

# TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

JUNE 30, 2014

Prepared for	ERIC S. COOPER SAN ANTONIO FOOD BANK, INC. 5200 W OLD US HIGHWAY 90 SAN ANTONIO, TX 78227
Prepared by	PADGETT, STRATEMANN & CO., L.L.P. 100 N.E. LOOP 410 SUITE 1100 SAN ANTONIO, TX 78216
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	<p>THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER YOU HAVE REVIEWED THE RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN, DATE AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL TRANSMIT THE RETURN ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED. RETURN FORM 8879-EO TO US BY FEBRUARY 17, 2015.</p> <p>ENCLOSED IS A TAX PREPARATION SERVICE MEMORANDUM SUMMARIZING OUR PROFESSIONAL RESPONSIBILITIES AND YOUR RESPONSIBILITIES REGARDING THE TAX RETURN. PLEASE READ THIS PRIOR TO SIGNING YOUR TAX RETURN.</p> <p>WE ENJOY THE OPPORTUNITY TO WORK WITH YOU. THANK YOU FOR YOUR BUSINESS AND YOUR TRUST. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT KRISTI NARVAIZ OR JOSIE BEHREND AT (210) 828-6281.</p>

Form **8879-EO****IRS e-file Signature Authorization  
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2013, or fiscal year beginning JUL 1, 2013, and ending JUN 30, 2014**2013**▶ **Do not send to the IRS. Keep for your records.**▶ **Information about Form 8879-EO and its instructions is at** [www.irs.gov/form8879eo](http://www.irs.gov/form8879eo)Department of the Treasury  
Internal Revenue Service

Name of exempt organization

Employer identification number

**SAN ANTONIO FOOD BANK INC****74-2122979**

Name and title of officer

**ERIC S COOPER  
PRESIDENT/CEO****Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, 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 1 line in Part I.

<b>1a</b> Form 990 check here ▶ <input checked="" type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12) .....	<b>1b</b> <u>115,429,147.</u>
<b>2a</b> Form 990-EZ check here ▶ <input type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990-EZ, line 9) .....	<b>2b</b> _____
<b>3a</b> Form 1120-POL check here ▶ <input type="checkbox"/>	<b>b Total tax</b> (Form 1120-POL, line 22) .....	<b>3b</b> _____
<b>4a</b> Form 990-PF check here ▶ <input type="checkbox"/>	<b>b Tax based on investment income</b> (Form 990-PF, Part VI, line 5) .....	<b>4b</b> _____
<b>5a</b> Form 8868 check here ▶ <input type="checkbox"/>	<b>b Balance Due</b> (Form 8868, Part I, line 3c or Part II, line 8c) .....	<b>5b</b> _____

**Part II Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 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 organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's 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 organization's 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 organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

**Officer's PIN: check one box only**

☒ I authorize PADGETT, STRATEMANN & CO., L.L.P. to enter my PIN 78227  
ERO firm name Enter five numbers, but  
do not enter all zeros

as my signature on the organization's tax year 2013 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 of the organization, I will enter my PIN as my signature on the organization's tax year 2013 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.

Officer's signature ▶ \_\_\_\_\_ 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.

**74622878216**  
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the organization 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 ▶ Josephine Batrud Date ▶ 1/16/15**ERO Must Retain This Form - See Instructions****Do Not Submit This Form To the IRS Unless Requested To Do So**

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2013****Open to Public  
Inspection**

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)**A** For the **2013** calendar year, or tax year beginning **JUL 1, 2013** and ending **JUN 30, 2014**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>SAN ANTONIO FOOD BANK INC</b>		<b>D</b> Employer identification number <b>74-2122979</b>
	Doing Business As		<b>E</b> Telephone number <b>210-337-3663</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>128,799,065.</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>SAN ANTONIO, TX 78227</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number <b>▶</b>
<b>F</b> Name and address of principal officer: <b>ERIC S COOPER</b> <b>5200 W. OLD US HIGHWAY 90, SAN ANTONIO, TX</b>			
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: <b>WWW.SAFOODBANK.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <b>▶</b>			<b>L</b> Year of formation: <b>1980</b> <b>M</b> State of legal domicile: <b>TX</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO FIGHT HUNGER IN SOUTHWEST TEXAS THROUGH FOOD DISTRIBUTION, PROGRAMS, EDUCATION, AND ADVOCACY.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>29</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>29</b>
	<b>5</b> Total number of individuals employed in calendar year 2013 (Part V, line 2a)	<b>5</b>	<b>246</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>35346</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>113,596,247.</b>	<b>111,750,969.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>2,731,977.</b>	<b>3,287,757.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>137,901.</b>	<b>191,320.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>588,717.</b>	<b>199,101.</b>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>117,054,842.</b>	<b>115,429,147.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>88,661,586.</b>	<b>99,362,849.</b>
<b>Expenses</b>	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>0.</b>	<b>0.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>8,009,387.</b>	<b>8,938,657.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>▶ 1,367,302.</b>	<b>0.</b>	<b>0.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>4,468,600.</b>	<b>5,904,671.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>101,139,573.</b>	<b>114,206,177.</b>
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>15,915,269.</b>	<b>1,222,970.</b>
	<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>
<b>21</b> Total liabilities (Part X, line 26)		<b>51,691,994.</b>	<b>51,355,005.</b>
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20		<b>1,965,190.</b>	<b>1,025,953.</b>
		<b>49,726,804.</b>	<b>50,329,052.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	<b>Signature of officer</b>		<b>Date</b>		
	<b>ERIC S COOPER, PRESIDENT/CEO</b>				
<b>Paid Preparer Use Only</b>	<b>Print/Type preparer's name</b>	<b>Preparer's signature</b>	<b>Date</b>	<b>Check if self-employed</b>	<b>PTIN</b>
	<b>JOSIE BEHREND</b>	<i>Josie Behrend</i>	<b>1/16/15</b>	<input type="checkbox"/>	<b>P00715390</b>
	<b>Firm's name</b>	<b>PADGETT, STRATEMANN &amp; CO., L.L.P.</b>		<b>Firm's EIN</b>	<b>74-1650885</b>
	<b>Firm's address</b>		<b>Phone no. (210) 828-6281</b>		
	<b>100 N.E. LOOP 410 SUITE 1100</b>		<b>SAN ANTONIO, TX 78216</b>		

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

**TO FIGHT HUNGER IN SOUTHWEST TEXAS THROUGH FOOD DISTRIBUTION,  
PROGRAMS, EDUCATION, AND ADVOCACY.**

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

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 ☒ 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 \$ 111,766,020. including grants of \$ 99,362,849. ) (Revenue \$ 3,426,173. )  
**SAN ANTONIO FOOD BANK INC PARTNERS WITH MORE THAN 500 HUMAN SERVICE  
 AGENCIES TO PROVIDE ASSISTANCE TO 58,000 INDIVIDUALS EVERY WEEK  
 THROUGHOUT SIXTEEN COUNTIES IN SOUTHWEST TEXAS. OUR PROGRAMS CONSIST OF  
 THE FOLLOWING: 1) KIDS CAFES THAT PROVIDE HOT AFTER SCHOOL MEALS TO AT  
 RISK YOUTH. 2) BACKPACK PROGRAM - DISTRIBUTES READY TO EAT FOOD TO  
 CHILDREN FOR THE WEEKEND. 3) SUMMER FOOD SERVICE PROGRAM - PROVIDES  
 BREAKFAST, LUNCH, AND SNACKS FOR LOW INCOME CHILDREN DURING THE SUMMER.  
 4) CLIENT SERVICES - ASSISTS FAMILIES WITH THE APPLICATIONS FOR FEDERAL  
 BENEFITS (SNAP, CHIP, WIC, MEDICAID, ETC). 5) NUTRITION, HEALTH &  
 WELLNESS - EDUCATES FAMILIES ON LOW COST, HEALTHY FOOD CHOICES,  
 WELLNESS ACTIVITIES AND GARDENING. 6) COMMUNITY GARDEN - EDUCATION OF  
 SELF-SUSTAINABILITY AND PRODUCTION FOR DISTRIBUTION AND FARMERS**

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )**4d** Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses **111,766,020.**

**Part IV Checklist of Required Schedules**

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

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

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	<b>21</b> X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b> X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	<b>23</b> X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	
<b>25a Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25a</b>	X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25b</b>	X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i> .....	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>	X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>	X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b> X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	<b>34</b> X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>	X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>35b</b>	
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>	X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O .....	<b>38</b> X	

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

Form **990** (2013)

**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 in 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**

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	29		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent	29		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
<b>6</b> Did the organization have members or stockholders?	6		X
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body?	8a	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	8b	X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X

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

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

**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 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

**19** Describe in 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, physical address, and telephone number of the person who possesses the books and records of the organization: **THE ORGANIZATION - 210-337-3663**  
**5200 W OLD US HIGHWAY 90, SAN ANTONIO, TX 78227**



**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KATIE LENSS BOARD CHAIR	1.00	X		X				0.	0.	0.
(2) MICHAEL CUBETA 1ST VICE CHAIR	1.00	X		X				0.	0.	0.
(3) MIKE GRAHAM 2ND VICE CHAIR	1.00	X		X				0.	0.	0.
(4) JOHN L. SHANK TREASURER	1.00	X		X				0.	0.	0.
(5) ROSE JENTZ SECRETARY	1.00	X		X				0.	0.	0.
(6) ROBERT M. BLALOCK MEMBER	1.00	X						0.	0.	0.
(7) JERRY M. BROWN MEMBER	1.00	X						0.	0.	0.
(8) STEVE COBEN MEMBER	1.00	X						0.	0.	0.
(9) GEOFFREY W. CRABTREE MEMBER	1.00	X						0.	0.	0.
(10) HERMAN S. CROCKETT MEMBER	1.00	X						0.	0.	0.
(11) MICHAEL B. FANNING MEMBER	1.00	X						0.	0.	0.
(12) HENRY FELDMAN PAST CHAIRMAN	1.00	X		X				0.	0.	0.
(13) RICHARD E. GOLDSMITH MEMBER	1.00	X						0.	0.	0.
(14) TRAVIS C. HODGES, AIM MEMBER	1.00	X						0.	0.	0.
(15) PHIL KARL MEMBER	1.00	X						0.	0.	0.
(16) GARRY W. KIRKER, PH.D. MEMBER	1.00	X						0.	0.	0.
(17) STEVE KOENIG MEMBER	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BILL LESTER MEMBER	1.00	X						0.	0.	0.
(19) GERALD C. LETCH, JR. MEMBER	1.00	X						0.	0.	0.
(20) D. SKIPPER NELSON MEMBER	1.00	X						0.	0.	0.
(21) DONNA C. NORMANDIN MEMBER	1.00	X						0.	0.	0.
(22) KAREN PITCHER MEMBER	1.00	X						0.	0.	0.
(23) HANS RICKHOFF MEMBER	1.00	X						0.	0.	0.
(24) TOM SARETTE MEMBER	1.00	X						0.	0.	0.
(25) DANA SIMMONS MEMBER	1.00	X						0.	0.	0.
(26) JEFF SCHUMACHER MEMBER	1.00	X						0.	0.	0.
<b>1b Sub-total</b> .....								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								688,955.	0.	92,362.
<b>d Total (add lines 1b and 1c)</b> .....								688,955.	0.	92,362.

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 **3**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) HUGH TOPPER MEMBER	1.00	X						0.	0.	0.
(28) JIMMY TOUBIN MEMBER	1.00	X						0.	0.	0.
(29) MICHAEL USSERY MEMBER	1.00	X						0.	0.	0.
(30) ERIC S. COOPER PRESIDENT/CEO	60.00			X				297,397.	0.	37,874.
(31) FRED DENKEWALTER CFO (1/1/13 - 10/18/13)	40.00			X				95,926.	0.	8,375.
(32) KEVIN BROWN CFO	40.00			X				43,065.	0.	3,477.
(33) MICHAEL GUERRA CDO	40.00			X				142,016.	0.	19,494.
(34) ERIKA BORREGO COO	40.00			X				110,551.	0.	23,142.
Total to Part VII, Section A, line 1c								688,955.		92,362.

**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514		
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b>	Federated campaigns .....	<b>1a</b> 1,217,810.						
	<b>b</b>	Membership dues .....	<b>1b</b>						
	<b>c</b>	Fundraising events .....	<b>1c</b> 225,055.						
	<b>d</b>	Related organizations .....	<b>1d</b>						
	<b>e</b>	Government grants (contributions) .....	<b>1e</b> 7,033,028.						
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b> 103,275,076.						
	<b>g</b>	Noncash contributions included in lines 1a-1f: \$ .....	96,502,974.						
	<b>h</b>	<b>Total.</b> Add lines 1a-1f .....	111,750,969.						
	<b>Program Service Revenue</b>			<b>Business Code</b>					
<b>2 a</b>		PURCHASED FOOD .....	624210	993,592.	993,592.				
<b>b</b>		SHARED MAINTENANCE .....	624210	907,630.	907,630.				
<b>c</b>		CONTRACT SERVICES .....	624210	891,389.	891,389.				
<b>d</b>		CATERING .....	624210	495,146.	495,146.				
<b>e</b>		.....							
<b>f</b>		All other program service revenue .....							
<b>g</b>		<b>Total.</b> Add lines 2a-2f .....		3,287,757.					
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) .....		171,650.			171,650.		
	<b>4</b>	Income from investment of tax-exempt bond proceeds .....							
	<b>5</b>	Royalties .....							
	<b>6 a</b>	Gross rents .....	(i) Real	(ii) Personal					
		<b>b</b>	Less: rental expenses .....						
		<b>c</b>	Rental income or (loss) .....						
		<b>d</b>	Net rental income or (loss) .....						
	<b>7 a</b>	Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other					
		<b>b</b>	Less: cost or other basis and sales expenses .....						
		<b>c</b>	Gain or (loss) .....						
		<b>d</b>	Net gain or (loss) .....						
	<b>8 a</b>	Gross income from fundraising events (not including \$ 225,055. of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>	317,746.					
		<b>b</b>	Less: direct expenses .....	<b>b</b>					257,061.
		<b>c</b>	Net income or (loss) from fundraising events .....						60,685.
	<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>						
		<b>b</b>	Less: direct expenses .....	<b>b</b>					
		<b>c</b>	Net income or (loss) from gaming activities .....						
<b>10 a</b>	Gross sales of inventory, less returns and allowances .....	<b>a</b>							
	<b>b</b>	Less: cost of goods sold .....	<b>b</b>						
	<b>c</b>	Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>			<b>Business Code</b>						
<b>11 a</b>	MISCELLANEOUS REVENUE .....	624210	123,612.	123,612.					
	<b>b</b>	OTHER REVENUE .....	624210	14,804.	14,804.				
	<b>c</b>	.....							
	<b>d</b>	All other revenue .....							
	<b>e</b>	<b>Total.</b> Add lines 11a-11d .....		138,416.					
<b>12</b>	<b>Total revenue.</b> See instructions. ....		115,429,147.	3,426,173.	0.	252,005.			

