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Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Form 990

Department of the Treasury
Internal Revenue Service

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

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization FEEDING AMERICA WEST MICHIGAN		D Employer identification number 38-2439659
	Doing business as		E Telephone number 616-784-3250
	Number and street (or P.O. box if mail is not delivered to street address) 864 WEST RIVER CENTER DRIVE		Room/suite
	City or town, state or province, country, and ZIP or foreign postal code COMSTOCK PARK MI 49321		G Gross receipts \$ 54,287,096
F Name and address of principal officer: KENNETH R. ESTELLE 864 W RIVER CENTER DRIVE COMSTOCK PARK MI 49321			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.FEEDWM.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1981
			M State of legal domicile: MI

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WE GATHER AND DISTRIBUTE FOOD TO RELIEVE HUNGER AND INCREASE FOOD SECURITY IN WEST MICHIGAN AND THE UPPER PENINSULA. CONTRIBUTIONS AND NET ASSETS CONSIST PRIMARILY OF DONATED FOOD FOR DISTRIBUTION.			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	14	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	14	
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	89	
	6	Total number of volunteers (estimate if necessary)	475	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0	
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	0		
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	48,329,389	51,357,478
	9	Program service revenue (Part VIII, line 2g)	2,191,543	2,304,109
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,355	301,678
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	412,958	199,558
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	50,952,245	54,162,823
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	39,393,808	41,576,044
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,553,961	4,962,864
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	354,550	445,424
	b	Total fundraising expenses (Part IX, column (D), line 25)	1,348,920	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,369,930	4,063,256
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	48,672,249	51,047,588	
19	Revenue less expenses. Subtract line 18 from line 12	2,279,996	3,115,235	
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	25,213,733	28,092,763
	21	Total liabilities (Part X, line 26)	1,141,971	760,296
22	Net assets or fund balances. Subtract line 21 from line 20	24,071,762	27,332,467	

Part II Signature Block

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

Sign Here	Signature of officer		Date	
	KENNETH R. ESTELLE Type or print name and title		PRESIDENT/CEO	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	ERIC A. RYAN	<i>Eric A Ryan</i>	08/05/2024	<input type="checkbox"/> P01388772
	Firm's name	Firm's EIN	38-3133790	
Firm's address		Phone no.		
2311 EAST BELTLINE AVE SE STE 200 GRAND RAPIDS, MI 49546		616-942-6440		

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2023)

DAA

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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:

WE GATHER AND DISTRIBUTE FOOD TO RELIEVE HUNGER AND INCREASE FOOD SECURITY IN WEST MICHIGAN AND THE UPPER PENINSULA. CONTRIBUTIONS AND NET ASSETS CONSIST PRIMARILY OF DONATED FOOD FOR DISTRIBUTION.

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 \$ **48,584,725** including grants of \$ **41,576,044**) (Revenue \$ **2,241,568**)

SURPLUS PRODUCTS RECEIVED AS DONATIONS FROM U.S.D.A, FOOD WHOLESALERS, FARMS, AND DISTRIBUTORS. PRODUCTS ARE STORED, SORTED, AND DISTRIBUTED TO FOOD PANTRIES FOR A SMALL HANDLING FEE AS PROGRAM REVENUE FOR THE ORGANIZATION. THE FOOD PANTRY THEN DISTRIBUTES THE FOOD TO NEEDY PEOPLE FREE OF CHARGE.

NOT INCLUDING THE ESTIMATED NON-CASH VALUE OF FOOD DONATED AND DISTRIBUTED, THE FOOD BANK HAD A GAIN OF \$2.9 MILLION. SEE SCHEDULE O FOR ADDITIONAL INFORMATION RELATED TO THE NON-CASH VALUE OF FOOD DONATED AND DISTRIBUTED.

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

SEE SCHEDULE O

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

N/A

4d Other program services (Describe on Schedule O.)

