>
7	FOOD _____ _____ _____	\$ <u>1,154.</u>	<u>10/05/23</u>
7	FOOD _____ _____ _____	\$ <u>5,888.</u>	<u>10/04/23</u>
7	FOOD _____ _____ _____	\$ <u>2,540.</u>	<u>10/03/23</u>
7	FOOD _____ _____ _____	\$ <u>2,693.</u>	<u>09/29/23</u>
7	FOOD _____ _____ _____	\$ <u>3,104.</u>	<u>09/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ <u>727.</u>	<u>09/23/23</u>
7	FOOD _____ _____ _____	\$ <u>616.</u>	<u>09/19/23</u>
7	FOOD _____ _____ _____	\$ <u>3,668.</u>	<u>08/28/23</u>
7	FOOD _____ _____ _____	\$ <u>3,130.</u>	<u>07/31/23</u>
7	FOOD _____ _____ _____	\$ <u>3,609.</u>	<u>07/18/23</u>
7	FOOD _____ _____ _____	\$ <u>1,024.</u>	<u>07/14/23</u>

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>07/14/23</u>
7	FOOD _____ _____ _____	\$ <u>2,921.</u>	<u>06/09/23</u>
7	FOOD _____ _____ _____	\$ <u>2,738.</u>	<u>06/06/23</u>
7	FOOD _____ _____ _____	\$ <u>2,054.</u>	<u>06/02/23</u>
7	FOOD _____ _____ _____	\$ <u>1,956.</u>	<u>05/23/23</u>
7	FOOD _____ _____ _____	\$ <u>1,076.</u>	<u>05/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ <u>880.</u>	<u>05/01/23</u>
7	FOOD _____ _____ _____	\$ <u>701.</u>	<u>04/18/23</u>
7	FOOD _____ _____ _____	\$ <u>1,141.</u>	<u>04/17/23</u>
7	FOOD _____ _____ _____	\$ <u>4,368.</u>	<u>04/14/23</u>
7	FOOD _____ _____ _____	\$ <u>1,601.</u>	<u>04/11/23</u>
7	FOOD _____ _____ _____	\$ <u>4,994.</u>	<u>04/03/23</u>