**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 governments and organizations in the United States. See Part IV, line 21	66,173,679.	66,173,679.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	33,189,170.	33,189,170.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	884,031.	701,533.	97,880.	84,618.
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	6,427,550.	5,393,161.	617,399.	416,990.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	101,758.	84,822.	9,955.	6,981.
9 Other employee benefits	825,520.	818,266.	6,940.	314.
10 Payroll taxes	699,798.	622,139.	50,177.	27,482.
11 Fees for services (non-employees):				
a Management				
b Legal	28,872.	14,459.	12,210.	2,203.
c Accounting	58,208.	29,151.	24,616.	4,441.
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.)	12,468.	9,849.	1,684.	935.
12 Advertising and promotion	4,520.	4,520.		
13 Office expenses	807,817.	393,321.	1,200.	413,296.
14 Information technology	79,528.	46,024.	33,504.	
15 Royalties				
16 Occupancy	1,348,523.	1,227,160.	33,189.	88,174.
17 Travel	157,270.	117,726.	11,389.	28,155.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	7,211.	7,211.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	723,248.	639,854.	74,354.	9,040.
23 Insurance	151,668.	142,619.	2,320.	6,729.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>SUPPLIES/FOOD ITEMS</b>	1,010,162.	754,717.	9,483.	245,962.
b <b>BAD DEBT</b>	527,369.	527,369.		
c <b>VEHICLE MAINTENANCE</b>	393,038.	393,038.		
d <b>VOUCHERS</b>	322,936.	322,936.		
e All other expenses	271,833.	153,296.	86,555.	31,982.
25 <b>Total functional expenses.</b> Add lines 1 through 24e	114,206,177.	111,766,020.	1,072,855.	1,367,302.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	665,208.	<b>1</b>	517,877.
	<b>2</b> Savings and temporary cash investments .....	11,875,270.	<b>2</b>	5,128,201.
	<b>3</b> Pledges and grants receivable, net .....	4,830,000.	<b>3</b>	2,710,000.
	<b>4</b> Accounts receivable, net .....	1,443,398.	<b>4</b>	1,479,189.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	19,709,500.	<b>7</b>	19,709,500.
	<b>8</b> Inventories for sale or use .....	6,238,006.	<b>8</b>	5,993,609.
	<b>9</b> Prepaid expenses and deferred charges .....	191,642.	<b>9</b>	137,555.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 6,966,698.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 4,133,252.	<b>10c</b>	2,833,446.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	4,000,000.	<b>12</b>	12,845,628.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	51,691,994.	<b>16</b>	51,355,005.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,965,190.	<b>17</b>	1,025,953.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>25</b>	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	1,965,190.	<b>26</b>	1,025,953.
	<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>		
<b>27</b> Unrestricted net assets .....		43,596,804.	<b>27</b>	49,529,052.
<b>28</b> Temporarily restricted net assets .....		6,130,000.	<b>28</b>	600,000.
<b>29</b> Permanently restricted net assets .....		0.	<b>29</b>	200,000.
<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
<b>30</b> Capital stock or trust principal, or current funds .....			<b>30</b>	
<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....			<b>31</b>	
<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....			<b>32</b>	
<b>33</b> <b>Total net assets or fund balances</b> .....		49,726,804.	<b>33</b>	50,329,052.
<b>34</b> <b>Total liabilities and net assets/fund balances</b> .....	51,691,994.	<b>34</b>	51,355,005.	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	115,429,147.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	114,206,177.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	1,222,970.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	49,726,804.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	195,968.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-816,690.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	50,329,052.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>2a</b>	<input checked="" type="checkbox"/>
<b>b</b> Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>2b</b>	<input checked="" type="checkbox"/>
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	<b>2c</b>	<input checked="" type="checkbox"/>
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	<b>3a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<b>3b</b>	<input checked="" type="checkbox"/>

Form 990 (2013)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

**SAN ANTONIO FOOD BANK INC**

Employer identification number

**74-2122979**

**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 11, 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.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An 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.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I      b ☐ Type II      c ☐ Type III - Functionally integrated      d ☐ Type III - Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? \_\_\_\_\_
- (ii) A family member of a person described in (i) above? \_\_\_\_\_
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? \_\_\_\_\_
- h Provide the following information about the supported organization(s).

	Yes	No
<b>11g(i)</b>		
<b>11g(ii)</b>		
<b>11g(iii)</b>		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

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

Schedule A (Form 990 or 990-EZ) 2013



**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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	76,586,242.	85,166,015.	90,400,764.	113,596,247.	111,750,969.	477,500,237.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	76,586,242.	85,166,015.	90,400,764.	113,596,247.	111,750,969.	477,500,237.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						16,714,393.
<b>6 Public support.</b> Subtract line 5 from line 4.						460,785,844.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>7</b> Amounts from line 4 .....	76,586,242.	85,166,015.	90,400,764.	113,596,247.	111,750,969.	477,500,237.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	24,347.	66,420.	53,278.	136,813.	171,650.	452,508.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....	26,209.	34,250.	61,159.	95,412.	138,416.	355,446.
<b>11 Total support.</b> Add lines 7 through 10						478,308,191.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....	<b>12</b>					
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	96.34	%
<b>15</b> Public support percentage from 2012 Schedule A, Part II, line 14 .....	<b>15</b>	96.16	%
<b>16a 33 1/3% support test - 2013.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input checked="" type="checkbox"/>		
<b>b 33 1/3% support test - 2012.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>17a 10% -facts-and-circumstances test - 2013.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>b 10% -facts-and-circumstances test - 2012.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....	<input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.) .....						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) .....						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ..... ☐**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2012 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for <b>2013</b> (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2012</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2013.** 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 - 2012.** 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 ..... ☐

### Supplemental Information.

Also complete this part for any additional information. (See instructions).

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and  
its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

Name of the organization

SAN ANTONIO FOOD BANK INC

Employer identification number

74-2122979

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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

☒ For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization	Employer identification number
SAN ANTONIO FOOD BANK INC	74-2122979

**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	HEB 646 SOUTH MAIN AVE SAN ANTONIO, TX 78204	\$ 10,118,340.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	FEEDING AMERICA 30 EAST WACKER DRIVE CHICAGO, IL 60601	\$ 11,952,540.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	TEXAS DEPARTMENT OF AGRICULTURE 4900 N. LAMAR BLVD. AUSTIN, TX 78751	\$ 19,608,227.	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	Employer identification number
SAN ANTONIO FOOD BANK INC	74-2122979

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if 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 ITEMS	\$ 10,118,340.	06/30/14
2	FOOD ITEMS	\$ 11,952,540.	06/30/14
3	FOOD ITEMS	\$ 19,608,227.	06/30/14
		\$	
		\$	
		\$	

Name of organization	Employer identification number
<b>SAN ANTONIO FOOD BANK INC</b>	<b>74-2122979</b>

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. 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 information 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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(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," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**  
▶ **Attach to Form 990.**

▶ **Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)**

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

**Name of the organization**

**SAN ANTONIO FOOD BANK INC**

**Employer identification number**

**74-2122979**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate 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" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ .....

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

1a If the organization elected, as permitted under SFAS 116 (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 SFAS 116 (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) Revenues included in 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 SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ..... ▶ \$ .....

b Assets included in Form 990, Part X ..... ▶ \$ .....



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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a 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 programs  
 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" to 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? ☐ 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" to 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	4,000,000.	0.			
b Contributions	200,000.	4,000,000.			
c Net investment earnings, gains, and losses	197,780.				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	4,397,780.	4,000,000.			

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☒ 100.00 %  
 b Permanent endowment ☐ %  
 c Temporarily restricted endowment ☐ %

The percentages in 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:

- (i) unrelated organizations  
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ☐

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" to 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		45,293.		45,293.
b Buildings		39,025.	6,305.	32,720.
c Leasehold improvements		118,303.	36,397.	81,906.
d Equipment		1,934,262.	1,173,828.	760,434.
e Other		4,829,815.	2,916,722.	1,913,093.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,833,446.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" to 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) SAFB ENDOWMENT FUND	4,397,780.	COST
(B) FROST INVESTMENT	8,447,848.	COST
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	12,845,628.	

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (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" to Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	115,625,201.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains on investments	<b>2a</b>	195,968.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	78,063.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	274,031.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	115,351,170.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	77,977.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	77,977.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	115,429,147.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	114,939,831.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	811,631.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	811,631.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	114,128,200.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	77,977.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	77,977.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	114,206,177.

**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:

REVENUE TO SAFB REAL ESTATE, INC. REPORTED ON CONSOLIDATED

FINANCIALS

78,063.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RELATED PARTY EXPENSE

77,977.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENDITURES FOR SAFB REAL ESTATE, INC. REPORTED ON

CONSOLIDATED FINANCIALS

811,631.

<b>Part XIII</b>	<b>Supplemental Information</b> <i>(continued)</i>
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PART XII, LINE 4B - OTHER ADJUSTMENTS:

RELATED PARTY EXPENSE	77,977.
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Department of the Treasury  
Internal Revenue Service

### Supplemental Information Regarding Fundraising or Gaming Activities

**Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.**

**▶ Attach to Form 990 or Form 990-EZ.**

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

# 2013

## Open To Public Inspection

Name of the organization

SAN ANTONIO FOOD BANK INC

Employer identification number  
74-2122979

## Part I

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

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

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

**2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes      ☐ No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
L.W. ROBBINS - 2013 SUMMER STREET , HOLLISTON, MA 01746	DIRECT MAILERS		X	1,322,475.	190,715.	1,131,760.
<b>Total</b> .....				1,322,475.	190,715.	1,131,760.

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1 <b>HARVEST OF HOPE</b>	(b) Event #2 <b>CHAMPIONS AGAINST HUNG</b>	(c) Other events <b>3</b>	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	<b>1</b> Gross receipts .....	<b>109,437.</b>	<b>140,000.</b>	<b>293,364.</b>	<b>542,801.</b>
	<b>2</b> Less: Contributions .....	<b>9,645.</b>	<b>125,300.</b>	<b>90,110.</b>	<b>225,055.</b>
	<b>3</b> Gross income (line 1 minus line 2) .....	<b>99,792.</b>	<b>14,700.</b>	<b>203,254.</b>	<b>317,746.</b>
Direct Expenses	<b>4</b> Cash prizes .....				
	<b>5</b> Noncash prizes .....				
	<b>6</b> Rent/facility costs .....				
	<b>7</b> Food and beverages .....				
	<b>8</b> Entertainment .....				
	<b>9</b> Other direct expenses .....	<b>11,325.</b>	<b>16,434.</b>	<b>229,302.</b>	<b>257,061.</b>
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				<b>257,061.</b>
	<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				<b>60,685.</b>

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

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

**9** Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_**a** Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No**b** If "No," explain: \_\_\_\_\_**10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No**b** If "Yes," explain: \_\_\_\_\_

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity operated in:
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

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

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

**16** Gaming manager information:

Name ► \_\_\_\_\_

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

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

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions:

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

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

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

▶ **Attach to Form 990.**

▶ **Information about Schedule I (Form 990) and its instructions is at** [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Name of the organization

**SAN ANTONIO FOOD BANK INC**

**Employer identification number**  
**74-2122979**

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

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

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

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
OUR LADY OF GUADALUPE LEMING P.O. BOX 568 LEMING, TX 78050	53-0196617	501 ( C ) 3	0.	296,903.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HOSANNA BAPTIST CHURCH 237 SCHOOL DR. POTEET, TX 78065	75-6044885	501 ( C ) 3	0.	262,971.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SAND BRANCH BAPTIST CHURCH 1250 CR 313 BIGFOOT, TX 78005	75-6044885	501 ( C ) 3	0.	258,647.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. PHILIP BENIZI CATHOLIC CHURCH P.O. BOX 348 POTEET, TX 78065	53-0196617	501 ( C ) 3	0.	249,311.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FIRST BAPTIST CHURCH OF JOURDANTON P.O. BOX 490 JOURDANTON, TX 78026	75-6044885	501 ( C ) 3	0.	96,348.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MEDINA CHILDREN'S HOME 21300 HWY 16 N. MEDINA, TX 78055	74-1323914	501 ( C ) 3	0.	143,369.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **502.**