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

4e Total program service expenses **48,584,725**

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Part IV Checklist of Required Schedules

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

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Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	22	
1b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0	
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	

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Part V Statements Regarding Other IRS Filings and Tax Compliance <i>(continued)</i>		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	89
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<input checked="" type="checkbox"/>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<input checked="" type="checkbox"/>
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	<input checked="" type="checkbox"/>
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<input checked="" type="checkbox"/>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<input checked="" type="checkbox"/>
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	<input checked="" type="checkbox"/>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	<input checked="" type="checkbox"/>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<input checked="" type="checkbox"/>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<input checked="" type="checkbox"/>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<input checked="" type="checkbox"/>
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	<input checked="" type="checkbox"/>
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	<input checked="" type="checkbox"/>
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	1a	14		
b Enter the number of voting members included on line 1a, above, who are independent	1b	14		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6			X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9			X

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

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

Section C. Disclosure

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

KENNETH ESTELLE
COMSTOCK PARK

864 WEST RIVER CENTER DRIVE
MI 49321

616-784-3250

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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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DANIELLE VELDMAN	2.00									
BOARD PRESIDENT	0.00	X		X				0	0	0
(2) RICHARD HASLINGER	2.00									
TREASURER	0.00	X		X				0	0	0
(3) KAY HAHN	2.00									
SECRETARY	0.00	X		X				0	0	0
(4) JEFFREY BATTERSHALL	2.00									
DIRECTOR	0.00	X						0	0	0
(5) JULIE BRINKS	2.00									
DIRECTOR	0.00	X						0	0	0
(6) MIKE DEVRIENDT	1.00									
DIRECTOR	0.00	X						0	0	0
(7) JOAN GARETY	1.00									
DIRECTOR	0.00	X						0	0	0
(8) BEULAH GYDON	1.00									
DIRECTOR	0.00	X						0	0	0
(9) KYLE KUEHL	1.00									
DIRECTOR	0.00	X						0	0	0
(10) REV. BRUCE MCCOY	1.00									
DIRECTOR	0.00	X						0	0	0
(11) FRANK SAMUEL	1.00									
DIRECTOR	0.00	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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) KARA SMITH DIRECTOR	1.00 0.00	X						0	0	0
(13) ROBERT STARK DIRECTOR	1.00 0.00	X						0	0	0
(14) THOMAS GREENWAY DIRECTOR	1.00 0.00	X						0	0	0
(15) KENNETH R. ESTELLE PRESIDENT/CEO	40.00 0.00			X				171,570	0	30,553
(16)										
(17)										
(18)										
(19)										
1b Subtotal								171,570		30,553
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								171,570		30,553

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
HUSSMAN CORPORATION GRAND RAPIDS MI 49534	3123 WILSON DR. NW CONSTRUCTION	1,475,109
TRUE SENSE MARKETING FREEDOM PA 15042	156 COMMERCE DR FUNDRAISING	447,553
STAR TRUCK RENTALS INC GRAND RAPIDS MI 49508	3940 EASTERN SE TRUCKING SERVC	432,872
FISHBECK GRAND RAPIDS MI 49546	1515 ARBORETUM DR SE ENGINEERING	388,861
PACE TRANSPORTATION SERVICES BRYON CENTER MI 49315	8788 BRYON COMMERCE DR SW TRUCKING SERVC	195,994

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 **7**

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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	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	5,089,979				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	46,267,499				
	g Noncash contributions included in lines 1a-1f	1g	\$ 41,954,017				
	h Total. Add lines 1a-1f			51,357,478			
Program Service Revenue			Business Code				
	2a SHARED MAINTENANCE		624210	2,241,568	2,241,568		
	b CSFP FOOD BOXES		624210	62,541	62,541		
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			2,304,109				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			293,412		293,412	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents		(i) Real				
		6a		280,288			
		b Less: rental expenses	6b	120,539			
	c Rental inc. or (loss)	6c	159,749				
	d Net rental income or (loss)			159,749		159,749	
	7a Gross amount from sales of assets other than inventory		(i) Securities				
			(ii) Other				
		7a		12,000			
	b Less: cost or other basis and sales exps.	7b	3,734				
	c Gain or (loss)	7c	8,266				
d Net gain or (loss)			8,266	8,266			
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a						
	b Less: direct expenses	8b					
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	9a						
	b Less: direct expenses	9b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
	11a MISC RECYCLING & PALLET		624210	26,143	26,143		
	b MISCELLANEOUS INCOME		624210	12,516	12,516		
	c NEW AGENCY MEMBER FEES		624210	1,150	1,150		
	d All other revenue						
e Total. Add lines 11a-11d			39,809				
12 Total revenue. See instructions			54,162,823	2,352,184	0	453,161	