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ <u>17,017.</u>	<u>03/18/23</u>
7	FOOD _____ _____ _____	\$ <u>4,955.</u>	<u>03/15/23</u>
7	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>03/15/23</u>
7	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>03/15/23</u>
7	FOOD _____ _____ _____	\$ <u>2,712.</u>	<u>03/07/23</u>
7	FOOD _____ _____ _____	\$ <u>2,608.</u>	<u>03/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ <u>15,648.</u>	<u>02/28/23</u>
7	FOOD _____ _____ _____	\$ <u>16,300.</u>	<u>02/28/23</u>
7	FOOD _____ _____ _____	\$ <u>6,331.</u>	<u>02/24/23</u>
7	FOOD _____ _____ _____	\$ <u>2,021.</u>	<u>02/21/23</u>
7	FOOD _____ _____ _____	\$ <u>5,835.</u>	<u>02/14/23</u>
7	FOOD _____ _____ _____	\$ <u>3,006.</u>	<u>02/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ <u>12,747.</u>	<u>01/31/23</u>
7	FOOD _____ _____ _____	\$ <u>1,418.</u>	<u>01/24/23</u>
7	FOOD _____ _____ _____	\$ <u>8,419.</u>	<u>01/23/23</u>
7	FOOD _____ _____ _____	\$ <u>9,242.</u>	<u>01/19/23</u>
7	FOOD _____ _____ _____	\$ <u>3,505.</u>	<u>01/17/23</u>
7	FOOD _____ _____ _____	\$ <u>12,127.</u>	<u>01/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	FOOD _____ _____ _____	\$ <u>554.</u>	<u>01/11/23</u>
7	FOOD _____ _____ _____	\$ <u>2,406.</u>	<u>01/10/23</u>
7	FOOD _____ _____ _____	\$ <u>1,043.</u>	<u>01/09/23</u>
7	FOOD _____ _____ _____	\$ <u>440.</u>	<u>01/05/23</u>
7	FOOD _____ _____ _____	\$ <u>1,532.</u>	<u>01/04/23</u>
7	FOOD _____ _____ _____	\$ <u>8,104.</u>	<u>01/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>7,687.</u>	<u>03/01/23</u>
8	FOOD _____ _____ _____	\$ <u>7,684.</u>	<u>02/23/23</u>
8	FOOD _____ _____ _____	\$ <u>7,658.</u>	<u>02/24/23</u>
8	FOOD _____ _____ _____	\$ <u>1,646.</u>	<u>12/31/23</u>
8	FOOD _____ _____ _____	\$ <u>952.</u>	<u>12/30/23</u>
8	FOOD _____ _____ _____	\$ <u>1,291.</u>	<u>12/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>626.</u>	<u>12/29/23</u>
8	FOOD _____ _____ _____	\$ <u>2,745.</u>	<u>12/29/23</u>
8	FOOD _____ _____ _____	\$ <u>1,982.</u>	<u>12/28/23</u>
8	FOOD _____ _____ _____	\$ <u>1,685.</u>	<u>12/28/23</u>
8	FOOD _____ _____ _____	\$ <u>4,192.</u>	<u>12/28/23</u>
8	FOOD _____ _____ _____	\$ <u>665.</u>	<u>12/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ _____ 0.	<u>12/26/23</u>
8	FOOD _____ _____ _____	\$ _____ 4,852.	<u>12/26/23</u>
8	FOOD _____ _____ _____	\$ _____ 727.	<u>12/24/23</u>
8	FOOD _____ _____ _____	\$ _____ 1,183.	<u>12/23/23</u>
8	FOOD _____ _____ _____	\$ _____ 509.	<u>12/23/23</u>
8	FOOD _____ _____ _____	\$ _____ 313.	<u>12/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>965.</u>	<u>12/22/23</u>
8	FOOD _____ _____ _____	\$ <u>2,715.</u>	<u>12/21/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>12/21/23</u>
8	FOOD _____ _____ _____	\$ <u>541.</u>	<u>12/20/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>12/20/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>12/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,907.</u>	<u>12/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,826.</u>	<u>12/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,108.</u>	<u>12/17/23</u>
8	FOOD _____ _____ _____	\$ <u>988.</u>	<u>12/17/23</u>
8	FOOD _____ _____ _____	\$ <u>1,255.</u>	<u>12/16/23</u>
8	FOOD _____ _____ _____	\$ <u>1,376.</u>	<u>12/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,284.</u>	<u>12/15/23</u>
8	FOOD _____ _____ _____	\$ <u>333.</u>	<u>12/15/23</u>
8	FOOD _____ _____ _____	\$ <u>1,875.</u>	<u>12/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,904.</u>	<u>12/14/23</u>
8	FOOD _____ _____ _____	\$ <u>349.</u>	<u>12/13/23</u>
8	FOOD _____ _____ _____	\$ <u>26.</u>	<u>12/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>936.</u>	<u>12/13/23</u>
8	FOOD _____ _____ _____	\$ <u>2,021.</u>	<u>12/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,196.</u>	<u>12/12/23</u>
8	FOOD _____ _____ _____	\$ <u>1,630.</u>	<u>12/12/23</u>
8	FOOD _____ _____ _____	\$ <u>2,422.</u>	<u>12/11/23</u>
8	FOOD _____ _____ _____	\$ <u>854.</u>	<u>12/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,233.</u>	<u>12/11/23</u>
8	FOOD _____ _____ _____	\$ <u>2,487.</u>	<u>12/11/23</u>
8	FOOD _____ _____ _____	\$ <u>672.</u>	<u>12/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,953.</u>	<u>12/09/23</u>
8	FOOD _____ _____ _____	\$ <u>2,568.</u>	<u>12/09/23</u>
8	FOOD _____ _____ _____	\$ <u>828.</u>	<u>12/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,875.</u>	<u>12/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,875.</u>	<u>12/07/23</u>
8	FOOD _____ _____ _____	\$ <u>2,311.</u>	<u>12/07/23</u>
8	FOOD _____ _____ _____	\$ <u>707.</u>	<u>12/06/23</u>
8	FOOD _____ _____ _____	\$ <u>450.</u>	<u>12/06/23</u>
8	FOOD _____ _____ _____	\$ <u>887.</u>	<u>12/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,096.</u>	<u>12/05/23</u>
8	FOOD _____ _____ _____	\$ <u>1,004.</u>	<u>12/04/23</u>
8	FOOD _____ _____ _____	\$ <u>3,156.</u>	<u>12/04/23</u>
8	FOOD _____ _____ _____	\$ <u>1,992.</u>	<u>12/04/23</u>
8	FOOD _____ _____ _____	\$ <u>668.</u>	<u>12/03/23</u>
8	FOOD _____ _____ _____	\$ <u>3,296.</u>	<u>12/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,462.</u>	<u>12/02/23</u>
8	FOOD _____ _____ _____	\$ <u>1,232.</u>	<u>12/02/23</u>
8	FOOD _____ _____ _____	\$ <u>1,395.</u>	<u>12/01/23</u>
8	FOOD _____ _____ _____	\$ <u>2,562.</u>	<u>11/30/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>11/30/23</u>
8	FOOD _____ _____ _____	\$ <u>1,131.</u>	<u>11/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,453.</u>	<u>11/29/23</u>
8	FOOD _____ _____ _____	\$ <u>838.</u>	<u>11/29/23</u>
8	FOOD _____ _____ _____	\$ <u>258.</u>	<u>11/29/23</u>
8	FOOD _____ _____ _____	\$ <u>2,145.</u>	<u>11/28/23</u>
8	FOOD _____ _____ _____	\$ <u>1,275.</u>	<u>11/27/23</u>
8	FOOD _____ _____ _____	\$ <u>2,810.</u>	<u>11/27/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,359.</u>	<u>11/26/23</u>
8	FOOD _____ _____ _____	\$ <u>2,298.</u>	<u>11/26/23</u>
8	FOOD _____ _____ _____	\$ <u>668.</u>	<u>11/26/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>11/26/23</u>
8	FOOD _____ _____ _____	\$ <u>2,983.</u>	<u>11/25/23</u>
8	FOOD _____ _____ _____	\$ <u>1,050.</u>	<u>11/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,572.</u>	<u>11/24/23</u>
8	FOOD _____ _____ _____	\$ <u>2,852.</u>	<u>11/22/23</u>
8	FOOD _____ _____ _____	\$ <u>1,934.</u>	<u>11/22/23</u>
8	FOOD _____ _____ _____	\$ <u>1,386.</u>	<u>11/21/23</u>
8	FOOD _____ _____ _____	\$ <u>5,379.</u>	<u>11/21/23</u>
8	FOOD _____ _____ _____	\$ <u>2,311.</u>	<u>11/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,553.</u>	<u>11/20/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>11/20/23</u>
8	FOOD _____ _____ _____	\$ <u>2,321.</u>	<u>11/19/23</u>
8	FOOD _____ _____ _____	\$ <u>3,729.</u>	<u>11/19/23</u>
8	FOOD _____ _____ _____	\$ <u>2,034.</u>	<u>11/19/23</u>
8	FOOD _____ _____ _____	\$ <u>2,575.</u>	<u>11/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,661.</u>	<u>11/17/23</u>
8	FOOD _____ _____ _____	\$ <u>2,240.</u>	<u>11/17/23</u>
8	FOOD _____ _____ _____	\$ <u>1,979.</u>	<u>11/16/23</u>
8	FOOD _____ _____ _____	\$ <u>1,601.</u>	<u>11/16/23</u>
8	FOOD _____ _____ _____	\$ <u>994.</u>	<u>11/15/23</u>
8	FOOD _____ _____ _____	\$ <u>1,397.</u>	<u>11/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>509.</u>	<u>11/14/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>11/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,549.</u>	<u>11/14/23</u>
8	FOOD _____ _____ _____	\$ <u>955.</u>	<u>11/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,682.</u>	<u>11/13/23</u>
8	FOOD _____ _____ _____	\$ <u>825.</u>	<u>11/12/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,377.</u>	<u>11/12/23</u>
8	FOOD _____ _____ _____	\$ <u>2,337.</u>	<u>11/11/23</u>
8	FOOD _____ _____ _____	\$ <u>9,493.</u>	<u>11/11/23</u>
8	FOOD _____ _____ _____	\$ <u>1,307.</u>	<u>11/11/23</u>
8	FOOD _____ _____ _____	\$ <u>3,390.</u>	<u>11/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,959.</u>	<u>11/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,379.</u>	<u>11/09/23</u>