**3** Enter total number of other organizations listed in the line 1 table **502.**

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

**Schedule I (Form 990) (2013)**



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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BANDERA CO HELPING HAND CTR P.O. BOX 1092 BANDERA, TX 78003	74-2309937	501 ( C ) 3	0.	39,579.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FAITH TABERNACLE 9606 BASKET ELM SAN ANTONIO, TX 78254	52-2439570	501 ( C ) 3	0.	1,224,557.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CATHOLIC CHARITIES 202 W. FRENCH SAN ANTONIO, TX 78212	74-1109837	501 ( C ) 3	0.	54,638.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: HOLY SPIRIT 758 W. RAMSEY RD. SAN ANTONIO, TX 78216		501 ( C ) 3	0.	67,684.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. ANN 210 ST. ANN SAN ANTONIO, TX 78201	13-5562362	501 ( C ) 3	0.	46,001.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SA YOUTH P.O. BOX 7844 SAN ANTONIO, TX 78207	74-2333088	501 ( C ) 3	0.	209,606.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CHRIST EPISCOPAL CHURCH 510 BELKNAP SAN ANTONIO, TX 78212	31-1629166	501 ( C ) 3	0.	103,630.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: RESURRECTION OF THE LORD 7990 MILITARY DR W SAN ANTONIO, TX 78227	13-5562362	501 ( C ) 3	0.	189,826.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PROVIDENCE PLACE 6487 WHITBY RD. SAN ANTONIO, TX 78240	74-1168923	501 ( C ) 3	0.	77,097.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESBYTERIAN CHILDREN'S HOME 4407 BEE CAVE RD. #520 AUSTIN, TX 78746	75-0818172	501 ( C ) 3	0.	27,014.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CHRISTIAN SENIOR SERVICES 4306 NW LOOP 410 SAN ANTONIO, TX 78229	74-1948646	501 ( C ) 3	0.	28,284.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. MARY MAGDALEN CHURCH 1710 CLOWER STREET SAN ANTONIO, TX 78201	13-5562362	501 ( C ) 3	0.	214,238.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BOYS AND GIRLS CLUBS CALDERON 600 SW 19TH ST. SAN ANTONIO, TX 78207	74-1109637	501 ( C ) 3	0.	122,361.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. PETER PRINCE OF APOSTLES 111 BARILLA SAN ANTONIO, TX 78209	13-5562362	501 ( C ) 3	0.	52,140.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HOPE LUTHERAN DAYCARE 5714 CALLAGHAN RD. SAN ANTONIO, TX 78228	41-1568278	501 ( C ) 3	0.	87,361.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HOUSE OF PRAYER 2911 GUNSMOKE SAN ANTONIO, TX 78227	74-2576853	501 ( C ) 3	0.	44,605.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
KING OF KINGS LUTHERAN DAYCARE 13888 DREAMWOOD SAN ANTONIO, TX 78233	43-0658188	501 ( C ) 3	0.	16,345.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CONVERSE CHILDCARE CENTER 9146 FM 78 CONVERSE, TX 78109	74-2604981	501 ( C ) 3	0.	36,261.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILY VIOLENCE PREVENTION SERVICES - 7911 BROADWAY - SAN ANTONIO, TX 78209	74-1994151	501 ( C ) 3	0.	49,753.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: SAN JOSE MISSION 619 OVERRIDGE DR. SAN ANTONIO, TX 78221	13-5562362	501 ( C ) 3	0.	944,041.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SALVATION ARMY HOPE CENTER - KITCHEN - 521 W. ELMIRA - SAN ANTONIO, TX 78212	58-0660607	501 ( C ) 3	0.	614,590.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SALVATION ARMY HOPE CENTER - PANTRY - 521 W. ELMIRA - SAN ANTONIO, TX 78212	58-0660607	501 ( C ) 3	0.	367,512.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SETON HOME 1115 MISSION ROAD SAN ANTONIO, TX 78210	53-0196617	501 ( C ) 3	0.	13,378.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SALVATION ARMY - ARC 1324 SOUTH FLORES ST. SAN ANTONIO, TX 78204	58-0660607	501 ( C ) 3	0.	138,485.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
THE CHILDREN'S SHELTER 2939 W. WOODLAWN SAN ANTONIO, TX 78228	74-1109660	501 ( C ) 3	0.	1,541.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. HENRY'S CONFERENCE 1619 S. FLORES SAN ANTONIO, TX 78204	13-5562362	501 ( C ) 3	0.	33,659.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SAN ANTONIO AIDS FOUNDATION 818 GRAYSON SAN ANTONIO, TX 78208	74-2427853	501 ( C ) 3	0.	260,494.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEEN CHALLENGE OF S. TEXAS 3850 S LOOP HWY 1604 W SAN ANTONIO, TX 78264	74-1816616	501 ( C ) 3	0.	148,094.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
REACHING MAXIMUM INDEPENDENCE 6336 MONTGOMERY DRIVE SAN ANTONIO, TX 78239	74-2243259	501 ( C ) 3	0.	430.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
REACHING MAXIMUM INDEPENDENCE 6336 MONTGOMERY DRIVE SAN ANTONIO, TX 78239	74-2243259	501 ( C ) 3	0.	38,237.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
REACHING MAXIMUM INDEPENDENCE 6336 MONTGOMERY DRIVE SAN ANTONIO, TX 78239	74-2243259	501 ( C ) 3	0.	9,692.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
AGAPE MINISTRY P.O. BOX 18042 SAN ANTONIO, TX 78218	74-2894314	501 ( C ) 3	0.	200,258.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ANTIOCH BAPTIST CHURCH 101 N. WALTERS ST. SAN ANTONIO, TX 78202	74-2048437	501 ( C ) 3	0.	157,905.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BETHEL AME OUTREACH 225 N. SWISS STREET SAN ANTONIO, TX 78202	74-3007588	501 ( C ) 3	0.	159,301.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BRIGHT AND MORNING STAR CHURCH 547 K STREET SAN ANTONIO, TX 78220	75-6044885	501 ( C ) 3	0.	199,763.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BUENA VOLUNTAD BAPTIST 1602 W. MARTIN SAN ANTONIO, TX 78207	75-6044885	501 ( C ) 3	0.	29,092.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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CAM SAN ANTONIO 110 MCCULLOUGH SAN ANTONIO, TX 78215	74-1947967	501 ( C ) 3	0.	286,762.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CAM SAN ANTONIO 5084 DE ZAVALA SAN ANTONIO, TX 78249		501 ( C ) 3	0.	36,586.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CENTRO CRISTIANO INTERNACIONAL 4151 CULEBRA SAN ANTONIO, TX 78228	74-2350140	501 ( C ) 3	0.	351,886.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CRESTHOLME PRESBYTERIAN CHURCH 1602 GOLIAD SAN ANTONIO, TX 78223	23-6393377	501 ( C ) 3	0.	125,441.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EL CARMEN WELLNESS CENTER 18555-1 LEAL RD. SAN ANTONIO, TX 78221		501 ( C ) 3	0.	7,351.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
DE PAUL FAMILY CENTER DEPAUL FAMILY CENTER SAN ANTONIO, TX 78211	53-0196617	501 ( C ) 3	0.	56,567.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: DIVINE PROVIDENCE CHURCH 5667 OLD PEARSALL ROAD SAN ANTONIO, TX 78242	13-5562362	501 ( C ) 3	0.	84,731.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: OUR LADY OF MT. CARMEL AT EL CARMEN - 18555 LEAL RD - SAN ANTONIO, TX 78221	13-5562362	501 ( C ) 3	0.	69,256.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ELLA AUSTIN COMMUNITY CENTER P.O. BOX 8147 SAN ANTONIO, TX 78208	74-1166908	501 ( C ) 3	0.	49,643.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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FIRST MEXICAN BAPTIST CHURCH 201 MERIDITH SAN ANTONIO, TX 78228	74-2219014	501 ( C ) 3	0.	76,882.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FISHER HOUSE INC. 1445 FOSTER AVE. SAN ANTONIO, TX 78236	74-2603325	501 ( C ) 3	0.	10,475.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
AMERICAN AGAPE 7334 BLANCO SAN ANTONIO, TX 78216	75-2249382	501 ( C ) 3	0.	153,894.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
AMERICAN AGAPE AT NOB HILL APARTMENTS - 7626 CALLAGHAN - SAN ANTONIO, TX 78229		501 ( C ) 3	0.	6,049.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: FRIENDSHIP HOUSE 401 CEDARHURST SAN ANTONIO, TX 78227	13-5562362	501 ( C ) 3	0.	109,837.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FUERZA UNIDA 710 NEW LAREDO HWY SAN ANTONIO, TX 78211	74-2615917	501 ( C ) 3	0.	28,948.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
REDEEMING GRACE BAPTIST CHURCH 6035 FM 78 SAN ANTONIO, TX 78244	74-2553472	501 ( C ) 3	0.	333,111.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GARDENDALE AREA COMMUNITY 110 N. KIEFER RD. SAN ANTONIO, TX 78220	74-2595397	501 ( C ) 3	0.	33,850.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GEORGE GERVIN BASIC CENTER 511 YUCCA ST. ST. 204 SAN ANTONIO, TX 78220	74-2587818	501 ( C ) 3	0.	32,823.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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GREATER RANDOLPH AREA SERVICE PROGRAM - PROGRAM GRASP - CONVERSE, TX 78109		501 ( C ) 3	0.	136,353.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HABILITATIVE HOMES 9019 OLD SKY HARBOR RD. SAN ANTONIO, TX 78242	74-2605863	501 ( C ) 3	0.	14,802.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HARLANDALE BAPTIST CHURCH 502 E. SOUTHCROSS BLVD. SAN ANTONIO, TX 78214	75-2599207	501 ( C ) 3	0.	191,883.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GRACE HOUSE 107 WHITETAIL DR. BOERNE, TX 78006	74-3067874	501 ( C ) 3	0.	35,864.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BAPTIST UNIVERSITY OF AMERICAS 8303 W ANSLEY SAN ANTONIO, TX 78224	74-2599785	501 ( C ) 3	0.	7,537.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EL DIVINO SALVADOR P.O. BOX 28447 SAN ANTONIO, TX 78228	74-2886380	501 ( C ) 3	0.	89,734.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HOUSE OF NEIGHBORLY SERVICE 407 N. CALAVARES SAN ANTONIO, TX 78207	74-1153442	501 ( C ) 3	0.	263,267.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
JEFFERSON U.M.C. 758 DONALDSON SAN ANTONIO, TX 78201	36-2899329	501 ( C ) 3	0.	51,705.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ALPHA HOME INC. 300 E. MULBERRY SAN ANTONIO, TX 78212	74-1668144	501 ( C ) 3	0.	102,072.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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AMERICAN SUNRISE INSTITUTE 2007 W. COMMERCE SAN ANTONIO, TX 78207	74-3001093	501 ( C ) 3	0.	45,090.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MACEDONIA BAPTIST CHURCH 963 S.W. 40TH ST. SAN ANTONIO, TX 78237	75-6044885	501 ( C ) 3	0.	35,828.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MADONNA NEIGHBORHOOD CENTER 1906 CASTROVILLE RD. SAN ANTONIO, TX 78237	53-0196617	501 ( C ) 3	0.	223,509.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MAYFIELD PARK BAPTIST CHURCH 700 W. HUTCHINS SAN ANTONIO, TX 78221		501 ( C ) 3	0.	685,907.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MT. SINAI FOOD MINISTRY P.O. BOX 200301 SAN ANTONIO, TX 78202	74-2329744	501 ( C ) 3	0.	978,558.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NORTHERN HILLS U.M.C. 3703 N. LOOP 1604 E SAN ANTONIO, TX 78247	31-1813333	501 ( C ) 3	0.	53,499.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NORTHWEST CHURCH OF CHRIST 9681 W. LOOP 1604 N SAN ANTONIO, TX 78254	74-1994847	501 ( C ) 3	0.	301,924.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
OASIS OUTREACH MISSION 10202 DESERT SANDS K13 SAN ANTONIO, TX 78216	75-6044885	501 ( C ) 3	0.	3,650.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: OUR LADY OF GOOD COUNSEL 1204 CASTROVILLE RD. SAN ANTONIO, TX 78237	13-5562362	501 ( C ) 3	0.	22,329.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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UNITED SERVICE ORGANIZATION 203 W. MARKET SAN ANTONIO, TX 78205		501 ( C ) 3	0.	50,207.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: OUR LADY OF THE ANGELS 1214 STONEWALL SAN ANTONIO, TX 78211	13-5562362	501 ( C ) 3	0.	58,628.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: PRINCE OF PEACE 7893 NORTH GRISSOM RD. SAN ANTONIO, TX 78251	13-5562362	501 ( C ) 3	0.	283,700.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PROGRESSIVE MISSIONARY BAPTIST 1859 CENTER ST. SAN ANTONIO, TX 78208	75-6044885	501 ( C ) 3	0.	115,402.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SALVATION ARMY DAVE COY CENT 226 NOLAN STREET SAN ANTONIO, TX 78202		501 ( C ) 3	0.	230,849.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PRESA COMMUNITY CENTER 3721 S. PRESA SAN ANTONIO, TX 78210	74-1902249	501 ( C ) 3	0.	206,089.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. ALPHONSUS 1008 SAN CARLOS SAN ANTONIO, TX 78207	13-5562362	501 ( C ) 3	0.	97,166.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SA CHRISTIAN HOPE RESOURCE 321 N. GENERAL MCMULLEN SAN ANTONIO, TX 78237	74-2989365	501 ( C ) 3	0.	2,486,778.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SACRED HEART CATHOLIC CHURCH 2114 W. HOUSTON SAN ANTONIO, TX 78207	53-0196617	501 ( C ) 3	0.	201,290.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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MEDICAL CENTER BAPTIST CHURCH 7015 WURZBACH SAN ANTONIO, TX 78240	75-6044885	501 ( C ) 3	0.	234,792.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. DOMINICS CATHOLIC CHURCH 5919 INGRAM RD. SAN ANTONIO, TX 78228	13-5562362	501 ( C ) 3	0.	75,850.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SAN ANTONIO FOR CHRIST 343 SPAATZ SAN ANTONIO, TX 78211	74-6224495	501 ( C ) 3	0.	26,350.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CALVARY TEMPLE ASSEMBLY OF GOD 14335 O'CONNOR RD. SAN ANTONIO, TX 78247	44-0577787	501 ( C ) 3	0.	135,496.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SAN JUAN DE LOS LAGOS 3231 EL PASO ST. SAN ANTONIO, TX 78207	53-0196617	501 ( C ) 3	0.	613,390.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
TOUCH OF GRACE CHURCH 7331 NORRIS ELMENDORF, TX 78112	74-2761285	501 ( C ) 3	0.	8,882.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SOUTH SAN FILADELPHIA BAPTIST 2483 W SOUTHCROSS BLVD SAN ANTONIO, TX 78211	75-6044885	501 ( C ) 3	0.	117,813.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. AGNES CHURCH 804 RUIZ STREET SAN ANTONIO, TX 78207	13-5562362	501 ( C ) 3	0.	33,566.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. ANDREW'S EPISCOPAL CHURCH 6110 N.W. LOOP 410 SAN ANTONIO, TX 78238	31-1629166	501 ( C ) 3	0.	80,266.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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SVDP: ST. ELIZABETH ANN SETON 23019 S.FORK SAN ANTONIO, TX 78255	13-5562362	501 ( C ) 3	0.	146,062.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. LEO CATHOLIC 4401 SOUTH FLORES SAN ANTONIO, TX 78214	13-5562362	501 ( C ) 3	0.	233,156.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. LUKE CATHOLIC 4603 MANITOU SAN ANTONIO, TX 78228	13-5562362	501 ( C ) 3	0.	47,582.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. MATTHEW'S 10703 WURZBACH RD. SAN ANTONIO, TX 78230	13-5562362	501 ( C ) 3	0.	249,713.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. PAUL U.M.C. 508 N. CENTER ST. SAN ANTONIO, TX 78202	31-1813333	501 ( C ) 3	0.	151,981.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. PAUL'S EPISCOPAL CHURCH 1018 EAST GRAYSON SAN ANTONIO, TX 78208	31-1629166	501 ( C ) 3	0.	104,002.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. PJ'S COUNSELING CENTER 919 MISSION ROAD SAN ANTONIO, TX 78210	53-0196617	501 ( C ) 3	0.	14,634.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. PJ'S CHILDREN'S HOME 919 MISSION ROAD SAN ANTONIO, TX 78210	53-0196617	501 ( C ) 3	0.	28,983.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. STEPHEN BAPTIST CHURCH 2011 E. CARSON ST. SAN ANTONIO, TX 78208	75-2599207	501 ( C ) 3	0.	49,261.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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SVDP: ST. TIMOTHY CATHOLIC 1515 SALTILLO ST. SAN ANTONIO, TX 78207	13-5562362	501 ( C ) 3	0.	16,303.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. VINNY'S BISTRO PO 831074 SAN ANTONIO, TX 78283	13-5562362	501 ( C ) 3	0.	671,843.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
WEST DURANGO PLAZA- HSC INC. 5635 W WEST CESAR E. CHAVEZ BLVD SAN ANTONIO, TX 78237	74-2685268	501 ( C ) 3	0.	20,053.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ABUNDANT LIFE CHURCH OF GOD 7431 S. PRESA SAN ANTONIO, TX 78223	62-0484177	501 ( C ) 3	0.	1,166,915.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ABUNDANT LIFE CHURCH 8759 GRISSOM RD SAN ANTONIO, TX 78251		501 ( C ) 3	0.	851,182.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
VOLUNTEER COUNCIL FOR TYC 321 N. CENTER STREET SAN ANTONIO, TX 78202	74-2219014	501 ( C ) 3	0.	1,821.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
WESLEY HEALTH AND WELLNESS CENTER 4507 MEDICAL DRIVE SAN ANTONIO, TX 78229	74-1287016	501 ( C ) 3	0.	49,288.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: MISSION ESPADA 10040 ESPADA ROAD SAN ANTONIO, TX 78214	13-5562362	501 ( C ) 3	0.	376,543.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: HOLY ROSARY 159 CAMINO SANTA MARIA SAN ANTONIO, TX 78228	13-5562362	501 ( C ) 3	0.	34,276.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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HARLANDALE ISD 102 GENEVIEVE SAN ANTONIO, TX 78214		501 ( C ) 3	0.	23,421.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CITY YEAR SAN ANTONIO 109 B NORTH SAN SABA SAN ANTONIO, TX 78207	22-2882549	501 ( C ) 3	0.	4,352.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HOLY REDEEMER 1819 NEVADA STREET SAN ANTONIO, TX 78203	53-0196617	501 ( C ) 3	0.	116,633.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ARTISAN AT WILLOW SPRINGS APTS 212 W. LAUREL SAN ANTONIO, TX 78212	53-0196617	501 ( C ) 3	0.	1,643.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COSTA VALENCIA 6303 OLD HWY 90 W SAN ANTONIO, TX 78227		501 ( C ) 3	0.	1,589.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COSTA MIRADA 9323 SOMERSET RD SAN ANTONIO, TX 78211		501 ( C ) 3	0.	5,755.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
INNER CITY DEVELOPMENT INC. 1300 CHIHUAHUA ST. SAN ANTONIO, TX 78207	74-1619603	501 ( C ) 3	0.	21,622.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. PATRICK'S SOCIAL SERVICES 1114 WILLOW SAN ANTONIO, TX 78208	53-0916617	501 ( C ) 3	0.	39,691.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
KING OF KINGS LUTHERAN CHURCH 13888 DREAMWOOD SAN ANTONIO, TX 78233	43-0658188	501 ( C ) 3	0.	233,813.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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LAUREL HTS. COMMUNITY SERVICES 703 W. ASHBY SAN ANTONIO, TX 78212	52-0643036	501 ( C ) 3	0.	469,672.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CORAZON MINISTRIES TRAVIS PARK 230 E. TRAVIS SAN ANTONIO, TX 78205	20-0319533	501 ( C ) 3	0.	126,826.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CHRIST OUR SAVIOR CHILDCARE 5323 BLANCO RD. SAN ANTONIO, TX 78216	43-0658188	501 ( C ) 3	0.	36,117.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NORTHWEST HILLS BAPTIST CHURCH 6585 HEATH RD. SAN ANTONIO, TX 78250	75-6044885	501 ( C ) 3	0.	188,913.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BOBBIES BOUTIQUE 7210 LOUIS PASTEUR DR SAN ANTONIO, TX 78229	74-2195297	501 ( C ) 3	0.	6,264.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GOOD SHEPHERD CHURCH OF GOD 1302 GILLETTE SAN ANTONIO, TX 78224	65-1281636	501 ( C ) 3	0.	117,017.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FAITH ASSEMBLY OF GOD 8023 HUEBNER RD. SAN ANTONIO, TX 78240	44-0577787	501 ( C ) 3	0.	211,001.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
IRENE TEAGUE FOOD PANTRY 15209 WHEELER RD ATASCOSA, TX 78002	36-2899329	501 ( C ) 3	0.	87,402.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
JIREH HOUSE MINISTRIES 9931 PANTHER BAY SAN ANTONIO, TX 78245	27-1607633	501 ( C ) 3	0.	162,732.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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MAKING A DIFFERENCE 216 PURCELL SAN ANTONIO, TX 78237	27-1607633	501 ( C ) 3	0.	878,526.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GOOD SAM FAMILY SERVICES PANTRY 1600 SALTILLO SAN ANTONIO, TX 78207	74-1117340	501 ( C ) 3	0.	33,248.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
STRONG FOUNDATION 414 N. HACKBERRY SAN ANTONIO, TX 78202	43-1835596	501 ( C ) 3	0.	120,758.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CENTER FOR HEALTH CARE SERVICE 8155 LONE SHADOW TRAIL CONVERSE, TX 78109-2436	47-0857847	501 ( C ) 3	0.	34,336.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SAN ANTONIO HOUSING AUTHORITY 818 S. FLORES SAN ANTONIO, TX 78204		501 ( C ) 3	0.	650,351.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
DENVER HEIGHTS CHURCH 1409 E. COMMERCE SAN ANTONIO, TX 78205	74-2315789	501 ( C ) 3	0.	55,393.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SAN ANTONIO FAMILY ENDEAVORS 7500 U.S. HWY 90 WEST SAN ANTONIO, TX 78227	23-7223078	501 ( C ) 3	0.	7,791.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SAN ANTONIO FAMILY ENDEAVORS 202 ROSEMONT DR. SAN ANTONIO, TX 78228		501 ( C ) 3	0.	10,698.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
DRESS FOR SUCCESS SAN ANTONIO 600 N FRIO ST SAN ANTONIO, TX 78207	74-2948088	501 ( C ) 3	0.	16,013.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EL MANANTIAL FOOD PANTRY 3000 N. NEW BRAUNFELS SAN ANTONIO, TX 78209	75-6044885	501 ( C ) 3	0.	69,524.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
VOLUNTEERS OF AMERICA 300 E. MIDWAY DRIVE EULESS, TX 76039	13-1692595	501 ( C ) 3	0.	56,153.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CHILDSAFE 7130 HWY 90 WEST SAN ANTONIO, TX 78227	74-2633697	501 ( C ) 3	0.	2,040.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SENDERO ASSEMBLY OF GOD 5408 DAUGHTREY SAN ANTONIO, TX 78238	44-0577787	501 ( C ) 3	0.	658,858.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
UNITED WAY OF SAN ANTONIO 5200 OLD HWY 90 W SAN ANTONIO, TX 78227		501 ( C ) 3	0.	523,429.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MOUNT ZION BC FOOD PANTRY 333 MARTIN LUTHER KING SAN ANTONIO, TX 78203	74-1310180	501 ( C ) 3	0.	230,834.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PAX CHRISTI 3311 S. PINE SAN ANTONIO, TX 78223	53-0196617	501 ( C ) 3	0.	298,177.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LIFE SYNAGOGUE COMM. INIT. 222 ARDMORE SAN ANTONIO, TX 78237	26-0615856	501 ( C ) 3	0.	33,504.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BETHESDA ASSEMBLY OF GOD 8311 ZARZAMORA SAN ANTONIO, TX 78224	44-0577787	501 ( C ) 3	0.	73,695.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)