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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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	39,321,413	39,321,413		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	2,254,631	2,254,631		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	202,124	50,531	111,168	40,425
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	3,489,911	2,502,569	547,494	439,848
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	196,145	141,395	30,147	24,603
9 Other employee benefits	796,495	562,290	132,415	101,790
10 Payroll taxes	278,189	193,397	48,767	36,025
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	445,424			445,424
f Investment management fees	15,159		15,159	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	191,878	78,018	59,923	53,937
12 Advertising and promotion				
13 Office expenses	507,426	250,633	105,212	151,581
14 Information technology				
15 Royalties				
16 Occupancy	219,931	191,233	14,349	14,349
17 Travel	717,400	711,230	3,085	3,085
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	38,286	22,222	5,257	10,807
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	715,203	679,443	17,880	17,880
23 Insurance	141,347	133,289	4,029	4,029
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SHARED MAINTENANCE CHARGE	1,065,113	1,065,113		
b MAINTENANCE & PROP. TAXES	146,101	146,101		
c DUES AND SUBSCRIPTIONS	96,012	71,817	19,058	5,137
d EQUIPMENT & IMPROVEMENTS	90,653	90,653		
e All other expenses	118,747	118,747		
25 Total functional expenses. Add lines 1 through 24e	51,047,588	48,584,725	1,113,943	1,348,920
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	6,971,960	1	3,452,463
	2	Savings and temporary cash investments	1,691,660	2	5,225,139
	3	Pledges and grants receivable, net	1,218,724	3	633,607
	4	Accounts receivable, net	449,406	4	751,609
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	2,973,142	8	3,671,235
	9	Prepaid expenses and deferred charges	108,187	9	94,510
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	18,136,783		
	b	Less: accumulated depreciation	5,232,466	10c	12,904,317
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	1,106,216	12	1,252,482
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	514,024	15	107,401
16	Total assets. Add lines 1 through 15 (must equal line 33)	25,213,733	16	28,092,763	
Liabilities	17	Accounts payable and accrued expenses	516,917	17	596,345
	18	Grants payable		18	
	19	Deferred revenue	108,030	19	88,186
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	517,024	25	75,765
	26	Total liabilities. Add lines 17 through 25	1,141,971	26	760,296
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/>				
	and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	16,694,588	27	18,141,257
	28	Net assets with donor restrictions	7,377,174	28	9,191,210
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/>				
	and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30		
31	Retained earnings, endowment, accumulated income, or other funds		31		
32	Total net assets or fund balances	24,071,762	32	27,332,467	
33	Total liabilities and net assets/fund balances	25,213,733	33	28,092,763	

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	54,162,823
2	Total expenses (must equal Part IX, column (A), line 25)	2	51,047,588
3	Revenue less expenses. Subtract line 2 from line 1	3	3,115,235
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	24,071,762
5	Net unrealized gains (losses) on investments	5	145,470
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	27,332,467

Part XII Financial Statements and Reporting

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

		Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b	X	

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SCHEDULE A
(Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

2023

Open to Public Inspection

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

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

FEEDING AMERICA WEST MICHIGAN

Employer identification number

38-2439659

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

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

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

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

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

Schedule A (Form 990) 2023

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	44,622,729	66,252,198	47,714,592	48,329,389	53,200,843	260,119,751
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	44,622,729	66,252,198	47,714,592	48,329,389	53,200,843	260,119,751
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						25,150,306
6 Public support. Subtract line 5 from line 4						234,969,445

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	44,622,729	66,252,198	47,714,592	48,329,389	53,200,843	260,119,751
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	9,146	11,738	216,440	436,579	573,700	1,247,603
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	33,396	45,148	100,811	67,250	108,631	355,236
11 Total support. Add lines 7 through 10						261,722,590
12 Gross receipts from related activities, etc. (see instructions)					12	13,005,583