8	FOOD _____ _____ _____	\$ <u>1,607.</u>	<u>11/09/23</u>
8	FOOD _____ _____ _____	\$ <u>782.</u>	<u>11/08/23</u>
8	FOOD _____ _____ _____	\$ <u>890.</u>	<u>11/08/23</u>
8	FOOD _____ _____ _____	\$ <u>584.</u>	<u>11/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,880.</u>	<u>11/07/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,405.</u>	<u>11/06/23</u>
8	FOOD _____ _____ _____	\$ <u>2,197.</u>	<u>11/06/23</u>
8	FOOD _____ _____ _____	\$ <u>793.</u>	<u>11/05/23</u>
8	FOOD _____ _____ _____	\$ <u>2,093.</u>	<u>11/05/23</u>
8	FOOD _____ _____ _____	\$ <u>544.</u>	<u>11/05/23</u>
8	FOOD _____ _____ _____	\$ <u>59.</u>	<u>11/04/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>636.</u>	<u>11/03/23</u>
8	FOOD _____ _____ _____	\$ <u>1,689.</u>	<u>11/02/23</u>
8	FOOD _____ _____ _____	\$ <u>1,118.</u>	<u>11/02/23</u>
8	FOOD _____ _____ _____	\$ <u>940.</u>	<u>11/02/23</u>
8	FOOD _____ _____ _____	\$ <u>1,871.</u>	<u>11/01/23</u>
8	FOOD _____ _____ _____	\$ <u>4,434.</u>	<u>11/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>841.</u>	<u>10/31/23</u>
8	FOOD _____ _____ _____	\$ <u>1,666.</u>	<u>10/30/23</u>
8	FOOD _____ _____ _____	\$ <u>916.</u>	<u>10/30/23</u>
8	FOOD _____ _____ _____	\$ <u>954.</u>	<u>10/29/23</u>
8	FOOD _____ _____ _____	\$ <u>805.</u>	<u>10/29/23</u>
8	FOOD _____ _____ _____	\$ <u>1,060.</u>	<u>10/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,718.</u>	<u>10/28/23</u>
8	FOOD _____ _____ _____	\$ <u>2,875.</u>	<u>10/27/23</u>
8	FOOD _____ _____ _____	\$ <u>2,074.</u>	<u>10/26/23</u>
8	FOOD _____ _____ _____	\$ <u>1,206.</u>	<u>10/26/23</u>
8	FOOD _____ _____ _____	\$ <u>662.</u>	<u>10/25/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>10/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>688.</u>	<u>10/25/23</u>
8	FOOD _____ _____ _____	\$ <u>531.</u>	<u>10/24/23</u>
8	FOOD _____ _____ _____	\$ <u>1,281.</u>	<u>10/24/23</u>
8	FOOD _____ _____ _____	\$ <u>2,109.</u>	<u>10/23/23</u>
8	FOOD _____ _____ _____	\$ <u>1,392.</u>	<u>10/23/23</u>
8	FOOD _____ _____ _____	\$ <u>1,092.</u>	<u>10/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,663.</u>	<u>10/22/23</u>
8	FOOD _____ _____ _____	\$ <u>1,878.</u>	<u>10/21/23</u>
8	FOOD _____ _____ _____	\$ <u>411.</u>	<u>10/20/23</u>
8	FOOD _____ _____ _____	\$ <u>1,826.</u>	<u>10/20/23</u>
8	FOOD _____ _____ _____	\$ <u>1,904.</u>	<u>10/20/23</u>
8	FOOD _____ _____ _____	\$ <u>1,375.</u>	<u>10/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,180.</u>	<u>10/19/23</u>
8	FOOD _____ _____ _____	\$ <u>1,591.</u>	<u>10/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,202.</u>	<u>10/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,861.</u>	<u>10/17/23</u>
8	FOOD _____ _____ _____	\$ <u>1,428.</u>	<u>10/16/23</u>
8	FOOD _____ _____ _____	\$ <u>2,383.</u>	<u>10/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>466.</u>	<u>10/15/23</u>
8	FOOD _____ _____ _____	\$ <u>1,964.</u>	<u>10/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,073.</u>	<u>10/14/23</u>
8	FOOD _____ _____ _____	\$ <u>4,453.</u>	<u>10/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,363.</u>	<u>10/12/23</u>
8	FOOD _____ _____ _____	\$ <u>740.</u>	<u>10/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,526.</u>	<u>10/11/23</u>
8	FOOD _____ _____ _____	\$ <u>1,089.</u>	<u>10/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,314.</u>	<u>10/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,767.</u>	<u>10/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,449.</u>	<u>10/09/23</u>
8	FOOD _____ _____ _____	\$ <u>287.</u>	<u>10/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>802.</u>	<u>10/09/23</u>
8	FOOD _____ _____ _____	\$ <u>2,318.</u>	<u>10/08/23</u>
8	FOOD _____ _____ _____	\$ <u>1,976.</u>	<u>10/08/23</u>
8	FOOD _____ _____ _____	\$ <u>1,525.</u>	<u>10/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,659.</u>	<u>10/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,520.</u>	<u>10/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>10,641.</u>	<u>10/05/23</u>
8	FOOD _____ _____ _____	\$ <u>1,460.</u>	<u>10/05/23</u>
8	FOOD _____ _____ _____	\$ <u>1,760.</u>	<u>10/04/23</u>
8	FOOD _____ _____ _____	\$ <u>1,916.</u>	<u>10/03/23</u>
8	FOOD _____ _____ _____	\$ <u>2,187.</u>	<u>10/03/23</u>
8	FOOD _____ _____ _____	\$ <u>4,323.</u>	<u>10/02/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,670.</u>	<u>10/02/23</u>
8	FOOD _____ _____ _____	\$ <u>375.</u>	<u>10/01/23</u>
8	FOOD _____ _____ _____	\$ <u>2,031.</u>	<u>10/01/23</u>
8	FOOD _____ _____ _____	\$ <u>1,128.</u>	<u>09/30/23</u>
8	FOOD _____ _____ _____	\$ <u>981.</u>	<u>09/29/23</u>
8	FOOD _____ _____ _____	\$ <u>1,151.</u>	<u>09/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,487.</u>	<u>09/28/23</u>
8	FOOD _____ _____ _____	\$ <u>502.</u>	<u>09/27/23</u>
8	FOOD _____ _____ _____	\$ <u>2,002.</u>	<u>09/27/23</u>
8	FOOD _____ _____ _____	\$ <u>1,384.</u>	<u>09/27/23</u>
8	FOOD _____ _____ _____	\$ <u>1,982.</u>	<u>09/26/23</u>
8	FOOD _____ _____ _____	\$ <u>906.</u>	<u>09/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,321.</u>	<u>09/25/23</u>
8	FOOD _____ _____ _____	\$ <u>1,484.</u>	<u>09/25/23</u>
8	FOOD _____ _____ _____	\$ <u>701.</u>	<u>09/24/23</u>
8	FOOD _____ _____ _____	\$ <u>864.</u>	<u>09/24/23</u>
8	FOOD _____ _____ _____	\$ <u>1,793.</u>	<u>09/24/23</u>
8	FOOD _____ _____ _____	\$ <u>1,029.</u>	<u>09/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>769.</u>	<u>09/22/23</u>
8	FOOD _____ _____ _____	\$ <u>1,522.</u>	<u>09/21/23</u>
8	FOOD _____ _____ _____	\$ <u>626.</u>	<u>09/21/23</u>
8	FOOD _____ _____ _____	\$ <u>544.</u>	<u>09/20/23</u>
8	FOOD _____ _____ _____	\$ <u>1,783.</u>	<u>09/20/23</u>
8	FOOD _____ _____ _____	\$ <u>942.</u>	<u>09/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,076.</u>	<u>09/19/23</u>
8	FOOD _____ _____ _____	\$ <u>489.</u>	<u>09/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,017.</u>	<u>09/18/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>09/18/23</u>
8	FOOD _____ _____ _____	\$ <u>535.</u>	<u>09/17/23</u>
8	FOOD _____ _____ _____	\$ <u>2,129.</u>	<u>09/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>616.</u>	<u>09/16/23</u>
8	FOOD _____ _____ _____	\$ <u>2,077.</u>	<u>09/16/23</u>
8	FOOD _____ _____ _____	\$ <u>1,708.</u>	<u>09/15/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>09/15/23</u>
8	FOOD _____ _____ _____	\$ <u>877.</u>	<u>09/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,496.</u>	<u>09/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>942.</u>	<u>09/14/23</u>
8	FOOD _____ _____ _____	\$ <u>2,031.</u>	<u>09/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,878.</u>	<u>09/13/23</u>
8	FOOD _____ _____ _____	\$ <u>2,086.</u>	<u>09/12/23</u>
8	FOOD _____ _____ _____	\$ <u>1,646.</u>	<u>09/12/23</u>
8	FOOD _____ _____ _____	\$ <u>1,199.</u>	<u>09/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,822.</u>	<u>09/11/23</u>
8	FOOD _____ _____ _____	\$ <u>962.</u>	<u>09/10/23</u>
8	FOOD _____ _____ _____	\$ <u>3,286.</u>	<u>09/10/23</u>
8	FOOD _____ _____ _____	\$ <u>3,687.</u>	<u>09/10/23</u>
8	FOOD _____ _____ _____	\$ <u>776.</u>	<u>09/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,138.</u>	<u>09/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>339.</u>	<u>09/08/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>09/08/23</u>
8	FOOD _____ _____ _____	\$ <u>421.</u>	<u>09/07/23</u>
8	FOOD _____ _____ _____	\$ <u>2,253.</u>	<u>09/07/23</u>
8	FOOD _____ _____ _____	\$ <u>502.</u>	<u>09/06/23</u>
8	FOOD _____ _____ _____	\$ <u>1,698.</u>	<u>09/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,095.</u>	<u>09/06/23</u>
8	FOOD _____ _____ _____	\$ <u>756.</u>	<u>09/05/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>09/05/23</u>
8	FOOD _____ _____ _____	\$ <u>1,637.</u>	<u>09/04/23</u>
8	FOOD _____ _____ _____	\$ <u>1,539.</u>	<u>09/04/23</u>
8	FOOD _____ _____ _____	\$ <u>1,923.</u>	<u>09/03/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ _____ 0.	09/03/23