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ROSE OF SHARON CHRISTIAN CHURCH 2118 N. ZARZAMORA SAN ANTONIO, TX 78201	74-2613042	501 ( C ) 3	0.	1,283.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. MARKS EPISCOPAL 315 EAST PECAN SAN ANTONIO, TX 78205	31-1629166	501 ( C ) 3	0.	4,293.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GOODWILL INDUSTRIES 406 W. COMMERCE SAN ANTONIO, TX 78207	53-0196517	501 ( C ) 3	0.	10,509.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. JOHN'S UNITED METHODIST CHURCH 2002 BANDERA ROAD SAN ANTONIO, TX 78228	31-1813333	501 ( C ) 3	0.	122,120.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
AMERICAN GI FORUM 611 N. FLORES SAN ANTONIO, TX 78205	74-2033203	501 ( C ) 3	0.	160,498.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SAN ANTONIO SCHOOL FOR INQUIRY AND CREATIVITY - 4618 SAN PEDRO - SAN ANTONIO, TX 78212	52-2169554	501 ( C ) 3	0.	602.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CHCS: DAY ACTIVITY HEALTH SERVICES 227 W. DREXEL SAN ANTONIO, TX 78210	47-0857847	501 ( C ) 3	0.	18,476.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
K'S COMMUNITY DEVELOPMENT P.O. BOX 200373 SAN ANTONIO, TX 78220	11-3828961	501 ( C ) 3	0.	180,884.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
K AND K CHRISTIAN CHILDCARE P.O. BOX 200373 SAN ANTONIO, TX 78220	74-2853802	501 ( C ) 3	0.	39,796.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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PTK FOOD PANTRY 1300 SAN PEDRO SAN ANTONIO, TX 78212	20-5469890	501 ( C ) 3	0.	118,513.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LATIN AMERICAN BIBLE INSTITUTE 10822 FM 1560 N SAN ANTONIO, TX 78254	44-0577787	501 ( C ) 3	0.	87,268.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
RESPIRE CARE RESIDENTIAL P.O. BOX 12633 SAN ANTONIO, TX 78212	74-2467770	501 ( C ) 3	0.	49,851.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMMUNITY ANGELS FOOD PANTRY 1411 W. WILDWOOD DRIVE SAN ANTONIO, TX 78201	27-0813763	501 ( C ) 3	0.	731,831.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EMMANUEL PRESBYTERIAN 713 DIVISION SAN ANTONIO, TX 78225	23-6393377	501 ( C ) 3	0.	423,273.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
WEST AVENUE COMPASSION 10715 WEST AVENUE SAN ANTONIO, TX 78213	80-0623205	501 ( C ) 3	0.	337,239.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
IGLESIA METODISTA EMANUEL P.O. BOX 28447 SAN ANTONIO, TX 78228	74-2886380	501 ( C ) 3	0.	232,374.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FEED THE HUNGRY SAC 301 W. DEWEY PLACE SAN ANTONIO, TX 78212	74-2438838	501 ( C ) 3	0.	8,244.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
INTERNATIONAL OUTREACH MINISTRY 515 MCCULLOUGH SAN ANTONIO, TX 78215	75-6044885	501 ( C ) 3	0.	111,631.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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TIME DOLLAR COMMUNITY TABLE 2806 W. SALINAS ST. SAN ANTONIO, TX 78207	65-1281636	501 ( C ) 3	0.	71,432.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
WORLD VISION: H.O.M.E 4635 GROSENBACHER SAN ANTONIO, TX 78245	741989606	501 ( C ) 3	0.	20,563.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HEADSTART EDGEWOOD 3300 RUIZ SAN ANTONIO, TX 78228	74-2122979	501 ( C ) 3	0.	66,160.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PLACE OF GRACE FELLOWSHIP 2938 NACOGDOCHES SAN ANTONIO, TX 78217	35-6064030	501 ( C ) 3	0.	57,009.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: SACRED HEART OF JESUS IN VON ARMY - PO BOX 118 - VON ARMY, TX 78073	13-5562362	501 ( C ) 3	0.	836,211.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: SAMC CONFERENCE 6150 ROFT RD. BLDG C. SAN ANTONIO, TX 78253	13-5562362	501 ( C ) 3	0.	238,764.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. ROSE OF LIMA 9883 MARBACH RD. SAN ANTONIO, TX 78245	13-5562362	501 ( C ) 3	0.	131,890.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. JOHN NEUMANN CONFERENCE 6680 CRESTWAY DR. SAN ANTONIO, TX 78239	13-5562362	501 ( C ) 3	0.	41,535.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. BRIGID 6907 KITCHENER ST. SAN ANTONIO, TX 78240	13-5562362	501 ( C ) 3	0.	87,548.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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SVDP: OUR LADY QUEEN OF HEAVEN 11150 MACDONA-LACOSTE RD. ATASCOSA, TX 78002	13-5562362	501 ( C ) 3	0.	451,139.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NEW CREATION CHRISTIAN FELLOWSHIP 8700 FOURWINDS DR. WINDCREST, TX 78239	74-2366440	501 ( C ) 3	0.	80,787.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. HELENA'S 14714 EDMONT ST. SAN ANTONIO, TX 78247	13-5562362	501 ( C ) 3	0.	66,394.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. CECILIA 125 W. WHITTIER SAN ANTONIO, TX 78210	13-5562362	501 ( C ) 3	0.	174,919.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: OUR LADY OF PERPETUAL HELP 618 S. GRIMES SAN ANTONIO, TX 78203	13-5562362	501 ( C ) 3	0.	86,841.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: LITTLE FLOWER 814 KENTUCKY SAN ANTONIO, TX 78201	13-5562362	501 ( C ) 3	0.	16,443.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: THE NEST 4535 LORD RD. SAN ANTONIO, TX 78220	13-5562362	501 ( C ) 3	0.	90,137.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. BONAVENTURE 1918 PALO ALTO RD. SAN ANTONIO, TX 78211	13-5562362	501 ( C ) 3	0.	626,482.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GLORY LAND REVIVAL CENTER 1114 EAGLE CREEK DRIVE FLORESVILLE, TX 78114	74-6073540	501 ( C ) 3	0.	81,700.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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CHRIST COMMUNITY CHURCH PANTRY P.O. BOX 265 ADKINS, TX 78101	62-0535346	501 ( C ) 3	0.	109,320.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GOD'S CIRCLE 1925 RIGSBY SAN ANTONIO, TX 78210	80-0386640	501 ( C ) 3	0.	291,332.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LUTHERAN CHURCH OF THE RESURRECTION - 6011 GRISSOM RD - SAN ANTONIO, TX 78238	41-1568278	501 ( C ) 3	0.	177,989.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LOVING HAND ALL NATIONS CHURCH 1250 HOLBROOK RD. SAN ANTONIO, TX 78218	74-2245908	501 ( C ) 3	0.	33,170.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SA LOS TRES ANGELES SDA 106 SHERWOOD SAN ANTONIO, TX 78211	52-0643036	501 ( C ) 3	0.	305,482.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
INMAN CHRISTIAN CENTER 1214 COLIMA STREET SAN ANTONIO, TX 78207	35-0868116	501 ( C ) 3	0.	56,818.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FAMILY LIFE 14015 SAN PEDRO AVE SAN ANTONIO, TX 78232	35-2026909	501 ( C ) 3	0.	1,064,821.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
TEXAS HOPE FOUNDATION 14015 SAN PEDRO SAN ANTONIO, TX 78232	26-2569936	501 ( C ) 3	0.	202,946.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PROJECT NEW BEGINNINGS 15549 TOPPERWEIN SAN ANTONIO, TX 78233	51-0596039	501 ( C ) 3	0.	279,209.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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BAPTIST TEMPLE CHURCH 901 E. DREXEL SAN ANTONIO, TX 78210	75-6044885	501 ( C ) 3	0.	304,111.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. PHILIP OF JESUS 131 BANK SAN ANTONIO, TX 78204	13-5562362	501 ( C ) 3	0.	40,403.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
THE CHILDREN'S SHELTER PREVENTION SNACK PROGRAM - 2939 W. WOODLAWN - SAN ANTONIO, TX 78228	74-1109660	501 ( C ) 3	0.	1,376.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
THE CHILDREN'S SHELTER PREVENTION SERVICES - 2939 W. WOODLAWN - SAN ANTONIO, TX 78228	74-1109660	501 ( C ) 3	0.	14,008.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ALTA VISTA BAPTIST CHURCH 3738 MENCHACA SAN ANTONIO, TX 78228	75-6044885	501 ( C ) 3	0.	91,444.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
METROPOLITAN COMMUNITY CHURCH 611 E. MYRTLE SAN ANTONIO, TX 78212	23-7094543	501 ( C ) 3	0.	180,320.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SOMERSET UMC 8175 7TH STREET SOMERSET, TX 78069	31-1813333	501 ( C ) 3	0.	148,279.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COVENANT MINISTRIES 8426 CASCADE RIDGE SAN ANTONIO, TX 78239	80-0532151	501 ( C ) 3	0.	174,668.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SHELTERING A NATION 2929 RIGSBY AVENUE SAN ANTONIO, TX 78222	74-2736419	501 ( C ) 3	0.	5,986.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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RIVER CITY LIVING CHURCH: BEAT AIDS - 3443 RIVER PATH ST. - SAN ANTONIO, TX 78230	74-2346008	501 ( C ) 3	0.	130,206.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. FRANCIS EPISCOPAL CHURCH 4242 BLUEMEL SAN ANTONIO, TX 78240	31-1629166	501 ( C ) 3	0.	78,016.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BUTLER AME 3618 HOWARD SAN ANTONIO, TX 78212	33-1030112	501 ( C ) 3	0.	29,345.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
DEDICATED BAPTIST CHURCH 6787 JOE LOUIS DR. SAN ANTONIO, TX 78220	75-6044885	501 ( C ) 3	0.	84,209.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SANTA FE EPISCOPAL CHURCH 1108 BRUNSWICK SAN ANTONIO, TX 78211	31-1629166	501 ( C ) 3	0.	112,430.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BAPTIST BIBLE FELLOWSHIP 202 W. BYRD BLVD UNIVERSAL CITY, TX 78148	51-0180066	501 ( C ) 3	0.	57,443.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
INTERNATIONAL BIBLE COLLEGE 2369 BENRUS SAN ANTONIO, TX 78228	74-6059677	501 ( C ) 3	0.	92,388.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
JUBILEE OUTREACH, INC. 2931 S. WW WHITE ROAD SAN ANTONIO, TX 78222	74-2076703	501 ( C ) 3	0.	82,015.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ELMENDORF FIRST BAPTIST CHURCH P.O. BOX 25 ELMENDORF, TX 78112	75-6044885	501 ( C ) 3	0.	383,256.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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DREAM CENTER FOOD OUTREACH P.O. BOX 700203 SAN ANTONIO, TX 78270	26-3359028	501 ( C ) 3	0.	105,283.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FAITH COMMUNITY OF ALAMO HEIGHTS 6720 BROADWAY SAN ANTONIO, TX 78209	74-1246259	501 ( C ) 3	0.	110,993.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NEW CENTER OF FAITH CHURCH 6414 ROBIN FOREST SAN ANTONIO, TX 78239	83-0504502	501 ( C ) 3	0.	97,558.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
TRINITY BAPTIST CHURCH: BOUNTIFUL BLESSINGS - 319 E. MULBERRY - SAN ANTONIO, TX 78212	75-6044885	501 ( C ) 3	0.	77,198.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GET UP MINISTRIES 228 WINTER FROST CIBOLO, TX 78108	27-0707471	501 ( C ) 3	0.	335,980.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
TRUTH RESTORATION COMMUNITY DEVELOPMENT - P.O. BOX 681831 - SAN ANTONIO, TX 78268	06-1840346	501 ( C ) 3	0.	2,706.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
DURANGO SEVENTH DAY ADVENTIST CHURCH - PO BOX 7467 - SAN ANTONIO, TX 78207		501 ( C ) 3	0.	409,350.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EMPOWERMENT FELLOWSHIP 5545 WALZEM RD. SAN ANTONIO, TX 78218	75-6044885	501 ( C ) 3	0.	102,896.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CHAPEL HILL UMC 4114 SW LOOP 410 SAN ANTONIO, TX 78227	74-1492575	501 ( C ) 3	0.	176,926.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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KOREAN AMERICAN ASSOCIATION OF SAN ANTONIO - 4405 PARKWOOD - SAN ANTONIO, TX 78218	20-1916225	501 ( C ) 3	0.	11,629.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. MARK'S UMC P.O. BOX 28447 SAN ANTONIO, TX 78229	74-2886380	501 ( C ) 3	0.	184,711.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
IMPACT NOW 1141 N. LOOP 1604 #105423 SAN ANTONIO, TX 78232	05-0633658	501 ( C ) 3	0.	37,742.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ERNEST T. DIXON UMC 6060 HWY 87 EAST SAN ANTONIO, TX 78222	31-1813333	501 ( C ) 3	0.	225,951.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HEART FOR THE NEIGHBORHOOD 25700 OVERLOOK PARKWAY SAN ANTONIO, TX 78260	45-2744947	501 ( C ) 3	0.	24,974.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
WINDCREST UMC 8101 MIDCROWN DR SAN ANTONIO, TX 78239		501 ( C ) 3	0.	176,959.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CONVERSE FIRST BAPTIST CHURCH 9162 FM 78 CONVERSE, TX 78109	75-6044885	501 ( C ) 3	0.	37,780.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FAITH WORSHIP CENTER P.O. BOX 762106 SAN ANTONIO, TX 78245	26-0532227	501 ( C ) 3	0.	359,723.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
DOMINICAN MISSIONARIES FOR THE DEAF APOSTOLATE - 143 HONEYSUCKLE LANE - SAN ANTONIO, TX 78213	53-0196617	501 ( C ) 3	0.	62,525.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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BETHEL COMMUNITY MINISTRIES 8242 VICAR DR SAN ANTONIO, TX 78218	76-0728538	501 ( C ) 3	0.	11,770.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
OAK MANOR APARTMENTS 8610 NORTH NEW BRAUNFELS SAN ANTONIO, TX 78217	74-2685268	501 ( C ) 3	0.	34,774.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
THOMPSON CHAPEL CHURCH OF GOD IN CHRIST - 903 S. PALMETTO ST - SAN ANTONIO, TX 78210	74-2268977	501 ( C ) 3	0.	20,301.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MOBILE LOAVES AND FISHES - ST. FRANCIS OF ASSISI - 903 S CAPITAL OF TEXAS HWY - AUSTIN, TX 78746	74-2956081	501 ( C ) 3	0.	29,446.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: COMMUNITY ASSISTANCE PROGRAM PO BOX 831074 SAN ANTONIO, TX 78283	13-5562362	501 ( C ) 3	0.	3,507.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COOPERATIVE MINISTRIES IN HIGHER EDUCATION - 6720 BROADWAY - SAN ANTONIO, TX 78209	74-1694937	501 ( C ) 3	0.	95,477.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EMMANUEL A.M.E. CHURCH 1600 SEMLINGER RD SAN ANTONIO, TX 78220	53-0204696	501 ( C ) 3	0.	176,673.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ALDERSGATE UNITED METHODIST CHURCH 502 KAYTON SAN ANTONIO, TX 78210	31-1813333	501 ( C ) 3	0.	205,273.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ROY MAAS' YOUTH ALTERNATIVES - THE BRIDGE - 3103 WEST AVE - SAN ANTONIO, TX 78213		501 ( C ) 3	0.	4,685.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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ROY MAAS' YOUTH ALTERNATIVES - TURNING POINT - 2109 BABS DR - SAN ANTONIO, TX 78213		501 ( C ) 3	0.	4,558.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LAS PALMAS GARDENS - HCS 1215 CASTROVILLE RD SAN ANTONIO, TX 78237		501 ( C ) 3	0.	22,671.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MOBILE LOAVES AND FISHES - ST. MARK'S EVANGELIST - 1602 THOUSAND OAKS DR. - SAN ANTONIO, TX 78232		501 ( C ) 3	0.	40,189.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COKER UNITED METHODIST CHURCH 231 E. NORTH LOOP SAN ANTONIO, TX 78216	36-2899329	501 ( C ) 3	0.	169,804.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMMUNITIES IN SCHOOLS 1616 E. COMMERCE SAN ANTONIO, TX 78205	74-2393714	501 ( C ) 3	0.	257,137.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CRISIS CENTER OF COMAL COUNTY P.O. BOX 310344 NEW BRAUNFELS, TX 78131	74-2440649	501 ( C ) 3	0.	25,224.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMMUNITY RESOURCE AND RECREATION CENTER - P.O. BOX 1472 - CANYON LAKE, TX 78133	57-1148206	501 ( C ) 3	0.	480,339.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST. JUDE'S RANCH FOR CHILDREN 1400 RIDGE CREEK LANE BULVERDE, TX 78163	74-2270086	501 ( C ) 3	0.	7,221.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BULVERDE FOOD PANTRY P.O. BOX 343 BULVERDE, TX 78163	74-2786561	501 ( C ) 3	0.	163,111.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HABITAT FOR SAFE SENIORS 2174 OLD SATTLER ROAD CANYON LAKE, TX 78133	73-1697842	501 ( C ) 3	0.	920,030.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ELLIS COMMUNITY RESOURCES P.O. BOX 310906 NEW BRAUNFELS, TX 78131	74-2720271	501 ( C ) 3	0.	208,149.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MCKENNA 600 N. UNION NEW BRAUNFELS, TX 78130	26-2011830	501 ( C ) 3	0.	52,400.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SALVATION ARMY NEW BRAUNFELS 617 S BUS 35 NEW BRAUNFELS, TX 78130	13-3485289	501 ( C ) 3	0.	28,980.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SOS INC P.O. BOX 311032 NEW BRAUNFELS, TX 78131	74-2509324	501 ( C ) 3	0.	358,147.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FAMILY LIFE CENTER OF NEW BRAUNFELS - 5513 IH 35 SOUTH - NEW BRAUNFELS, TX 78132	26-3725345	501 ( C ) 3	0.	195,968.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HOPE CENTER 4476 HWY 281 N SUITE E SPRING BRANCH, TX 78070	36-2899329	501 ( C ) 3	0.	60,702.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SILO FOOD PANTRY 1895 S. WALNUT AVE. NEW BRAUNFELS, TX 78130	35-1148762	501 ( C ) 3	0.	112,196.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HARVEST FOOD PANTRY 2154 LOOP 337 N NEW BRAUNFELS, TX 78130	26-2221231	501 ( C ) 3	0.	53,824.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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SVDP: ST. JOSEPH AT HONEYCREEK 25781 STATE HWY 46 W SPRING BRANCH, TX 78070	53-0196617	501 ( C ) 3	0.	58,925.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BAVARIAN MANOR APARTMENTS 614 BAVARIAN DR. NEW BRAUNFELS, TX 78130	74-2699476	501 ( C ) 3	0.	25,482.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CONNECTIONS: ER SHELTER P.O. BOX 311268 NEW BRAUNFELS, TX 78131	74-2179169	501 ( C ) 3	0.	9,883.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CONNECTIONS: TLP P.O. BOX 311268 NEW BRAUNFELS, TX 78131	74-2179169	501 ( C ) 3	0.	11,670.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BRACKEN UMC 20377 FM 2252 SAN ANTONIO, TX 78266	36-1267731	501 ( C ) 3	0.	184,171.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CRANES MILL BAPTIST CHURCH 10215 FM 2673 CANYON LAKE, TX 78133	75-6044885	501 ( C ) 3	0.	6,032.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SPRING BRANCH BAPTIST CHURCH P.O. BOX 870 SPRING BRANCH, TX 78070	74-2902082	501 ( C ) 3	0.	53,125.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
WESTSIDE COMMUNITY CENTER 700 E COMMON STREET NEW BRAUNFELS, TX 78130	74-2797080	501 ( C ) 3	0.	420,562.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CCSCT		501 ( C ) 3	0.	831,919.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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SAN PABLO UMC 406 W. TRINITY PEARSALL, TX 78061	31-1813333	501 ( C ) 3	0.	45,544.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HAWTHORNE PK-8 ACADEMY 115 W. JOSEPHINE ST SAN ANTONIO, TX 78212		501 ( C ) 3	0.	60,435.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
TWAIN MIDDLE SCHOOL 2411 SAN PEDRO AVE SAN ANTONIO, TX 78212		501 ( C ) 3	0.	115,018.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
KIPP ASPIRE ACADEMY 1401 WEST AVE NO 3. SAN ANTONIO, TX 78213		501 ( C ) 3	0.	59,727.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
JT BRACKENRIDGE ACADEMY 1214 GUADALUPE SAN ANTONIO, TX 78207		501 ( C ) 3	0.	56,019.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
KIPP CAMINO ACADEMY 735 FREDRICKSBURG RD SAN ANTONIO, TX 78201		501 ( C ) 3	0.	58,468.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LOMA PARK ELEMENTARY 400 AURORA DR SAN ANTONIO, TX 78228		501 ( C ) 3	0.	54,922.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GUS GARCIA MIDDLE SCHOOL 3306 RUIZ ST SAN ANTONIO, TX 78228		501 ( C ) 3	0.	62,005.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ANSON JONES MIDDLE SCHOOL 1256 PINN RD SAN ANTONIO, TX 78227		501 ( C ) 3	0.	41,849.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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PALO ALTO ELEMENTARY 1725 PALO ALTO RD SAN ANTONIO, TX 78211		501 ( C ) 3	0.	64,524.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SW ELEMENTARY SCHOOL 11914 DRAGON LANE SAN ANTONIO, TX 78252		501 ( C ) 3	0.	53,574.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
KIPP: MUNDO 103 TULETA DRIVE SAN ANTONIO, TX 78212		501 ( C ) 3	0.	67,595.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
OUR LADY OF GUADALUPE SEGUIN 409 W. KREZDORN SEGUIN, TX 78155	53-0196617	501 ( C ) 3	0.	209,408.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GOOD SHEPHERD CATHOLIC CHURCH P.O. BOX 929 SCHERTZ, TX 78154	53-0196617	501 ( C ) 3	0.	267,202.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
IMMACULATE CONCEPTION P.O. BOX 929 SCHERTZ, TX 78154	53-0196617	501 ( C ) 3	0.	135,662.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CHRISTIAN CUPBOARD P.O. BOX 1895 SEGUIN, TX 78155	74-8618849	501 ( C ) 3	0.	261,941.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EVERYDAY CHRISTIAN FELLOWSHIP 950 N.MAIN CIBOLO, TX 78108	75-6044885	501 ( C ) 3	0.	6,428.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FIRST UNITED METHODIST CHURCH OF SEGUIN - 710 N. AUSTIN - SEGUIN, TX 78155	741266224	501 ( C ) 3	0.	55,000.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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THE STOREHOUSE AT KENNEDY FA PO BOX 187 KENNEDY, TX 78119	44-0577787	501 ( C ) 3	0.	184,924.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SACRED HEART CATHOLIC CHURCH P.O. BOX 599 COMFORT, TX 78013	53-0196617	501 ( C ) 3	0.	5,943.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HILL COUNTRY FAMILY SERVICES 118 W. ADVOGT BOERNE, TX 78006	74-2425029	501 ( C ) 3	0.	144,707.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HILL COUNTRY DAILY BREAD 234 W. BANDERA RD. BOERNE, TX 78006	30-0148195	501 ( C ) 3	0.	357,158.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
IMMANUEL LUTHERAN CHURCH P.O. BOX 427 COMFORT, TX 78013	84-1179795	501 ( C ) 3	0.	37,793.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
WILDLIFE RESCUE AND REHABILITATION P.O. BOX 369 KENDALIA, TX 78027	74-2012897	501 ( C ) 3	0.	19,137.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SALVATION ARMY KERRVILLE P.O. BOX 290790 KERRVILLE, TX 78029	58-0660607	501 ( C ) 3	0.	106,173.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CAM KERRVILLE P.O. BOX 291352 KERRVILLE, TX 78028	74-2468109	501 ( C ) 3	0.	713,435.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: KERR COUNTY 1145 BROADWAY KERRVILLE, TX 78028	13-5562362	501 ( C ) 3	0.	397,685.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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UNITED CHRISTIAN CHURCH AND MINISTRIES - 108 MORGAN - INGRAM, TX 78025	62-0649235	501 ( C ) 3	0.	65,415.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
JUNCTION HOUSE PO BOX 293006 KERRVILLE, TX 78028	30-0175833	501 ( C ) 3	0.	2,829.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
K'STAR INC P.O. BOX 290962 KERRVILLE, TX 78029-0962	74-2659161	501 ( C ) 3	0.	11,152.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
A CHILD'S PLACE LEARNING CTR. 551 MEADOWVIEW KERRVILLE, TX 78028	31-1772736	501 ( C ) 3	0.	30,590.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ZION LUTHERAN CHILDRENS CENTER 600 BARNETT KERRVILLE, TX 78028	41-1991463	501 ( C ) 3	0.	11,226.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PATHWAYS 3-H YOUTH RANCH 222 SIDNEY BAKER ST SOUTH KERRVILLE, TX 78028	74-2631080	501 ( C ) 3	0.	20,766.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HAPPY JACK'S LEARNING CENTER 3325 JUNCTION HWY INGRAM, TX 78025	26-3985113	501 ( C ) 3	0.	25,502.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FIRST UMC KERRVILLE 321 THOMPSON DR. KERRVILLE, TX 78028	36-2899329	501 ( C ) 3	0.	106,845.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ENCINAL FOOD PANTRY P.O. BOX 120 ENCINAL, TX 78019	74-1508183	501 ( C ) 3	0.	95,377.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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MEDINA COUNTY FOOD PANTRY 502 ARNOLD HONDO, TX 78861	74-2592212	501 ( C ) 3	0.	78,559.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ANGELS' CROSSING 305 CR 473 CASTROVILLE, TX 78009	74-2865799	501 ( C ) 3	0.	22,132.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
RESURRECTION BAPTIST CHURCH P.O. BOX 1763 LYTLE, TX 78052	75-6044885	501 ( C ) 3	0.	52,876.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. JOHN BOSCO PO BOX 326 LYTLE, TX 78052	13-5562362	501 ( C ) 3	0.	283,437.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NEW LIFE HOUSING TUSCANY 8453 LYNDON LANE AUSTIN, TX 78729	81-0622081	501 ( C ) 3	0.	573.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: ST. JOHN'S CATHOLIC CHURCH HONDO - 2102 AVENUE J - HONDO, TX 78861	13-5562362	501 ( C ) 3	0.	69,440.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
YANCEY IMMACULATE HEART OF MARY 142 CR 743 YANCEY, TX 78886	53-0196617	501 ( C ) 3	0.	515,997.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PAWS RANCH RESCUE 865 S. LOOP 1604 E SAN ANTONIO, TX 78264	27-3058537	501 ( C ) 3	0.	791.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NUECES CANYON FOOD PANTRY 813 SOUTH NUECES CAMP WOOD, TX 78833		501 ( C ) 3	0.	331,491.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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LEAKEY HELPING HANDS PO BOX 822 LEAKEY, TX 78873	74-0842185	501 ( C ) 3	0.	390,887.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ACADEMY OF AMERICA DBA BEXAR COUNTY ACADEMY - 1485 HILLCREST DR. - SAN ANTONIO, TX 78228		501 ( C ) 3	0.	3,947.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ACADEMY OF CAREERS AND TECHNOLOGY ISDC - PO BOX 681866 - SAN ANTONIO, TX 78268		501 ( C ) 3	0.	25,229.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ALAMO HEIGHTS ISD HIGH SCHOOL 7101 BROADWAY SAN ANTONIO, TX 78209		501 ( C ) 3	0.	12,866.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST GREGORY THE GREAT CATHOLIC CHURCH - 700 DEWHURST - SAN ANTONIO, TX 78213		501 ( C ) 3	0.	15,093.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST JAMES THE APOSTLE CATHOLIC CHURCH - P.O. BOX 28187 - SAN ANTONIO, TX 78225		501 ( C ) 3	0.	14,104.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST JOHN BERCHMAN SCHOOL P.O. BOX 28187 SAN ANTONIO, TX 78225		501 ( C ) 3	0.	17,730.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAGLE PASS ISD 1420 EDISON RD EAGLE PASS, TX 78852		501 ( C ) 3	0.	650,304.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NATALIA ISD PO BOX 548 NATALIA, TX 78059		501 ( C ) 3	0.	35,711.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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SOUTHWEST ISD 11914 DRAGON LANE BLDG 600 SAN ANTONIO, TX 78252		501 ( C ) 3	0.	505,754.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
POTEET ISD ELEMENTARY PO BOX 138 POTEET, TX 78065		501 ( C ) 3	0.	49,541.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
JOURDANTON ISD 200 ZANDERSON AVE JOURDANTON, TX 78026		501 ( C ) 3	0.	28,899.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CARRIZO SPRINGS CISD ELEMENTARY SCHOOL - 300 NORTH 7TH STREET - CARRIZO SPRINGS, TX 78834		501 ( C ) 3	0.	15,673.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CARRIZO SPRINGS CISD HIGH SCHOOL 300 NORTH 7TH STREET CARRIZO SPRINGS, TX 78834		501 ( C ) 3	0.	12,764.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
JUDSON ISD 210 SCHOOL ST CONVERSE, TX 78109		501 ( C ) 3	0.	387,688.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
TYC-AYRES HOUSE 17259 NACOGDOCHES RD SAN ANTONIO, TX 78266		501 ( C ) 3	0.	2,296.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
THE CHILDRENS SHELTER 2939 WOODLAWN AVE SAN ANTONIO, TX 78228		501 ( C ) 3	0.	13,323.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
TOP MINISTRIES-SUNNY BROOK CHRISTIAN ACADEMY - 1620 PINN ROAD - SAN ANTONIO, TX 78227		501 ( C ) 3	0.	4,513.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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ST MATTHEW CATHOLIC SCHOOL 10703 WURZBACH ROAD SAN ANTONIO, TX 78230		501 ( C ) 3	0.	17,694.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST PAULS CATHOLIC SCHOOL-SAN ANTONIO - P.O. BOX 28187 - SAN ANTONIO, TX 78225		501 ( C ) 3	0.	10,463.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST PETERS ST JOSEPHS CHILDRENS HOME - 919 MISSION RD - SAN ANTONIO, TX 78210		501 ( C ) 3	0.	8,732.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST LEOS SCHOOL P.O. BOX 28187 SAN ANTONIO, TX 78225		501 ( C ) 3	0.	13,431.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST LUKES CATHOLIC SCHOOL 4603 MANITOU SAN ANTONIO, TX 78228		501 ( C ) 3	0.	20,790.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST MARGARET MARYS CHURCH P.O. BOX 28187 SAN ANTONIO, TX 78225		501 ( C ) 3	0.	6,531.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SOMERSET ISD HIGH SCHOOL PO BOX 279 SOMERSET, TX 78069		501 ( C ) 3	0.	34,546.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SOMERSET ISD JR. HIGH SCHOOL PO BOX 279 SOMERSET, TX 78069		501 ( C ) 3	0.	30,356.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SOMERSET ISD SAVANNAH HEIGHTS INTERMEDIATE - PO BOX 279 - SOMERSET, TX 78069		501 ( C ) 3	0.	32,456.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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SOMERSET ISD BARRERA VETERANS ELEMENTARY - PO BOX 279 - SOMERSET, TX 78069		501 ( C ) 3	0.	33,740.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SOMERSET ISD SOMERSET ELEMENTARY PO BOX 279 SOMERSET, TX 78069		501 ( C ) 3	0.	34,228.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SOMERSET ISD SOMERSET EARLY CHILDHOOD - PO BOX 279 - SOMERSET, TX 78069		501 ( C ) 3	0.	24,971.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SOUTH SAN ANTONIO ISD 5622 RAY ELLISON BLVD SAN ANTONIO, TX 78242		501 ( C ) 3	0.	415,346.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SOUTHSIDE ISD FOOD SERVICE WAREHOUSE - 1460 MARTINEZ LOYSOYA RD - SAN ANTONIO, TX 78221		501 ( C ) 3	0.	101,805.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SAN ANTONIO CAN ACADEMY CHARTER SCHOOLS ISDC - 325 W 12TH STREET - DALLAS, TX 75208		501 ( C ) 3	0.	6,304.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SHEKINAH RADIANCE ACADEMY 944 SUNBELT DR SAN ANTONIO, TX 78218		501 ( C ) 3	0.	9,379.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
RADIANCE ACADEMY OF LEARNING-SHEKINAH - 8308 FREDERICKSBURG RD - SAN ANTONIO, TX 78229		501 ( C ) 3	0.	7,164.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SCHOOL OF EXCELLENCE IN EDUCATION ISDC - 1826 BASSE RD - SAN ANTONIO, TX 78213		501 ( C ) 3	0.	67,133.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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ROY MAAS YOUTH ALTERNATIVES 3103 WEST AVE SAN ANTONIO, TX 78213		501 ( C ) 3	0.	10,055.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
RANDOLPH FIELD ISD PO BOX 2217 UNIVERSAL CITY, TX 78148		501 ( C ) 3	0.	18,008.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
OUR LADY OF PERPETUAL HELP - SELMA 16075 N EVANS RD SELMA, TX 78154		501 ( C ) 3	0.	4,131.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LITTLE FLOWER SCHOOL 905 KENTUCKY SAN ANTONIO, TX 78201		501 ( C ) 3	0.	15,685.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
DIOCESE OF CORPUS CHRISTI-ST JOSEPH CATHOLIC SCHOO - 311 DEWEY ST - ALICE, TX 78332		501 ( C ) 3	0.	7,221.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD TIMBERWOOD PARK ELEM 1404 IH 35 EAST NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	18,026.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD CANYON MIDDLE 1404 IH 35 EAST NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	37,063.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD CHURCH HILL MIDDLE 1404 IH 35 EAST NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	35,597.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD MOUNTAIN VALLEY MIDDLE 1404 IH 35 NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	32,044.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMAL ISD SMITHSON VALLEY MIDDLE 1404 IH 35 EAST NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	33,371.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD SPRING BRANCH MIDDLE 1404 IH 35 EAST NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	29,572.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD CANYON HIGH 1404 IH 35 EAST NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	41,385.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD CANYON LAKE HIGH SCHOOL 1404 IH 35 EAST NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	37,321.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD SMITHSON VALLEY HS 1404 IH 35 EAST NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	38,470.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NEW BRAUNFELS ISD 566 BUTCHER STREET NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	66,316.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST JUDES RANCH FOR CHILDREN 1400 RIDGE CREEK LANE BULVERDE, TX 78163		501 ( C ) 3	0.	3,225.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST JUDES RANCH 652 OLD BEAR CREEK RD NEW BRAUNFELS, TX 78132		501 ( C ) 3	0.	1,875.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ALICE ISD STADIUM STORAGE 2 COYOTE TRAIL ALICE, TX 78332		501 ( C ) 3	0.	213,368.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)