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))	14	89.78%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	89.15%

16a 33 1/3% support test — 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support test — 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test — 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

- 19a 33 1/3% support tests — 2023.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests — 2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

Section C – Distributable Amount		Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1	
2 Enter 0.85 of line 1.	2	
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4 Enter greater of line 2 or line 3.	4	
5 Income tax imposed in prior year	5	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4 Amounts paid to acquire exempt-use assets	4
5 Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i>)	5
6 Other distributions (<i>describe in Part VI</i>). See instructions.	6
7 Total annual distributions. Add lines 1 through 6.	7
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9 Distributable amount for 2022 from Section C, line 6	9
10 Line 8 amount divided by line 9 amount	10

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

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

PART II, LINE 10 - OTHER INCOME DETAIL

MISCELLANEOUS INCOME **\$ 355,236**

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

FEEDING AMERICA WEST MICHIGAN

Employer identification number

38-2439659

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

Part II Conservation Easements

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).	
<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a 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 on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.	
(i) Revenue included on Form 990, Part VIII, line 1	\$
(ii) Assets included in Form 990, Part X	\$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.	
a Revenue included on Form 990, Part VIII, line 1	\$
b Assets included in Form 990, Part X	\$

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange program
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,106,216	1,298,836	1,126,919	735,892	640,584
b Contributions		6,250	321	300,521	5,331
c Net investment earnings, gains, and losses	146,266	-198,870	171,596	100,281	97,643
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses				9,775	7,666
g End of year balance	1,252,482	1,106,216	1,298,836	1,126,919	735,892

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

- a** Board designated or quasi-endowment %
- b** Permanent endowment **43.05** %
- c** Term endowment **56.95** %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations?	X	
(ii) Related organizations?		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,501,750		1,501,750
b Buildings		12,452,629	2,567,638	9,884,991
c Leasehold improvements		179,880	71,098	108,782
d Equipment		3,762,769	2,366,013	1,396,756
e Other		239,755	227,717	12,038
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				12,904,317

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Part VII Investments – Other Securities

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

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

Part VIII Investments – Program Related

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITY – CURRENT	37,579
(3) LEASE LIABILITY – NET OF CURRENT	37,186
(4) SECURITY DEPOSIT PAYABLE	1,000
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	75,765

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

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

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

1 Total revenue, gains, and other support per audited financial statements		1	54,413,923
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2a		145,470
b Donated services and use of facilities	2b		250
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)	2d		120,539
e Add lines 2a through 2d	2e		266,259
3 Subtract line 2e from line 1		3	54,147,664
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		15,159
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b	4c		15,159
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	54,162,823

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

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

1 Total expenses and losses per audited financial statements		1	51,153,218
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2a		250
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII.)	2d		120,539
e Add lines 2a through 2d	2e		120,789
3 Subtract line 2e from line 1		3	51,032,429
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		15,159
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b	4c		15,159
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	51,047,588

Part XIII Supplemental Information

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

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

THE ENDOWMENT FUNDS EXIST FOR THE PURPOSE OF GENERATING ANNUAL OPERATING REVENUE FOR THE FOOD BANK.

PART X - FIN 48 FOOTNOTE

FEEDING AMERICA IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.

FEEDING AMERICA EVALUATES TAX POSITIONS TAKEN ON ITS FEDERAL EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURNS IN ACCORDANCE WITH U.S. GAAP.

MANAGEMENT BELIEVES THAT FEEDING AMERICA HAS NO SIGNIFICANT UNRECOGNIZED TAX BENEFITS UNDER THOSE CRITERIA. PENALTIES AND INTEREST, IF ANY, ASSESSED

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Part XIII Supplemental Information *(continued)*

BY INCOME TAXING AUTHORITIES ARE INCLUDED IN OPERATING EXPENSES.