8	FOOD _____ _____ _____	\$ _____ 1,350.	09/02/23
8	FOOD _____ _____ _____	\$ _____ 0.	09/02/23
8	FOOD _____ _____ _____	\$ _____ 1,196.	09/02/23
8	FOOD _____ _____ _____	\$ _____ 1,998.	08/31/23
8	FOOD _____ _____ _____	\$ _____ 1,998.	08/31/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,122.</u>	<u>08/31/23</u>
8	FOOD _____ _____ _____	\$ <u>394.</u>	<u>08/30/23</u>
8	FOOD _____ _____ _____	\$ <u>1,297.</u>	<u>08/30/23</u>
8	FOOD _____ _____ _____	\$ <u>1,483.</u>	<u>08/29/23</u>
8	FOOD _____ _____ _____	\$ <u>1,346.</u>	<u>08/29/23</u>
8	FOOD _____ _____ _____	\$ <u>1,271.</u>	<u>08/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>822.</u>	<u>08/28/23</u>
8	FOOD _____ _____ _____	\$ <u>502.</u>	<u>08/27/23</u>
8	FOOD _____ _____ _____	\$ <u>2,507.</u>	<u>08/27/23</u>
8	FOOD _____ _____ _____	\$ <u>681.</u>	<u>08/26/23</u>
8	FOOD _____ _____ _____	\$ <u>613.</u>	<u>08/26/23</u>
8	FOOD _____ _____ _____	\$ <u>1,508.</u>	<u>08/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,304.</u>	<u>08/25/23</u>
8	FOOD _____ _____ _____	\$ <u>1,927.</u>	<u>08/25/23</u>
8	FOOD _____ _____ _____	\$ <u>1,777.</u>	<u>08/24/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>08/24/23</u>
8	FOOD _____ _____ _____	\$ <u>616.</u>	<u>08/24/23</u>
8	FOOD _____ _____ _____	\$ <u>757.</u>	<u>08/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>773.</u>	<u>08/23/23</u>
8	FOOD _____ _____ _____	\$ <u>1,206.</u>	<u>08/22/23</u>
8	FOOD _____ _____ _____	\$ <u>469.</u>	<u>08/21/23</u>
8	FOOD _____ _____ _____	\$ <u>186.</u>	<u>08/21/23</u>
8	FOOD _____ _____ _____	\$ <u>584.</u>	<u>08/21/23</u>
8	FOOD _____ _____ _____	\$ <u>319.</u>	<u>08/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,219.</u>	<u>08/20/23</u>
8	FOOD _____ _____ _____	\$ <u>1,157.</u>	<u>08/20/23</u>
8	FOOD _____ _____ _____	\$ <u>714.</u>	<u>08/19/23</u>
8	FOOD _____ _____ _____	\$ <u>404.</u>	<u>08/19/23</u>
8	FOOD _____ _____ _____	\$ <u>1,030.</u>	<u>08/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,532.</u>	<u>08/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>959.</u>	<u>08/16/23</u>
8	FOOD _____ _____ _____	\$ <u>632.</u>	<u>08/16/23</u>
8	FOOD _____ _____ _____	\$ <u>584.</u>	<u>08/15/23</u>
8	FOOD _____ _____ _____	\$ <u>329.</u>	<u>08/15/23</u>
8	FOOD _____ _____ _____	\$ <u>880.</u>	<u>08/15/23</u>
8	FOOD _____ _____ _____	\$ <u>1,177.</u>	<u>08/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,937.</u>	<u>08/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,134.</u>	<u>08/13/23</u>
8	FOOD _____ _____ _____	\$ <u>124.</u>	<u>08/13/23</u>
8	FOOD _____ _____ _____	\$ <u>5,384.</u>	<u>08/13/23</u>
8	FOOD _____ _____ _____	\$ <u>7,104.</u>	<u>08/13/23</u>
8	FOOD _____ _____ _____	\$ <u>117.</u>	<u>08/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,096.</u>	<u>08/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,216.</u>	<u>08/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,089.</u>	<u>08/13/23</u>
8	FOOD _____ _____ _____	\$ <u>2,038.</u>	<u>08/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,108.</u>	<u>08/12/23</u>
8	FOOD _____ _____ _____	\$ <u>714.</u>	<u>08/12/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,240.</u>	<u>08/12/23</u>
8	FOOD _____ _____ _____	\$ <u>1,154.</u>	<u>08/11/23</u>
8	FOOD _____ _____ _____	\$ <u>773.</u>	<u>08/10/23</u>
8	FOOD _____ _____ _____	\$ <u>2,011.</u>	<u>08/10/23</u>
8	FOOD _____ _____ _____	\$ <u>434.</u>	<u>08/09/23</u>
8	FOOD _____ _____ _____	\$ <u>905.</u>	<u>08/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>926.</u>	<u>08/08/23</u>
8	FOOD _____ _____ _____	\$ <u>1,141.</u>	<u>08/08/23</u>
8	FOOD _____ _____ _____	\$ <u>1,099.</u>	<u>08/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,265.</u>	<u>08/07/23</u>
8	FOOD _____ _____ _____	\$ <u>893.</u>	<u>08/06/23</u>
8	FOOD _____ _____ _____	\$ <u>2,751.</u>	<u>08/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>939.</u>	<u>08/05/23</u>
8	FOOD _____ _____ _____	\$ <u>55.</u>	<u>08/04/23</u>
8	FOOD _____ _____ _____	\$ <u>1,324.</u>	<u>08/04/23</u>
8	FOOD _____ _____ _____	\$ <u>137.</u>	<u>08/03/23</u>
8	FOOD _____ _____ _____	\$ <u>2,559.</u>	<u>08/03/23</u>
8	FOOD _____ _____ _____	\$ <u>567.</u>	<u>08/02/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>427.</u>	<u>08/02/23</u>
8	FOOD _____ _____ _____	\$ <u>913.</u>	<u>08/02/23</u>
8	FOOD _____ _____ _____	\$ <u>2,964.</u>	<u>08/01/23</u>
8	FOOD _____ _____ _____	\$ <u>1,764.</u>	<u>08/01/23</u>
8	FOOD _____ _____ _____	\$ <u>1,301.</u>	<u>07/31/23</u>
8	FOOD _____ _____ _____	\$ <u>1,496.</u>	<u>07/31/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,275.</u>	<u>07/30/23</u>
8	FOOD _____ _____ _____	\$ <u>1,946.</u>	<u>07/30/23</u>
8	FOOD _____ _____ _____	\$ <u>1,050.</u>	<u>07/29/23</u>
8	FOOD _____ _____ _____	\$ <u>1,894.</u>	<u>07/29/23</u>
8	FOOD _____ _____ _____	\$ <u>1,317.</u>	<u>07/28/23</u>
8	FOOD _____ _____ _____	\$ <u>1,174.</u>	<u>07/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,069.</u>	<u>07/28/23</u>
8	FOOD _____ _____ _____	\$ <u>828.</u>	<u>07/27/23</u>
8	FOOD _____ _____ _____	\$ <u>541.</u>	<u>07/26/23</u>
8	FOOD _____ _____ _____	\$ <u>1,444.</u>	<u>07/26/23</u>
8	FOOD _____ _____ _____	\$ <u>1,174.</u>	<u>07/25/23</u>
8	FOOD _____ _____ _____	\$ <u>1,607.</u>	<u>07/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>730.</u>	<u>07/24/23</u>
8	FOOD _____ _____ _____	\$ <u>1,578.</u>	<u>07/24/23</u>
8	FOOD _____ _____ _____	\$ <u>1,203.</u>	<u>07/23/23</u>
8	FOOD _____ _____ _____	\$ <u>2,236.</u>	<u>07/23/23</u>
8	FOOD _____ _____ _____	\$ <u>3,077.</u>	<u>07/22/23</u>
8	FOOD _____ _____ _____	\$ <u>705.</u>	<u>07/21/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,001.</u>	<u>07/20/23</u>
8	FOOD _____ _____ _____	\$ <u>1,741.</u>	<u>07/20/23</u>
8	FOOD _____ _____ _____	\$ <u>391.</u>	<u>07/19/23</u>
8	FOOD _____ _____ _____	\$ <u>2,122.</u>	<u>07/19/23</u>
8	FOOD _____ _____ _____	\$ <u>2,243.</u>	<u>07/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,200.</u>	<u>07/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,682.</u>	<u>07/17/23</u>
8	FOOD _____ _____ _____	\$ <u>587.</u>	<u>07/17/23</u>
8	FOOD _____ _____ _____	\$ <u>1,783.</u>	<u>07/17/23</u>
8	FOOD _____ _____ _____	\$ <u>1,747.</u>	<u>07/16/23</u>
8	FOOD _____ _____ _____	\$ <u>2,527.</u>	<u>07/16/23</u>
8	FOOD _____ _____ _____	\$ <u>1,056.</u>	<u>07/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,108.</u>	<u>07/15/23</u>
8	FOOD _____ _____ _____	\$ <u>747.</u>	<u>07/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,467.</u>	<u>07/14/23</u>
8	FOOD _____ _____ _____	\$ <u>3,257.</u>	<u>07/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,376.</u>	<u>07/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,600.</u>	<u>07/12/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ _____ 0.	07/12/23
8	FOOD _____ _____ _____	\$ _____ 1,878.	07/11/23
8	FOOD _____ _____ _____	\$ _____ 727.	07/10/23
8	FOOD _____ _____ _____	\$ _____ 2,357.	07/10/23
8	FOOD _____ _____ _____	\$ _____ 1,291.	07/09/23
8	FOOD _____ _____ _____	\$ _____ 1,575.	07/09/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,438.</u>	<u>07/08/23</u>
8	FOOD _____ _____ _____	\$ <u>1,907.</u>	<u>07/08/23</u>
8	FOOD _____ _____ _____	\$ <u>1,506.</u>	<u>07/07/23</u>
8	FOOD _____ _____ _____	\$ <u>460.</u>	<u>07/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,382.</u>	<u>07/06/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>07/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,324.</u>	<u>07/06/23</u>
8	FOOD _____ _____ _____	\$ <u>877.</u>	<u>07/05/23</u>
8	FOOD _____ _____ _____	\$ <u>153.</u>	<u>07/05/23</u>
8	FOOD _____ _____ _____	\$ <u>5,046.</u>	<u>07/05/23</u>
8	FOOD _____ _____ _____	\$ <u>2,673.</u>	<u>07/04/23</u>
8	FOOD _____ _____ _____	\$ <u>1,317.</u>	<u>07/04/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,203.</u>	<u>07/03/23</u>
8	FOOD _____ _____ _____	\$ <u>150.</u>	<u>07/03/23</u>
8	FOOD _____ _____ _____	\$ <u>3,223.</u>	<u>07/03/23</u>
8	FOOD _____ _____ _____	\$ <u>1,450.</u>	<u>07/02/23</u>