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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEN BOLT PALITO BLANCO PO BOX 547 BEN BOLT, TX 78342		501 ( C ) 3	0.	25,028.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LA GLORIA ISD 182 E CO RD 401 FALFURRIAS, TX 78355		501 ( C ) 3	0.	7,069.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ORANGE GROVE ISD PO BOX 534 ORANGE GROVE, TX 78372		501 ( C ) 3	0.	50,441.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PREMONT ISD PO BOX 530 PREMONT, TX 78375		501 ( C ) 3	0.	23,980.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SCHERTZ CIBOLO UNIVERSAL CITY ISD 1060 ELBEL SCHERTZ, TX 78154		501 ( C ) 3	0.	388,414.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SEGUIN ISD WAREHOUSE 1105 NORTH KING STREET SEGUIN, TX 78155		501 ( C ) 3	0.	292,971.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SEGUIN ISD HIGH SCHOOL 1105 NORTH KING STREET SEGUIN, TX 78155		501 ( C ) 3	0.	32,164.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SEGUIN ISD JIM BARNES 1105 NORTH KING STREET SEGUIN, TX 78155		501 ( C ) 3	0.	18,146.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SEGUIN ISD MCQUEENEY ELEMENTARY 1105 NORTH KING STREET SEGUIN, TX 78155		501 ( C ) 3	0.	15,119.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