GENERALLY, TAX YEARS FROM 2021 THROUGH THE CURRENT YEAR REMAIN OPEN TO EXAMINATION. MANAGEMENT DOES NOT BELIEVE THAT THE RESULTS FROM ANY EXAMINATION OF THESE OPEN YEARS WOULD HAVE A MATERIAL ADVERSE EFFECT ON FEEDING AMERICA.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

RECLASS RENTAL EXPENSE TO REVENUE \$ 120,539

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER

RECLASS RENTAL EXPENSE TO REVENUE \$ 120,539

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**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Name of the organization

FEEDING AMERICA WEST MICHIGAN

Employer identification number

38-2439659

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

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

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

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
TRUE SENSE MARKETING 1 156 COMMERCE DR FREEDOM PA 15042	DRCT MAIL		X	808,144	447,553	360,591
2 ALLEGRA MARKETING 3983 LINDEN AVE SE GRAND RAPIDS MI 49548	DRCT MAIL		X	0	45,509	-45,509
3						
4						
5						
6						
7						
8						
9						
10						
Total				808,144	493,062	315,082

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.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
11 Net income summary. Subtract line 10 from line 3, column (d)					

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

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

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

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

b If "No," explain:

.....

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

b If "Yes," explain:

.....

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

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name

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 provide any additional information. See instructions.

SCHEDULE G, PAGE 3, PART IV - ADDITIONAL INFORMATION
THE PAYMENTS FOR PRE-AGREED FIXED AMOUNTS TO THE DIRECT MAIL PROVIDERS ARE MADE SPECIFICALLY TO THOSE ENTITIES. THE COST INCLUDES THE FEE FOR THE PRODUCTION OF THE MAILED ITEMS AND THE COST OF POSTAGE. THE POSTAGE IS THE ONLY EXPENSE REIMBURSEMENT. THE TOTAL AMOUNT (MAILER AND POSTAGE) IS POSTED AS A DIRECT MARKETING EXPENSE.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

FEEDING AMERICA WEST MICHIGAN

Employer identification number

38-2439659

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) (C)	GRCC STUDENT FOOD PANTRY/GRCC F 122 LYON ST. NE GRAND RAPIDS MI 49503	38-6100380	501C3		67,570	FMV	FOOD	FIGHT HUNGER
(2) (C)	GVSU REPLENISH STUDENT FP/GRAND 1201 KIRKHOFF CENTER, 1 CAMPUS DRIVE ALLENDALE & GRAND RAPI MI 49401	38-1684280	501C3		15,311	FMV	FOOD	FIGHT HUNGER
(3) (C)	NORTHERN MICHIGAN UNIVERSITY FO 1401 PRESQUE ISLE AVE MARQUETTE MI 49855	23-7034523	501C3		15,962	FMV	FOOD	FIGHT HUNGER
(4) (C)	NORTHWESTERN MICHIGAN COLLEGE (1701 E FRONT ST. TRAVERSE CITY MI 49686	38-6027348	501C3		45,718	FMV	FOOD	FIGHT HUNGER
(5) (C)	NORTHWESTERN MICHIGAN COLLEGE P 1701 E. FRONT ST. TRAVERSE CITY MI 49686	38-2376475	501C3		9,288	FMV	FOOD	FIGHT HUNGER
(6) (S)	BIG BAY DE NOC BACKPACK/COMM FD 8928 0025 ROAD COOKS MI 49817	38-3227080	501C3		6,674	FMV	FOOD	FIGHT HUNGER
(7) (S)	EAST LEONARD ELEM/ST. MARK'S EP 410 BARNETT STREET NE GRAND RAPIDS MI 49503	31-1629166	501C3		26,205	FMV	FOOD	FIGHT HUNGER
(8) (S)	EAU CLAIRE PUBLIC SCHOOLS/FIRST 6238 WEST MAIN ST. EAU CLAIRE MI 49111	62-0484177	501C3		9,831	FMV	FOOD	FIGHT HUNGER
(9) (S)	RIVER VALLEY SCHOOL DISTRICT - 15480 THREE OAKS ROAD THREE OAKS MI 49128	26-1964620	501C3		13,687	FMV	FOOD	FIGHT HUNGER