8	FOOD _____ _____ _____	\$ <u>1,620.</u>	<u>07/02/23</u>
8	FOOD _____ _____ _____	\$ <u>766.</u>	<u>07/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,790.</u>	<u>07/01/23</u>
8	FOOD _____ _____ _____	\$ <u>1,679.</u>	<u>06/30/23</u>
8	FOOD _____ _____ _____	\$ <u>1,676.</u>	<u>06/30/23</u>
8	FOOD _____ _____ _____	\$ <u>776.</u>	<u>06/29/23</u>
8	FOOD _____ _____ _____	\$ <u>280.</u>	<u>06/29/23</u>
8	FOOD _____ _____ _____	\$ <u>2,028.</u>	<u>06/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>473.</u>	<u>06/28/23</u>
8	FOOD _____ _____ _____	\$ <u>1,299.</u>	<u>06/28/23</u>
8	FOOD _____ _____ _____	\$ <u>1,734.</u>	<u>06/27/23</u>
8	FOOD _____ _____ _____	\$ <u>1,178.</u>	<u>06/26/23</u>
8	FOOD _____ _____ _____	\$ <u>1,467.</u>	<u>06/26/23</u>
8	FOOD _____ _____ _____	\$ <u>743.</u>	<u>06/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,999.</u>	<u>06/25/23</u>
8	FOOD _____ _____ _____	\$ <u>1,490.</u>	<u>06/24/23</u>
8	FOOD _____ _____ _____	\$ <u>1,734.</u>	<u>06/24/23</u>
8	FOOD _____ _____ _____	\$ <u>1,043.</u>	<u>06/23/23</u>
8	FOOD _____ _____ _____	\$ <u>1,477.</u>	<u>06/23/23</u>
8	FOOD _____ _____ _____	\$ <u>1,236.</u>	<u>06/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,164.</u>	<u>06/22/23</u>
8	FOOD _____ _____ _____	\$ <u>445.</u>	<u>06/21/23</u>
8	FOOD _____ _____ _____	\$ <u>2,057.</u>	<u>06/21/23</u>
8	FOOD _____ _____ _____	\$ <u>955.</u>	<u>06/21/23</u>
8	FOOD _____ _____ _____	\$ <u>1,157.</u>	<u>06/20/23</u>
8	FOOD _____ _____ _____	\$ <u>1,130.</u>	<u>06/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>3,244.</u>	<u>06/19/23</u>
8	FOOD _____ _____ _____	\$ <u>998.</u>	<u>06/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,976.</u>	<u>06/18/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>06/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,388.</u>	<u>06/17/23</u>
8	FOOD _____ _____ _____	\$ <u>1,297.</u>	<u>06/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,535.</u>	<u>06/16/23</u>
8	FOOD _____ _____ _____	\$ <u>2,129.</u>	<u>06/16/23</u>
8	FOOD _____ _____ _____	\$ <u>140.</u>	<u>06/16/23</u>
8	FOOD _____ _____ _____	\$ <u>1,232.</u>	<u>06/15/23</u>
8	FOOD _____ _____ _____	\$ <u>1,754.</u>	<u>06/15/23</u>
8	FOOD _____ _____ _____	\$ <u>554.</u>	<u>06/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,288.</u>	<u>06/14/23</u>
8	FOOD _____ _____ _____	\$ <u>2,064.</u>	<u>06/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,718.</u>	<u>06/13/23</u>
8	FOOD _____ _____ _____	\$ <u>883.</u>	<u>06/12/23</u>
8	FOOD _____ _____ _____	\$ <u>2,253.</u>	<u>06/11/23</u>
8	FOOD _____ _____ _____	\$ <u>1,940.</u>	<u>06/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,057.</u>	<u>06/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,262.</u>	<u>06/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,510.</u>	<u>06/09/23</u>
8	FOOD _____ _____ _____	\$ <u>2,201.</u>	<u>06/09/23</u>
8	FOOD _____ _____ _____	\$ <u>668.</u>	<u>06/08/23</u>
8	FOOD _____ _____ _____	\$ <u>1,245.</u>	<u>06/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>411.</u>	<u>06/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,496.</u>	<u>06/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,359.</u>	<u>06/06/23</u>
8	FOOD _____ _____ _____	\$ <u>1,268.</u>	<u>06/06/23</u>
8	FOOD _____ _____ _____	\$ <u>769.</u>	<u>06/05/23</u>
8	FOOD _____ _____ _____	\$ <u>2,135.</u>	<u>06/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>818.</u>	<u>06/04/23</u>
8	FOOD _____ _____ _____	\$ <u>2,629.</u>	<u>06/03/23</u>
8	FOOD _____ _____ _____	\$ <u>2,083.</u>	<u>06/03/23</u>
8	FOOD _____ _____ _____	\$ <u>1,376.</u>	<u>06/02/23</u>
8	FOOD _____ _____ _____	\$ <u>978.</u>	<u>06/02/23</u>
8	FOOD _____ _____ _____	\$ <u>936.</u>	<u>06/02/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>3,120.</u>	<u>06/01/23</u>
8	FOOD _____ _____ _____	\$ <u>590.</u>	<u>05/31/23</u>
8	FOOD _____ _____ _____	\$ <u>867.</u>	<u>05/31/23</u>
8	FOOD _____ _____ _____	\$ <u>988.</u>	<u>05/31/23</u>
8	FOOD _____ _____ _____	\$ <u>2,318.</u>	<u>05/30/23</u>
8	FOOD _____ _____ _____	\$ <u>5,410.</u>	<u>05/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ _____ 0.	05/29/23
8	FOOD _____ _____ _____	\$ _____ 0.	05/29/23
8	FOOD _____ _____ _____	\$ _____ 0.	05/28/23
8	FOOD _____ _____ _____	\$ _____ 701.	05/28/23
8	FOOD _____ _____ _____	\$ _____ 619.	05/27/23
8	FOOD _____ _____ _____	\$ _____ 0.	05/27/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,647.</u>	<u>05/27/23</u>
8	FOOD _____ _____ _____	\$ <u>231.</u>	<u>05/26/23</u>
8	FOOD _____ _____ _____	\$ <u>851.</u>	<u>05/26/23</u>
8	FOOD _____ _____ _____	\$ <u>910.</u>	<u>05/26/23</u>
8	FOOD _____ _____ _____	\$ <u>1,265.</u>	<u>05/25/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>05/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,206.</u>	<u>05/25/23</u>
8	FOOD _____ _____ _____	\$ <u>662.</u>	<u>05/24/23</u>
8	FOOD _____ _____ _____	\$ <u>274.</u>	<u>05/24/23</u>
8	FOOD _____ _____ _____	\$ <u>2,168.</u>	<u>05/24/23</u>
8	FOOD _____ _____ _____	\$ <u>975.</u>	<u>05/23/23</u>
8	FOOD _____ _____ _____	\$ <u>1,372.</u>	<u>05/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,487.</u>	<u>05/22/23</u>
8	FOOD _____ _____ _____	\$ <u>463.</u>	<u>05/21/23</u>
8	FOOD _____ _____ _____	\$ <u>2,191.</u>	<u>05/21/23</u>
8	FOOD _____ _____ _____	\$ <u>2,249.</u>	<u>05/20/23</u>
8	FOOD _____ _____ _____	\$ <u>1,588.</u>	<u>05/20/23</u>
8	FOOD _____ _____ _____	\$ <u>1,340.</u>	<u>05/19/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,161.</u>	<u>05/19/23</u>
8	FOOD _____ _____ _____	\$ <u>1,659.</u>	<u>05/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,809.</u>	<u>05/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,004.</u>	<u>05/17/23</u>
8	FOOD _____ _____ _____	\$ <u>2,073.</u>	<u>05/17/23</u>
8	FOOD _____ _____ _____	\$ <u>1,301.</u>	<u>05/16/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ _____ 0.	05/16/23
8	FOOD _____ _____ _____	\$ _____ 1,911.	05/16/23
8	FOOD _____ _____ _____	\$ _____ 1,220.	05/15/23
8	FOOD _____ _____ _____	\$ _____ 2,764.	05/15/23
8	FOOD _____ _____ _____	\$ _____ 1,020.	05/14/23
8	FOOD _____ _____ _____	\$ _____ 2,644.	05/14/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,764.</u>	<u>05/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,813.</u>	<u>05/13/23</u>
8	FOOD _____ _____ _____	\$ <u>792.</u>	<u>05/12/23</u>
8	FOOD _____ _____ _____	\$ <u>2,005.</u>	<u>05/12/23</u>
8	FOOD _____ _____ _____	\$ <u>2,279.</u>	<u>05/11/23</u>
8	FOOD _____ _____ _____	\$ <u>2,908.</u>	<u>05/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ _____ 0.	05/11/23
8	FOOD _____ _____ _____	\$ _____ 1,648.	05/10/23
8	FOOD _____ _____ _____	\$ _____ 1,372.	05/10/23
8	FOOD _____ _____ _____	\$ _____ 1,249.	05/10/23
8	FOOD _____ _____ _____	\$ _____ 1,369.	05/09/23
8	FOOD _____ _____ _____	\$ _____ 1,081.	05/08/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,790.</u>	<u>05/08/23</u>
8	FOOD _____ _____ _____	\$ <u>1,783.</u>	<u>05/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,607.</u>	<u>05/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,663.</u>	<u>05/06/23</u>
8	FOOD _____ _____ _____	\$ <u>1,881.</u>	<u>05/06/23</u>
8	FOOD _____ _____ _____	\$ <u>1,888.</u>	<u>05/05/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>864.</u>	<u>05/05/23</u>
8	FOOD _____ _____ _____	\$ <u>2,174.</u>	<u>05/04/23</u>
8	FOOD _____ _____ _____	\$ <u>1,105.</u>	<u>05/04/23</u>
8	FOOD _____ _____ _____	\$ <u>2,243.</u>	<u>05/03/23</u>
8	FOOD _____ _____ _____	\$ <u>1,294.</u>	<u>05/02/23</u>
8	FOOD _____ _____ _____	\$ <u>1,099.</u>	<u>05/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,315.</u>	<u>05/01/23</u>
8	FOOD _____ _____ _____	\$ <u>340.</u>	<u>05/01/23</u>
8	FOOD _____ _____ _____	\$ <u>665.</u>	<u>04/30/23</u>
8	FOOD _____ _____ _____	\$ <u>1,617.</u>	<u>04/30/23</u>
8	FOOD _____ _____ _____	\$ <u>2,181.</u>	<u>04/30/23</u>
8	FOOD _____ _____ _____	\$ <u>2,108.</u>	<u>04/29/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,438.</u>	<u>04/29/23</u>
8	FOOD _____ _____ _____	\$ <u>1,066.</u>	<u>04/28/23</u>