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SEGUIN ISD AJB MIDDLE SCHOOL 1105 NORTH KING STREET SEGUIN, TX 78155		501 ( C ) 3	0.	7,393.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SEGUIN ISD KOENNECKE ELME 1441 JOE CARRILLO ST. SEGUIN, TX 78155		501 ( C ) 3	0.	4,283.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SEGUIN ISD WEINERT ELEMENTARY 1111 N BRUNS SEGUIN, TX 78155		501 ( C ) 3	0.	2,752.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MARION ISD SECONDARY CAFETERIA PO BOX 189 MARION, TX 78124		501 ( C ) 3	0.	20,683.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NAVARRO ISD 6450 N STATE HWY 123 SEGUIN, TX 78155		501 ( C ) 3	0.	56,789.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ATASCOSA COUNTY JUVENILE JUSTICE CENTER - 1511 ZANDERSON AVE - JOURDANTON, TX 78026		501 ( C ) 3	0.	2,067.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CHARLOTTE ISD PO BOX 489 CHARLOTTE, TX 78011		501 ( C ) 3	0.	2,989.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LYTLE ISD PRIMARY PO BOX 745 LYTLE, TX 78052		501 ( C ) 3	0.	13,978.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LYTLE ISD ELEMENTARY PO BOX 745 LYTLE, TX 78052		501 ( C ) 3	0.	17,031.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LYTLE ISD HIGH SCHOOL PO BOX 745 LYTLE, TX 78052		501 ( C ) 3	0.	21,708.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PLEASANTON ELEMENTARY 831 STADIUM DR PLEASANTON, TX 78064		501 ( C ) 3	0.	27,066.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PLEASANTON ISD INTERMEDIATE 831 STADIUM DR PLEASANTON, TX 78064		501 ( C ) 3	0.	157,566.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
POTEET ISD HIGH SCHOOL PO BOX 138 POTEET, TX 78065		501 ( C ) 3	0.	39,433.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BANDERA ISD HIGH SCHOOL PO BOX 727 BANDERA, TX 78003		501 ( C ) 3	0.	18,941.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BANDERA ISD MIDDLE SCHOOL PO BOX 727 BANDERA, TX 78003		501 ( C ) 3	0.	17,731.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BANDERA ISD ALKEK ELEMENTARY PO BOX 727 BANDERA, TX 78003		501 ( C ) 3	0.	15,919.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BANDERA ISD HILL COUNTRY ELEMENTARY - PO BOX 727 - BANDERA, TX 78003		501 ( C ) 3	0.	14,881.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MEDINA ISD PO BOX 1470 MEDINA, TX 78055		501 ( C ) 3	0.	12,709.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