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **500**

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

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

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	(S) SOUTHWEST ELEMENTARY GRPS (M) 801 OAKLAND AVE. SW GRAND RAPIDS MI 49503		501C3		102,048 FMV	FMV	FOOD	FIGHT HUNGER
(2)	31 BACKPACKS, INC 601 INGOT HANCOCK MI 49930	45-4916842	501C3		20,204 FMV	FMV	FOOD	FIGHT HUNGER
(3)	A.C.T.I.O.N. MINISTRY CENTER 301 MAIN STREET DOWAGIAC MI 49047	27-3920245	501C3		99,447 FMV	FMV	FOOD	FIGHT HUNGER
(4)	A.C.T.I.O.N. MINISTRY CENTER (M) 301 MAIN STREET DOWAGIAC MI 49047	27-3920245	501C3		142,317 FMV	FMV	FOOD	FIGHT HUNGER
(5)	ADAMS PARK PANTRY/BOSTON SQUARE CRC 1440 FULLER AVENUE SE GRAND RAPIDS MI 49507	38-2051351	501C3		24,632 FMV	FMV	FOOD	FIGHT HUNGER
(6)	ADDIE'S PANTRY/CENTRAL REFORMED CHU 10 COLLEGE AVE. NE GRAND RAPIDS MI 49503	13-3204416	501C3		26,134 FMV	FMV	FOOD	FIGHT HUNGER
(7)	ALEMAN CENTER/ST. THOMAS MORE STUDE 63559 60TH AVENUE HARTFORD MI 49057	53-0196617	501C3		16,923 FMV	FMV	FOOD	FIGHT HUNGER
(8)	ALGER COMMUNITY FOOD PANTRY 414 E MUNISING AVE MUNISING MI 49862	46-0871458	501C3		74,129 FMV	FMV	FOOD	FIGHT HUNGER
(9)	ALL SAINTS CATHOLIC CHURCH (M) 500 IROQUOIS FREMONT MI 49412	53-0196617	501C3		32,460 FMV	FMV	FOOD	FIGHT HUNGER

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

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

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

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

Employer identification number
38-2439659

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	ALTERNATIVE DIRECTIONS 1706 S. DIVISION AVE. GRAND RAPIDS MI 49507	38-2405582	501C3		74,352	FMV	FOOD	FIGHT HUNGER
(2)	ANGELS OF ACTION - BACKPACK BLESSING 200 S STEWART AVE BIG RAPIDS MI 49307	45-2035870	501C3		196,204	FMV	FOOD	FIGHT HUNGER
(3)	APOSTOLIC LIGHTHOUSE CHURCH/UPCI 30402 M-62 HWY. WEST DOWAGIAC MI 49047-0404	43-0679185	501C3		7,418	FMV	FOOD	FIGHT HUNGER
(4)	ARBOR CIRCLE-FAMILY ENGAGEMENT 1101 BALL AVE NE, BLDG D GRAND RAPIDS MI 49505	38-3263853	501C3		8,140	FMV	FOOD	FIGHT HUNGER
(5)	BALDWIN ROTARY CHARITIES, INC. BACK 525 4TH ST. BALDWIN MI 49304	26-1420107	501C3		15,868	FMV	FOOD	FIGHT HUNGER
(6)	BANGOR CHURCH OF CHRIST (M) 214 NORTH WALNUT STREET BANGOR MI 49013		501C3		12,714	FMV	FOOD	FIGHT HUNGER
(7)	BARRIE'S HOUSE/SETTLEMENT LUTHERAN 1031 S. JOHNSON ROAD GOWEN MI 49326	41-1568278	501C3		83,044	FMV	FOOD	FIGHT HUNGER
(8)	BARRYTON AREA MOBILE (M) 3265 20 MILE ROAD BARRYTON MI 49305	30-0593251	501C3		132,561	FMV	FOOD	FIGHT HUNGER
(9)	BAXTER COMMUNITY CENTER-MARKET PLAC 935 BAXTER STREET SE GRAND RAPIDS MI 49506	23-7076806	501C3		105,959	FMV	FOOD	FIGHT HUNGER