8	FOOD _____ _____ _____	\$ <u>1,454.</u>	<u>04/27/23</u>
8	FOOD _____ _____ _____	\$ <u>1,307.</u>	<u>04/27/23</u>
8	FOOD _____ _____ _____	\$ <u>1,141.</u>	<u>04/26/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>04/26/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>753.</u>	<u>04/26/23</u>
8	FOOD _____ _____ _____	\$ <u>1,490.</u>	<u>04/26/23</u>
8	FOOD _____ _____ _____	\$ <u>897.</u>	<u>04/25/23</u>
8	FOOD _____ _____ _____	\$ <u>258.</u>	<u>04/25/23</u>
8	FOOD _____ _____ _____	\$ <u>1,271.</u>	<u>04/24/23</u>
8	FOOD _____ _____ _____	\$ <u>310.</u>	<u>04/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,708.</u>	<u>04/23/23</u>
8	FOOD _____ _____ _____	\$ <u>1,676.</u>	<u>04/22/23</u>
8	FOOD _____ _____ _____	\$ <u>355.</u>	<u>04/22/23</u>
8	FOOD _____ _____ _____	\$ <u>2,207.</u>	<u>04/22/23</u>
8	FOOD _____ _____ _____	\$ <u>835.</u>	<u>04/21/23</u>
8	FOOD _____ _____ _____	\$ <u>1,307.</u>	<u>04/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,370.</u>	<u>04/20/23</u>
8	FOOD _____ _____ _____	\$ <u>644.</u>	<u>04/19/23</u>
8	FOOD _____ _____ _____	\$ <u>568.</u>	<u>04/19/23</u>
8	FOOD _____ _____ _____	\$ <u>469.</u>	<u>04/18/23</u>
8	FOOD _____ _____ _____	\$ <u>743.</u>	<u>04/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,801.</u>	<u>04/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>3,886.</u>	<u>04/17/23</u>
8	FOOD _____ _____ _____	\$ <u>362.</u>	<u>04/16/23</u>
8	FOOD _____ _____ _____	\$ <u>2,553.</u>	<u>04/16/23</u>
8	FOOD _____ _____ _____	\$ <u>1,591.</u>	<u>04/15/23</u>
8	FOOD _____ _____ _____	\$ <u>916.</u>	<u>04/15/23</u>
8	FOOD _____ _____ _____	\$ <u>882.</u>	<u>04/14/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>2,171.</u>	<u>04/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,480.</u>	<u>04/13/23</u>
8	FOOD _____ _____ _____	\$ <u>1,597.</u>	<u>04/13/23</u>
8	FOOD _____ _____ _____	\$ <u>717.</u>	<u>04/12/23</u>
8	FOOD _____ _____ _____	\$ <u>838.</u>	<u>04/12/23</u>
8	FOOD _____ _____ _____	\$ <u>1,196.</u>	<u>04/11/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>333.</u>	<u>04/11/23</u>
8	FOOD _____ _____ _____	\$ <u>1,195.</u>	<u>04/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,154.</u>	<u>04/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,311.</u>	<u>04/09/23</u>
8	FOOD _____ _____ _____	\$ <u>851.</u>	<u>04/09/23</u>
8	FOOD _____ _____ _____	\$ <u>1,071.</u>	<u>04/08/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,105.</u>	<u>04/08/23</u>
8	FOOD _____ _____ _____	\$ <u>734.</u>	<u>04/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,333.</u>	<u>04/06/23</u>
8	FOOD _____ _____ _____	\$ <u>1,148.</u>	<u>04/05/23</u>
8	FOOD _____ _____ _____	\$ <u>1,588.</u>	<u>04/05/23</u>
8	FOOD _____ _____ _____	\$ <u>760.</u>	<u>04/04/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,483.</u>	<u>04/04/23</u>
8	FOOD _____ _____ _____	\$ <u>848.</u>	<u>04/03/23</u>
8	FOOD _____ _____ _____	\$ <u>2,031.</u>	<u>04/03/23</u>
8	FOOD _____ _____ _____	\$ <u>1,036.</u>	<u>04/02/23</u>
8	FOOD _____ _____ _____	\$ <u>1,128.</u>	<u>04/02/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>04/02/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,526.</u>	<u>04/01/23</u>
8	FOOD _____ _____ _____	\$ <u>1,011.</u>	<u>04/01/23</u>
8	FOOD _____ _____ _____	\$ <u>2,800.</u>	<u>03/31/23</u>
8	FOOD _____ _____ _____	\$ <u>98.</u>	<u>03/31/23</u>
8	FOOD _____ _____ _____	\$ <u>1,816.</u>	<u>03/31/23</u>
8	FOOD _____ _____ _____	\$ <u>1,852.</u>	<u>03/30/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>3,022.</u>	<u>03/30/23</u>
8	FOOD _____ _____ _____	\$ <u>3,148.</u>	<u>03/29/23</u>
8	FOOD _____ _____ _____	\$ <u>401.</u>	<u>03/29/23</u>
8	FOOD _____ _____ _____	\$ <u>1,304.</u>	<u>03/28/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>03/28/23</u>
8	FOOD _____ _____ _____	\$ <u>1,581.</u>	<u>03/28/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,317.</u>	<u>03/27/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>03/27/23</u>
8	FOOD _____ _____ _____	\$ <u>2,201.</u>	<u>03/27/23</u>
8	FOOD _____ _____ _____	\$ <u>2,392.</u>	<u>03/26/23</u>
8	FOOD _____ _____ _____	\$ <u>2,197.</u>	<u>03/26/23</u>
8	FOOD _____ _____ _____	\$ <u>1,130.</u>	<u>03/25/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,164.</u>	<u>03/25/23</u>
8	FOOD _____ _____ _____	\$ <u>284.</u>	<u>03/24/23</u>
8	FOOD _____ _____ _____	\$ <u>1,066.</u>	<u>03/24/23</u>
8	FOOD _____ _____ _____	\$ <u>789.</u>	<u>03/23/23</u>
8	FOOD _____ _____ _____	\$ <u>1,800.</u>	<u>03/23/23</u>
8	FOOD _____ _____ _____	\$ <u>623.</u>	<u>03/22/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,271.</u>	<u>03/22/23</u>
8	FOOD _____ _____ _____	\$ <u>411.</u>	<u>03/21/23</u>
8	FOOD _____ _____ _____	\$ <u>1,875.</u>	<u>03/20/23</u>
8	FOOD _____ _____ _____	\$ <u>919.</u>	<u>03/19/23</u>
8	FOOD _____ _____ _____	\$ <u>1,134.</u>	<u>03/19/23</u>
8	FOOD _____ _____ _____	\$ <u>1,058.</u>	<u>03/18/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,258.</u>	<u>03/18/23</u>
8	FOOD _____ _____ _____	\$ <u>1,190.</u>	<u>03/17/23</u>
8	FOOD _____ _____ _____	\$ <u>460.</u>	<u>03/17/23</u>
8	FOOD _____ _____ _____	\$ <u>835.</u>	<u>03/16/23</u>
8	FOOD _____ _____ _____	\$ <u>1,131.</u>	<u>03/16/23</u>
8	FOOD _____ _____ _____	\$ <u>463.</u>	<u>03/15/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,718.</u>	<u>03/15/23</u>
8	FOOD _____ _____ _____	\$ <u>782.</u>	<u>03/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,011.</u>	<u>03/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,110.</u>	<u>03/14/23</u>
8	FOOD _____ _____ _____	\$ <u>1,480.</u>	<u>03/13/23</u>
8	FOOD _____ _____ _____	\$ <u>4,414.</u>	<u>03/13/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>535.</u>	<u>03/12/23</u>
8	FOOD _____ _____ _____	\$ <u>1,125.</u>	<u>03/11/23</u>
8	FOOD _____ _____ _____	\$ <u>1,581.</u>	<u>03/11/23</u>
8	FOOD _____ _____ _____	\$ <u>1,760.</u>	<u>03/10/23</u>
8	FOOD _____ _____ _____	\$ <u>1,014.</u>	<u>03/10/23</u>
8	FOOD _____ _____ _____	\$ <u>906.</u>	<u>03/09/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,346.</u>	<u>03/09/23</u>
8	FOOD _____ _____ _____	\$ <u>864.</u>	<u>03/08/23</u>
8	FOOD _____ _____ _____	\$ <u>1,198.</u>	<u>03/08/23</u>
8	FOOD _____ _____ _____	\$ <u>1,308.</u>	<u>03/07/23</u>
8	FOOD _____ _____ _____	\$ <u>414.</u>	<u>03/07/23</u>
8	FOOD _____ _____ _____	\$ <u>2,318.</u>	<u>03/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ _____ 0.	03/06/23
8	FOOD _____ _____ _____	\$ _____ 1,441.	03/06/23
8	FOOD _____ _____ _____	\$ _____ 1,115.	03/05/23
8	FOOD _____ _____ _____	\$ _____ 1,568.	03/05/23
8	FOOD _____ _____ _____	\$ _____ 1,281.	03/04/23
8	FOOD _____ _____ _____	\$ _____ 678.	03/04/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,304.</u>	<u>03/03/23</u>
8	FOOD _____ _____ _____	\$ <u>1,389.</u>	<u>03/03/23</u>
8	FOOD _____ _____ _____	\$ <u>2,308.</u>	<u>03/02/23</u>
8	FOOD _____ _____ _____	\$ <u>701.</u>	<u>03/02/23</u>
8	FOOD _____ _____ _____	\$ <u>848.</u>	<u>03/01/23</u>
8	FOOD _____ _____ _____	\$ <u>1,346.</u>	<u>03/01/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>3,790.</u>	<u>02/28/23</u>
8	FOOD _____ _____ _____	\$ <u>440.</u>	<u>02/27/23</u>
8	FOOD _____ _____ _____	\$ <u>730.</u>	<u>02/26/23</u>
8	FOOD _____ _____ _____	\$ <u>841.</u>	<u>02/25/23</u>
8	FOOD _____ _____ _____	\$ <u>2,568.</u>	<u>02/24/23</u>
8	FOOD _____ _____ _____	\$ <u>221.</u>	<u>02/23/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,037.</u>	<u>02/23/23</u>
8	FOOD _____ _____ _____	\$ <u>166.</u>	<u>02/23/23</u>
8	FOOD _____ _____ _____	\$ <u>1,239.</u>	<u>02/19/23</u>
8	FOOD _____ _____ _____	\$ <u>0.</u>	<u>02/19/23</u>
8	FOOD _____ _____ _____	\$ <u>1,923.</u>	<u>02/18/23</u>
8	FOOD _____ _____ _____	\$ <u>998.</u>	<u>02/17/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ 955.	02/12/23
8	FOOD _____ _____ _____	\$ 1,340.	02/11/23
8	FOOD _____ _____ _____	\$ 1,490.	02/10/23
8	FOOD _____ _____ _____	\$ 923.	02/05/23
8	FOOD _____ _____ _____	\$ 769.	02/04/23
8	FOOD _____ _____ _____	\$ 1,705.	02/03/23