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BENAVIDES ISD PO DRAWER P BENAVIDES, TX 78341		501 ( C ) 3	0.	15,122.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
DUVAL COUNTY RICARDO H GARCIA REGIONAL DETENTION - PO BOX 989 - SAN DIEGO, TX 78384		501 ( C ) 3	0.	1,890.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FREER ISD PO BOX 240 FREER, TX 78357		501 ( C ) 3	0.	31,911.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
RAMIREZ COMMON SCHOOL DISTRICT 10492 SCHOOL STREET REALITOS, TX 78376		501 ( C ) 3	0.	3,220.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
POTH ISD PO BOX 250 POTH, TX 78147		501 ( C ) 3	0.	26,259.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
UTOPIA ISD PO BOX 880 UTOPIA, TX 78884		501 ( C ) 3	0.	9,790.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
UVALDE CISD 1000 N GETTY STREET UVALDE, TX 78801		501 ( C ) 3	0.	165,120.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SABINAL ISD PO BOX 338 SABINAL, TX 78881		501 ( C ) 3	0.	12,339.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
KNIPPA ISD PO BOX 99 KNIPPA, TX 78870		501 ( C ) 3	0.	18,837.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

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MCMULLEN COUNTY ISD PO BOX 359 TILDEN, TX 78072		501 ( C ) 3	0.	13,574.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SAN DIEGO ISD 609 LABBE AVE SAN DIEGO, TX 78384		501 ( C ) 3	0.	50,112.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LEAKEY ISD PO BOX 1129 LEAKEY, TX 78873		501 ( C ) 3	0.	2,410.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BOERNE ISD HIGH SCHOOL 123 WEST JOHNS ROAD BOERNE, TX 78006		501 ( C ) 3	0.	3,270.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BOERNE ISD SAMUEL V CHAMPION HS 123 WEST JOHNS RD BOERNE, TX 78006		501 ( C ) 3	0.	3,206.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BOERNE ISD BOERNE MIDDLE SCHOOL 123 WEST JOHNS ROAD BOERNE, TX 78006		501 ( C ) 3	0.	39,211.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BOERNE ISD MIDDLE SCHOOL SOUTH 123 WEST JOHNS BOERNE, TX 78006		501 ( C ) 3	0.	20,435.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BOERNE ISD CURINGTON ELEMENTARY 123 WEST JOHNS ROAD BOERNE, TX 78006		501 ( C ) 3	0.	13,129.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BOERNE ISD KENDALL ELEMENTARY 123 WEST JOHNS RD BOERNE, TX 78006		501 ( C ) 3	0.	7,508.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

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BOERNE ISD CIBOLO CREEK ELEMENTARY 123 WEST JOHNS RD BOERNE, TX 78006		501 ( C ) 3	0.	5,740.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMFORT ISD MIDDLE SCHOOL PO BOX 398 COMFORT, TX 78013		501 ( C ) 3	0.	16,732.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CENTER POINT ISD PO BOX 377 CENTER POINT, TX 78010		501 ( C ) 3	0.	16,897.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HUNT ISD PO BOX 259 HUNT, TX 78024		501 ( C ) 3	0.	9,039.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
INGRAM ISD 510 COLLEGE ST INGRAM, TX 78025		501 ( C ) 3	0.	47,536.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PATHWAYS YOUTH AND FAMILY SERVICE INC - 222 SIDNEY BAKER ST SOUTH - KERRVILLE, TX 78028		501 ( C ) 3	0.	7,109.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
KERRVILLE ISD 1313 STADIUM DR KERRVILLE, TX 78028		501 ( C ) 3	0.	13,409.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COTULLA ISD 310 N MAIN STREET COTULLA, TX 78014		501 ( C ) 3	0.	49,777.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CRYSTAL CITY ISD 805 E CROCKETT CRYSTAL CITY, TX 78839		501 ( C ) 3	0.	67,209.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

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LA PRYOR ISD PO BOX 519 LA PRYOR, TX 78872		501 ( C ) 3	0.	28,070.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
D'HANIS ISD PO BOX 307 D'HANIS, TX 78850		501 ( C ) 3	0.	11,775.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
DEVINE ISD HIGH SCHOOL 205 W. COLLEGE DEVINE, TX 78016		501 ( C ) 3	0.	15,941.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
DEVINE ISD INTERMEDIATE 900 ATKINS AVE DEVINE, TX 78016		501 ( C ) 3	0.	32,389.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HONDO ISD HIGH SCHOOL PO BOX 308 HONDO, TX 78861		501 ( C ) 3	0.	1,477.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HONDO ISD MCDOWELL MIDDLE SCHOOL PO BOX 308 HONDO, TX 78861		501 ( C ) 3	0.	1,483.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HONDO ISD WOOLLS INTERMEDIATE PO BOX 308 HONDO, TX 78861		501 ( C ) 3	0.	2,712.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HONDO ISD MEYER ELEMENTARY SCHOOL PO BOX 308 HONDO, TX 78861		501 ( C ) 3	0.	2,374.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
MEDINA VALLEY ISD 8365 FM 471 SOUTH CASTROVILLE, TX 78009		501 ( C ) 3	0.	155,722.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

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DILLEY ISD 245 HWY 117 DILLEY, TX 78017		501 ( C ) 3	0.	55,430.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
PEARSALL ISD HIGH SCHOOL 318 BERRY RANCH ROAD PEARSALL, TX 78061		501 ( C ) 3	0.	82,218.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FALLS CITY ISD PO BOX 399 FALLS CITY, TX 78113		501 ( C ) 3	0.	10,769.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
KARNES CITY ISD 314 N HWY 123 KARNES CITY, TX 78118		501 ( C ) 3	0.	25,910.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
KENEDY ISD 401 HWY 719 KENEDY, TX 78119		501 ( C ) 3	0.	47,682.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
RUNGE ISD PO BOX 158 RUNGE, TX 78520		501 ( C ) 3	0.	17,888.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
NEW FRONTIERS CHARTER SCHOOL ISDC 4018 S PRESA SAN ANTONIO, TX 78223		501 ( C ) 3	0.	18,519.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LA VERNIA ISD 13600 HWY 87 W LA VERNIA, TX 78121		501 ( C ) 3	0.	31,005.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LA VERNIA ISD INTERMEDIATE SCHOOL 369 FM 1346 S LA VERNIA, TX 78121		501 ( C ) 3	0.	19,739.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)



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

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POR VIDA ACADEMY CHARTER HIGH SCHOOL ISDC - 1135 MISSION RD - SAN ANTONIO, TX 78210		501 ( C ) 3	0.	6,975.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
JOHN H WOOD JR PUBLIC CHARTER DISTRICT - 10325 BANDERA RD - SAN ANTONIO, TX 78250		501 ( C ) 3	0.	33,502.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LACKLAND ISD 2460 KENLY AVE BLDG 8265 SAN ANTONIO, TX 78236		501 ( C ) 3	0.	9,011.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HEALY MURPHY CENTER INC 618 LIVE OAK SAN ANTONIO, TX 78202		501 ( C ) 3	0.	440.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FORT SAM HOUSTON ISD ELEMENTARY 4005 WINANS RD SAN ANTONIO, TX 78234		501 ( C ) 3	0.	34,199.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FORT SAM HOUSTON ISD COLE HIGH SCHOOL - 4005 WINANS RD - SAN ANTONIO, TX 78234		501 ( C ) 3	0.	28,356.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
JUBILEE ACADEMIC CENTER ISDC 4434 ROLAND AVE SAN ANTONIO, TX 78222		501 ( C ) 3	0.	68,967.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
GEORGE GERVIN ACADEMY ISDC 6903 SUNBELT DRIVE SAN ANTONIO, TX 78218		501 ( C ) 3	0.	32,962.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HIGGS CARTER KING GIFTED AND TALENTED ACADEMY - 511 FREDERICKSBURG RD - SAN ANTONIO, TX 78201		501 ( C ) 3	0.	22,331.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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HOLY NAME CATHOLIC SCHOOL P.O. BOX 28187 SAN ANTONIO, TX 78225		501 ( C ) 3	0.	14,938.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EDGEWOOD ISD - SAN ANTONIO 131 GUTHRIE SAN ANTONIO, TX 78237		501 ( C ) 3	0.	262,916.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
HARLANDALE ISD 632 W. VESTAL SAN ANTONIO, TX 78221		501 ( C ) 3	0.	840,205.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAST CENTRAL ISD HIGH SCHOOL 7173 FM 1628 SAN ANTONIO, TX 78263		501 ( C ) 3	0.	111,048.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAST CENTRAL ISD HERITAGE MIDDLE SCHOOL - 80004 NEW SULPHUR SPRINGS RD - SAN ANTONIO, TX 78263		501 ( C ) 3	0.	68,836.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAST CENTRAL ISD LEGACY MIDDLE SCHOOL - 59023 SE LOOP 410 - SAN ANTONIO, TX 78220		501 ( C ) 3	0.	73,040.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAST CENTRAL ISD OAK CREST INTERMEDIATE - 7806 SULPHUR SPRINGS RD - SAN ANTONIO, TX 78263		501 ( C ) 3	0.	28,542.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAST CENTRAL ISD SALADO INTERMEDIATE - 3602 SOUTH WW WHITE - SAN ANTONIO, TX 78222		501 ( C ) 3	0.	17,243.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAST CENTRAL ISD HARMONY ELEMENTARY - 10625 GRENN LAKE - SAN ANTONIO, TX 78223		501 ( C ) 3	0.	10,910.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