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

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

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number

FEEDING AMERICA WEST MICHIGAN
38-2439659

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	BAY HUMAN SERVICES--MERIDIAN HEIGHT 1105 MERIDIAN STREET SAULT STE MARIE MI 49783	38-2335441	501C3		9,017 FMV	FMV	FOOD	FIGHT HUNGER
(2)	BEAR LAKE COMMUNITY CHURCH 7861 MAIN STREET BEAR LAKE MI 49614	93-2326976	501C3		14,822 FMV	FMV	FOOD	FIGHT HUNGER
(3)	BENNY'S HOUSE/WHITE CLOUD UMC FP 1139 NEWELL AVENUE WHITE CLOUD MI 49349	31-1813333	501C3		43,261 FMV	FMV	FOOD	FIGHT HUNGER
(4)	BENZIE AREA CHRISTIAN NEIGHBORS 2804 BENZIE HWY BENZONIA MI 49616	38-2792605	501C3		38,208 FMV	FMV	FOOD	FIGHT HUNGER
(5)	BENZIE DROP IN CENTER 1034 MICHIGAN AVENUE BENZONIA MI 49616	35-2254782	501C3		16,543 FMV	FMV	FOOD	FIGHT HUNGER
(6)	BENZIE FOOD PARTNERS 10907 MAIN STREET HONOR MI 49640	38-3366816	501C3		23,190 FMV	FMV	FOOD	FIGHT HUNGER
(7)	BENZIE SENIOR RESOURCES 10579 MAIN STREET HONOR MI 49640	06-1673002	501C3		21,988 FMV	FMV	FOOD	FIGHT HUNGER
(8)	BEREAN BAPTIST CHURCH 1574 COIT AVE. NE GRAND RAPIDS MI 49505	36-2310475	501C3		37,488 FMV	FMV	FOOD	FIGHT HUNGER
(9)	BERRIEN SPRINGS SPANISH SDA CHURCH 209 WEST PITT BERRIEN SPRINGS MI 49103	52-0643036	501C3		11,112 FMV	FMV	FOOD	FIGHT HUNGER

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

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

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	BETHANY CHRISTIAN REFORMED CHURCH P 1105 TERRACE ST. MUSKEGON MI 49442	38-2051351	501C3		6,591 FMV	FMV	FOOD	FIGHT HUNGER
(2)	BETHANY CHRISTIAN SERVICES - RESIDE 901 EASTERN AVE NE GRAND RAPIDS MI 49503	38-1405282	501C3		23,033 FMV	FMV	FOOD	FIGHT HUNGER
(3)	BETHANY LUTHERAN CHURCH FOOD PANTRY 9208 KAUKO STREET KALEVA MI 49645	41-1568278	501C3		15,866 FMV	FMV	FOOD	FIGHT HUNGER
(4)	BHK CAA FOOD PANTRY 926 DODGE ST HOUGHTON MI 49931	38-1800879	501C3		223,088 FMV	FMV	FOOD	FIGHT HUNGER
(5)	BHK CAA FOOD PANTRY - BARAGA 926 DODGE ST HOUGHTON MI 49931	38-1800879	501C3		25,450 FMV	FMV	FOOD	FIGHT HUNGER
(6)	BHK CAA FOOD PANTRY - KEWEENAW 926 DODGE ST HOUGHTON MI 49931	38-1800879	501C3		8,842 FMV	FMV	FOOD	FIGHT HUNGER
(7)	BREAD OF HEAVEN FOOD PANTRY/BERRIEN 310 WEST MARS ST BERRIEN SPRINGS MI 49103	93-2474341	501C3		21,894 FMV	FMV	FOOD	FIGHT HUNGER
(8)	BREAD OF LIFE FOOD PANTRY/HAVE MERC 6596 S. VINING ROAD GREENVILLE MI 48838	45-2592543	501C3		77,106 FMV	FMV	FOOD	FIGHT HUNGER
(9)	BREAD OF LIFE FOOD PANTRY/LAKE CNTY 740 E NINTH STREET BALDWIN MI 49304	47-3155665	501C3		169,332 FMV	FMV	FOOD	FIGHT HUNGER