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>1,803.</u>	<u>01/29/23</u>
8	FOOD _____ _____ _____	\$ <u>1,288.</u>	<u>01/28/23</u>
8	FOOD _____ _____ _____	\$ <u>994.</u>	<u>01/27/23</u>
8	FOOD _____ _____ _____	\$ <u>1,102.</u>	<u>01/22/23</u>
8	FOOD _____ _____ _____	\$ <u>1,443.</u>	<u>01/21/23</u>
8	FOOD _____ _____ _____	\$ <u>1,764.</u>	<u>01/20/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
8	FOOD _____ _____ _____	\$ <u>600.</u>	<u>01/15/23</u>
8	FOOD _____ _____ _____	\$ <u>864.</u>	<u>01/14/23</u>
8	FOOD _____ _____ _____	\$ <u>2,246.</u>	<u>01/13/23</u>
8	FOOD _____ _____ _____	\$ <u>381.</u>	<u>01/08/23</u>
8	FOOD _____ _____ _____	\$ <u>365.</u>	<u>01/07/23</u>
8	FOOD _____ _____ _____	\$ <u>1,301.</u>	<u>01/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
9	FOOD _____ _____ _____	\$ <u>126,618.</u>	<u>12/20/23</u>
9	FOOD _____ _____ _____	\$ <u>109,406.</u>	<u>11/13/23</u>
9	FOOD _____ _____ _____	\$ <u>44,740.</u>	<u>11/09/23</u>
9	FOOD _____ _____ _____	\$ <u>2,347.</u>	<u>11/08/23</u>
9	FOOD _____ _____ _____	\$ <u>116,930.</u>	<u>09/27/23</u>
9	FOOD _____ _____ _____	\$ <u>98,974.</u>	<u>08/02/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
9	FOOD _____ _____ _____	\$ <u>132,245.</u>	<u>06/21/23</u>
9	FOOD _____ _____ _____	\$ <u>91,639.</u>	<u>04/06/23</u>
9	FOOD _____ _____ _____	\$ <u>121,533.</u>	<u>03/08/23</u>
9	FOOD _____ _____ _____	\$ <u>85,177.</u>	<u>01/25/23</u>
9	FOOD _____ _____ _____	\$ <u>26,250.</u>	<u>01/25/23</u>
9	FOOD _____ _____ _____	\$ <u>49,291.</u>	<u>01/06/23</u>