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

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EAST CENTRAL ISD HIGHLAND FOREST ELEMENTARY - 3736 SE MILITARY DR - SAN ANTONIO, TX 78223		501 ( C ) 3	0.	18,954.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAST CENTRAL ISD JOHN GLENN ELEMENTARY - 7824 FM 1628 - SAN ANTONIO, TX 78263		501 ( C ) 3	0.	12,639.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAST CENTRAL ISD PECAN VALLEY ELEMENTARY - 3966 E SOUTHCROSS - SAN ANTONIO, TX 78222		501 ( C ) 3	0.	15,244.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAST CENTRAL ISD SINCLAIR ELEMENTARY - 6126 SINCLAIR - SAN ANTONIO, TX 78222		501 ( C ) 3	0.	5,490.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
EAST CENTRAL ISD DEVELOPMENT 12271 DONOP RD SAN ANTONIO, TX 78223		501 ( C ) 3	0.	15,767.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CLARITY CHILD GUIDANCE CENTER 8535 TOM SLICK DRIVE SAN ANTONIO, TX 78229		501 ( C ) 3	0.	5,339.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BEXAR COUNTY JUVENILE PROBATION DEPARTMENT - 301 E MITCHELL - SAN ANTONIO, TX 78210		501 ( C ) 3	0.	53,889.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BROOKS ACADEMY OF SCIENCE AND ENGINEERING - 3803 LYSTER RD - SAN ANTONIO, TX 78235		501 ( C ) 3	0.	42,028.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
BOYSVILLE INC 8555 E LOOP 1604 N CONVERSE, TX 78109		501 ( C ) 3	0.	399.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMAL ISD ARLON SEAY ELEMENTARY 20911 HWY 46 W SPRING BRANCH, TX 78070		501 ( C ) 3	0.	20,117.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD BILL BROWN ELEMENTARY 20410 HWY 46 W NEW BRAUNFELS, TX 78132		501 ( C ) 3	0.	20,506.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD CLEAR SPRINGS ELEMENTARY 550 AVERY PARKWAY NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	18,507.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD FREHEIT ELEMENTARY 2002 FM 1101 NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	21,920.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD GARDEN RIDGE ELEMENTARY 9401 MUNICIPAL PARKWAY SAN ANTONIO, TX 78266		501 ( C ) 3	0.	21,380.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD GOODWIN FRAZIER ELEMENTARY - 1441 N BUSINNESS 35 - NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	19,711.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD HOFFMAN LANE ELEMENTARY 4600 FM 306 NEW BRAUNFELS, TX 78132		501 ( C ) 3	0.	17,489.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD JOHNSON RANCH ELEMENTARY 30501 JOHNSON WAY BULVERDE, TX 78163		501 ( C ) 3	0.	14,943.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD MORNINGSIDE ELEMENTARY 3855 MORNINGSIDE DR NEW BRAUNFELS, TX 78132		501 ( C ) 3	0.	21,552.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMAL ISD OAK CREEK ELEMENTARY 3060 GOODWIN LN NEW BRAUNFELS, TX 78130		501 ( C ) 3	0.	19,880.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD RAHE BULVERDE ELEMENTARY 1715 E AMMANN RD BULVERDE, TX 78163		501 ( C ) 3	0.	19,106.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD REBECCA CREEK ELEMENTARY 125 QUEST AVE SPRING BRANCH, TX 78070		501 ( C ) 3	0.	20,833.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD SPECHT ELEMENTARY 25815 OVERLOOK PARKWAY SAN ANTONIO, TX 78260		501 ( C ) 3	0.	18,641.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD STARTZVILLE ELEMENTARY 42111 FM 3159 CANYON LAKE, TX 78133		501 ( C ) 3	0.	17,479.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD KINDER RANCH ELEMENTARY 2035 KINDER RANCH PARKWAY SAN ANTONIO, TX 78260		501 ( C ) 3	0.	23,464.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
COMAL ISD INDIAN SPRINGS ELEMENTARY - 25751 WILDERNESS OAK - SAN ANTONIO, TX 78261		501 ( C ) 3	0.	22,357.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
ST GERARD CATHOLIC HIGH SCHOOL P.O. BOX 28187 SAN ANTONIO, TX 78225		501 ( C ) 3	0.	5,870.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LUTHERAN SOCIAL SERVICES - NEW LIFE CHILDRENS RTC - 650 SCARBOUROUGH - CANYON LAKE, TX 78133		501 ( C ) 3	0.	13,074.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAPTIST CHILD AND FAMILY SERVICES 1506 BEXAR CROSSING SAN ANTONIO, TX 78232		501 ( C ) 3	0.	35,817.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SCHOOL COMMODITIES GENERAL ACCOUNT 5200 OLD HWY 90 W SAN ANTONIO, TX 78227		501 ( C ) 3	0.	6,448.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
UVALDE FOOD PANTRY 343 N. GETTY UVALDE, TX 78801	11-1646315	501 ( C ) 3	0.	562,251.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FIRST PRESBYTERIAN CHURCH PO BOX 1608 UVALDE, TX 78801	23-6393377	501 ( C ) 3	0.	18,949.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
UTOPIA FOOD PANTRY 2080 FOSTER RANCH ROAD UTOPIA, TX 78884	74-2122979	501 ( C ) 3	0.	22,437.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SABINAL HELPING HANDS P.O. BOX 322 SABINAL, TX 78881	90-0511715	501 ( C ) 3	0.	74,087.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LA VERNIA CHRISTIAN FOOD PANTRY PO BOX 155 LA VERNIA, TX 78121		501 ( C ) 3	0.	46,237.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
SVDP: SACRED HEART CATHOLIC CHURCH OF FLORESVILLE - 1009 TRAIL STREET - FLORESVILLE, TX 78114	13-5562362	501 ( C ) 3	0.	127,368.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FIRST BAPTIST CHURCH SUTHERLAND SPRINGS - P.O. BOX 115 - SUTHERLAND SPRINGS, TX 78161	75-2599207	501 ( C ) 3	0.	37,551.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD PANTRY POTH AREA P.O. BOX 888 POTH, TX 78147	74-3066871	501 ( C ) 3	0.	469,962.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
FIRST BAPTIST CHURCH OF STOCKDALE P.O. BOX 95 STOCKDALE, TX 78160	75-6044885	501 ( C ) 3	0.	27,572.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
RIVER OF LIFE CHRISTIAN FELLOW P.O. BOX 278 ADKINS, TX 78101	74-3073802	501 ( C ) 3	0.	59,325.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CHRIST UMC PO BOX 247 STOCKDALE, TX 78160	36-2899329	501 ( C ) 3	0.	90,845.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CRISTO FUENTE DE AGUA VIVA 1311 E. CROCKET ST. CRYSTAL CITY, TX 78839	74-2705875	501 ( C ) 3	0.	95,799.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LAS SENDAS RURAL HC LA PRYOR 2209 N. HWY 83 CRYSTAL CITY, TX 78839	16-1766231	501 ( C ) 3	0.	183,572.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LAS SENDAS RURAL HC CRYSTAL CITY 2209 N. HWY 83 CRYSTAL CITY, TX 78839	16-1766231	501 ( C ) 3	0.	299,063.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
LAS SENDAS RURAL HC BATESVILLE 2209 N. HWY 83 CRYSTAL CITY, TX 78839	16-1766231	501 ( C ) 3	0.	199,188.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM
CRYSTAL CITY FIRST UNITED METHODIST CHURCH - P.O. BOX 328 - CRYSTAL CITY, TX 78839	74-2603771	501 ( C ) 3	0.	58,566.	FMV	FOOD	FOOD DISTRIBUTION PROGRAM

Schedule I (Form 990)

<b>Part II</b>	<b>Continuation of Grants and Other Assistance to Governments and Organizations in the United States</b> (Schedule I (Form 990), Part II.)
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[illegible]



**Part III**

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to 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 non-cash assistance
FOOD ASSISTANCE	604517	0.	33,189,170.	FMV	FOOD ITEMS

**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**

**EXPLANATION: SAN ANTONIO FOOD BANK INC PROVIDES FOOD AND GROCERY**

**PRODUCTS TO MORE THAN 500 PARTNER AGENCIES IN 16 COUNTIES THROUGHOUT**

**SOUTHWEST TEXAS. AGENCY STAFF PERFORM ANNUAL SITE VISITS WITH MONTHLY**

**DOCUMENTATION TO VERIFY THE QUALITY AND USE OF FOOD AND PROPER**

**MANAGEMENT OF THE DISTRIBUTION PROGRAM.**

**SCHEDULE J**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**  
▶ **Attach to Form 990.** ▶ **See separate instructions.**  
▶ **Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)**

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Name of the organization

**SAN ANTONIO FOOD BANK INC**

Employer identification number

**74-2122979**

**Part I Questions Regarding Compensation**

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

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

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

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

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

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

- a** Receive a severance payment or change-of-control payment? .....

- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....

- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

- a** The organization? .....

- b** Any related organization? .....

If "Yes" to line 5a or 5b, describe in Part III.

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

- a** The organization? .....

- b** Any related organization? .....

If "Yes" to line 6a or 6b, describe in Part III.

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

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

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

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2013

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ERIC S. COOPER PRESIDENT/CEO	(i)	246,647.	50,750.	0.	17,500.	20,374.	335,271.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MICHAEL GUERRA CDO	(i)	142,016.	0.	0.	0.	19,494.	161,510.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III** Supplemental Information

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

**PART I, LINE 4B:**

**EXPLANATION:** ERIC S. COOPER PARTICIPATES IN A SUPPLEMENTAL NONQUALIFIED  
RETIREMENT PLAN. COST IS \$21,000.

**PART I, LINE 3**

**EXPLANATION:** THE PRESIDENT/CEO'S COMPENSATION IS DISCUSSED AND APPROVED  
BY THE BOARD OF DIRECTORS THE CFO'S COMPENSATION IS DETERMINED BY THE  
PRESIDENT/CEO. THE BOARD APPROVES THE COMPENSATION BUDGET ANNUALLY.  
THIS PROCESS WAS LAST PERFORMED IN JUNE 2014.

**SCHEDULE M  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Noncash Contributions**

OMB No. 1545-0047

**2013**Open to Public  
Inspection

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
▶ **Attach to Form 990.**  
▶ **Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)**

Name of the organization

SAN ANTONIO FOOD BANK INC

Employer identification number

74-2122979

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art .....				
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....				
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other .....				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....				
19 Food inventory .....	X	30,386	96,502,974.	AVERAGE WHOLESALE VA
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( ARCHITECT SER ) .....	X	1	26,335.	
26 Other ▶ ( AUCTION ITEMS ) .....	X	63	9,919.	
27 Other ▶ ( VARIOUS EVENT ) .....	X	8	7,368.	
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 IV, Donee Acknowledgement .....

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for  
at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for  
the entire holding period? .....

	Yes	No
30a		X
31		X
32a		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 non-standard contributions? .....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash  
contributions? .....

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,  
describe in Part II.

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

Schedule M (Form 990) (2013)

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

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

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No. 1545-0047

**2013**

Open to Public  
Inspection

Name of the organization

SAN ANTONIO FOOD BANK INC

Employer identification number

74-2122979

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

MARKETS. 7) FARMERS' MARKET - OFFERS AN ASSORTMENT OF FRESH PRODUCE, ORGANIC PRODUCTS AND OPEN TO VENDORS THAT WANT TO PARTICIPATE. ACCEPTS WIC AND SNAP BENEFITS. 8) COMMUNITY KITCHEN - TRAINS AND EMPOWERS LOW INCOME IDIVIDUALS IN CULINARY ARTS AND FEEDS CHILDREN, HOMELESS AND UNDERSERVED POPULATIONS IN OUR COMMUNITY. 9) SENIOR PROGRAMS - DELIVERS GROCERIES TO LOW INCOME SENIORS. 10) FOOD FAIRS/MOBILITY PANTRY - MASS DISTRIBUTION OF FOOD, OUTREACH, AND EDUCATIONAL MATERIALS TO LOW INCOME FAMILIES. 11) FRESH & PERISHABLE (RETAIL ROUTES) - PICK UP RETAIL PRODUCTS AS WELL AS PREPARED FOOD AND REDISTRIBUTE TO PARTNER AGENCIES FOR DISTRIBUTION TO CLIENTS. 12) FRESH PRODUCE PROGRAM - CLEANING PRODUCE FROM THE FIELD FOR DISTRIBUTION. 13) TEXAS SECOND CHANCE PROGRAM - WAREHOUSE AND CULINARY REHABILITAION PARTNERSHIP WITH THE TEXAS DEPARTMENT OF CRIMINAL JUSTICE. 14) DISASTER RELEIF - FEEDING THOSE AFFECTED BY DISASTER.

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

EXPLANATION: THE FORM 990 WAS REVIEWED BY THE ORGANIZATION'S CEO AND CFO THEN IT WAS ELECTRONICALLY DISSEMINATED TO ALL BOARD MEMBERS FOR THEIR REVIEW BEFORE FILING WITH THE IRS.

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

EXPLANATION: BOARD MEMBERS AND SENIOR STAFF MEMBERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT ON AN ANNUAL BASIS. THE BOARD REVIEWS ALL CONFLICT OF INTEREST STATEMENTS AND ACKNOWLEDGES ANY CONFLICTS IN THE MINUTES OF THE BOARD OF DIRECTORS BOARD MEMBERS WITH CONFLICT, IF

Name of the organization	Employer identification number
SAN ANTONIO FOOD BANK INC	74-2122979

ANY, ARE REQUIRED TO ABSTAIN FROM VOTING.

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

EXPLANATION: THE PRESIDENT/CEO COMPENSATION IS DISCUSSED AND APPROVED BY THE BOARD OF DIRECTORS THE CFO'S COMPENSATION IS DETERMINED BY THE PRESIDENT/CEO. THE BOARD APPROVES THE COMPENSATION BUDGET ANNUALLY THIS PROCESS WAS LAST PERFORMED IN JUNE 2014.

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

EXPLANATION: THE ORGANIZAITON MAKES ITS GOVERNING DOCUMENTS, POLICIES, FINANCIAL STATEMENTS, AND FORM 990 AVAILABLE UPON REQUEST. THE FORM 990 AND FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE ORGANIZATIONS WEBSITE AND OTHER NOT-FOR-PROFIT WEBSITES.

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

PRIOR YEAR EXPENDITURES PAID ON BEHLAF OF SAFB REAL ESTATE, INC.	165,888.
EXPENDITURES PAID ON BEHALF OF SAFB REAL ESTATE, INC.	-967,371.
PRIOR PERIOD ADJUSTMENT	-15,207.
TOTAL TO FORM 990, PART XI, LINE 9	-816,690.

FORM 990, PART XII, LINE 2C:

EXPLANATION: THE FINANCE COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF INDEPENDENT ACCOUNTANT.



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

OMB No. 1545-0047

**Open to Public Inspection**

Employer identification number  
74-2122979

[illegible][illegible]

Schedule R (Form 990) 2013

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

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

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

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

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
<b>(1) SAFB REAL ESTATE, INC.</b>	<b>K</b>	<b>77,977.</b>	
<b>(2) SAFB REAL ESTATE, INC.</b>	<b>R</b>	<b>967,371.</b>	
<b>(3)</b>			
<b>(4)</b>			
<b>(5)</b>			
<b>(6)</b>			

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

## Part VII Supplemental Information

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Provide additional information for responses to questions on Schedule R (see instructions).

[illegible]