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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
9	FOOD _____ _____ _____	\$ 13,242.	01/04/23
9	FOOD _____ _____ _____	\$ 49,510.	01/04/23
9	FOOD _____ _____ _____	\$ 62,755.	01/03/23
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization GRACE KLEIN COMMUNITY, INC.	Employer identification number 80-0569639
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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

2023

Open to Public
Inspection

Name of the organization **GRACE KLEIN COMMUNITY, INC.** Employer identification number **80-0569639**

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 on line 2a	2c
d Number of conservation easements included on line 2c 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?

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 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1 \$ _____

(ii) Assets included in Form 990, Part X \$ _____

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

a Revenue included on Form 990, Part VIII, line 1 \$ _____

b Assets included in Form 990, Part X \$ _____

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

Schedule D (Form 990) 2023

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 in 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		68,500.		68,500.
b Buildings		402,500.	95,672.	306,828.
c Leasehold improvements				
d Equipment				
e Other		532,089.	122,266.	409,823.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				785,151.

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, line 12, col. (B))		

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, line 13, col. (B))		

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) OPERATING LEASE-RIGHT OF USE ASSETS	139,575.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	139,575.

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, line 25, col. (B))	

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

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	9,854,733.
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	14,434.	
e	Add lines 2a through 2d		2e	14,434.
3	Subtract line 2e from line 1		3	9,840,299.
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		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	9,840,299.

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	9,650,855.
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	14,434.	
e	Add lines 2a through 2d		2e	14,434.
3	Subtract line 2e from line 1		3	9,636,421.
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	9,636,421.

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 XI, LINE 2D - OTHER ADJUSTMENTS:

RENTAL REVENUE

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
DONATIONS OF FOOD AND HOUSEHOLD GOODS TO FAMILIES IN NEED	451750	0.	8,601,617.	FMV	FOOD AND HOUSEHOLD GOODS
VARIOUS PAYMENTS FOR HOUSEHOLD EXPENSES, MEDICAL EXPENSES, ADOPTION SUPPORT AND UNEXPECTED FUNERAL EXPENSES FOR FAMILIES IN NEED.	0	64,479.	0.	FMV	
PAYMENTS TO MISSIONARIES AND MISSIONS.	0	145,168.	0.	FMV	

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

PART I, LINE 2:

THE ENTITY ONLY ACCEPTS REFERRALS FOR GRANTS. THE ENTITY REVIEWS EACH REQUEST FOR COMPLIANCE BEFORE AWARDING THE GRANT.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization: **GRACE KLEIN COMMUNITY, INC.**
Employer identification number: **80-0569639**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods	X		679,721.	FMV
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory	X	426	7,921,896.	FMV
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ()				
26	Other ()				
27	Other ()				
28	Other ()				

29 Number of Forms 8283 received by the organization 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.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2023

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

Multiple horizontal lines for supplemental information.

**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

2023

Open to Public
Inspection

Name of the organization

GRACE KLEIN COMMUNITY, INC.

Employer identification number

80-0569639

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND UNDERPRIVILEGED.

FORM 990, PART VI, SECTION A, LINE 2:

JENNY AND JASON WALTMAN ARE MARRIED AND ARE BOTH DIRECTORS OF GRACE KLEIN
COMMUNITY, INC.

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

THE BOARD RECEIVES A COPY OF THE FORM 990 PRIOR TO FILING. THE RETURN IS
REVIEWED TO ENSURE COMPLETENESS AND ACCURACY.

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

THE MEMBERS OF THE BOARD ARE REQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST
THAT ARISE.

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

THE ORGANIZATION MAINTAINS COPIES OF ITS GOVERNING DOCUMENTS AND FINANCIAL
STATEMENTS AT THEIR OFFICE AND THEY ARE AVAILABLE TO THE PUBLIC UPON
REQUEST.

2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	Conv Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	PROGRAM SERVICES													
1	4756 WINE RIDGE LANE-HOUSE	02/01/15	SL	27.50	MM16	139,630.				139,630.	40,193.		5,077.	45,270.
2	LAND	02/01/15	L			10,500.				10,500.			0.	
3	4756 WINE RIDGE LANE-IMPROVEMENTS	01/20/16	SL	27.50	MM16	45,000.				45,000.	11,316.		1,636.	12,952.
4	BOX TRUCK	08/01/16	200DB	5.00	HY17	15,000.				15,000.	15,000.		0.	15,000.
5	3416 DEERWOOD-LAND	07/27/18	L			58,000.				58,000.			0.	
6	3416 DEERWOOD-HOUSE	07/27/18	SL	27.50	MM16	146,384.				146,384.	23,510.		5,323.	28,833.
7	3416 DEERWOOD-IMPROVEMENTS	11/15/18	SL	27.50	MM16	26,452.				26,452.	4,008.		962.	4,970.
8	3416 DEERWOOD-IMPROVEMENTS	07/24/19	SL	27.50	MM16	16,164.				16,164.	2,009.		588.	2,597.
9	(D)2008 VOLVO	09/10/19	200DB	5.00	HY17	2,152.			2,152.				0.	
10	2016 HINO	07/10/20	200DB	5.00	HY17	46,950.			46,950.				0.	
11	COMMERCIAL FREEZER	03/17/20	200DB	5.00	HY17	2,944.			2,944.				0.	
12	40 FT REFRIG TRAILER	05/15/21	200DB	5.00	HY17	15,000.			15,000.				0.	
13	COMMERCIAL REFRIGERATOR	07/28/21	200DB	5.00	HY17	4,144.			4,144.				0.	
14	2006 CHEVY EXPRESS 3500	01/08/21	200DB	5.00	HY17	11,294.			11,294.				0.	
15	COMMERCIAL FREEZER	04/08/21	200DB	5.00	HY17	3,450.			3,450.				0.	
16	2013 FREIGHTLINER M2-106	06/24/22	200DB	5.00	HY17	50,295.				50,295.	10,059.		16,094.	26,153.
17	2017 FORD TRANSIT VAN	11/28/23	SL	5.00	16	38,000.				38,000.			633.	633.

2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
18	MORGAN HUB IMPROVEMENTS-2023	07/01/23	SL	15.00		16	308,212.				308,212.			5,796.	5,796.
19	83 INCH 3 DOOR FREEZER	06/08/23	SL	5.00		16	4,394.				4,394.			513.	513.
20	MORGAN HUB-SHELVING	04/27/23	SL	5.00		16	12,153.				12,153.			1,620.	1,620.
21	MORGAN HUB-DOOR	09/28/23	SL	5.00		16	1,520.				1,520.			76.	76.
22	MORGAN HUB-PAINT	11/08/23	SL	5.00		16	67.				67.			2.	2.
23	MORGAN HUB-SHELVING-PART 2	11/29/23	SL	5.00		16	3,670.				3,670.			61.	61.
24	AIR CONDITIONER FOR HWY 39 PROPERTY	09/23/23	SL	5.00		16	4,893.				4,893.			245.	245.
25	MORGAN HUB-SHELVING	01/01/23	SL	5.00		16	155.				155.			31.	31.
26	WINE RIDGE LANE HOME-2023 AUDIT ADJUSTMENT	02/15/15	SL	27.50	MM	16	28,870.				28,870.			1,050.	1,050.
27	2017 NISSAN CENTRAL	07/14/20	SL	5.00		16	6,162.				6,162.			1,232.	1,232.
28	1997 DODGE RAM	04/09/21	SL	5.00		16	2,274.				2,274.			455.	455.
29	COMPUTER EQUIPMENT	07/01/21	SL	5.00		16	1,512.				1,512.			302.	302.
30	ADJUSTMENT TO AUDITED BOOKS (PY ADJUSTMENT)	12/31/23	SL	5.00		16								-13,635.	-13,635.
	* 990 PAGE 10 TOTAL PROGRAM SERVICES						1,005,241.			85,934.	919,307.	106,095.		28,061.	134,156.
	* GRAND TOTAL 990 PAGE 10 DEPR						1,005,241.			85,934.	919,307.	106,095.		28,061.	134,156.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						632,177.			85,934.	546,243.	106,095.			138,814.