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

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

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
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Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	BRIDGE ACADEMY OF SW MICHIGAN/DBA K 499 W. MAIN STREET BENTON HARBOR MI 49022	38-3287818	501C3		91,173 FMV	FMV	FOOD	FIGHT HUNGER
(2)	BROOKSIDE CRC (M) 3600 KALAMAZOO AVE. SE GRAND RAPIDS MI 49508	38-2051351	501C3		101,631 FMV	FMV	FOOD	FIGHT HUNGER
(3)	BROTHERHOOD OF ALL NATIONS (M)/BROT 516 EMERY STREET BENTON HARBOR MI 49022	23-7002419	501C3		10,775 FMV	FMV	FOOD	FIGHT HUNGER
(4)	BUIST COMMUNITY ASSISTANCE CENTER 870 74TH ST. SW, SUITE B BYRON CENTER MI 49315	26-2847613	501C3		298,206 FMV	FMV	FOOD	FIGHT HUNGER
(5)	CADILLAC AREA BACKPACK PROG@FIRST B 221 GRANITE ST CADILLAC MI 49601	13-5563018	501C3		82,323 FMV	FMV	FOOD	FIGHT HUNGER
(6)	CADILLAC AREA BACKPACKS@FIRST BAPTI 220 GRANITE CADILLAC MI 49601	13-5563018	501C3		15,760 FMV	FMV	FOOD	FIGHT HUNGER
(7)	CADILLAC REVIVAL CENTER 5676 M-55 CADILLAC MI 49601	44-0612817	501C3		129,239 FMV	FMV	FOOD	FIGHT HUNGER
(8)	CALVARY CRC 3500 BYRON CENTER AVE SW WYOMING MI 49509	38-2051351	501C3		6,228 FMV	FMV	FOOD	FIGHT HUNGER
(9)	CALVARY CRC (M) 3500 BYRON CENTER AVE SW WYOMING MI 49519	38-2051351	501C3		280,614 FMV	FMV	FOOD	FIGHT HUNGER

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

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

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

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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OMB No. 1545-0047

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Name of the organization

Employer identification number

FEEDING AMERICA WEST MICHIGAN
38-2439659

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	CALVARY ROAD COMMUNITY CHURCH/GCSDA 8666 MAPLEWOOD DRIVE BERRIEN SPRINGS MI 49103	52-0643036	501C3		97,635	FMV	FOOD	FIGHT HUNGER
(2)	CALVARY UNDENOMINATIONAL CHURCH 707 E BELTLINE AVE NE GRAND RAPIDS MI 49525	38-1369600	501C3		26,553	FMV	FOOD	FIGHT HUNGER
(3)	CALVIN CRC (M) 973 W. NORTON AVE. MUSKEGON MI 49441	38-1877021	501C3		150,970	FMV	FOOD	FIGHT HUNGER
(4)	CALVIN THEOLOGICAL SEMINARY 3233 BURTON STREET SE GRAND RAPIDS MI 49546	38-3001876	501C3		16,670	FMV	FOOD	FIGHT HUNGER
(5)	CARING CUPBOARD/WOODLAND SHORES BAP 3555 SHAWNEE ROAD BRIDGMAN MI 49106	36-2192827	501C3		13,039	FMV	FOOD	FIGHT HUNGER
(6)	CARING CUPBOARD/WOODLAND SHORES BAP 3555 SHAWNEE ROAD BRIDGMAN MI 49106	36-2192827	501C3		61,591	FMV	FOOD	FIGHT HUNGER
(7)	CARITAS FOOD PANTRY/ST MARY'S CATHO 85 S MADISON AVE CUSTER MI 49405	53-0196617	501C3		67,320	FMV	FOOD	FIGHT HUNGER
(8)	CASCADE FELLOWSHIP CRC (M) 6655 CASCADE RD. SE GRAND RAPIDS MI 49546	38-2051351	501C3		106,798	FMV	FOOD	FIGHT HUNGER
(9)	CATHOLIC COMMUNITY CENTER 346 CATALPA BENTON HARBOR MI 49022	53-0196617	501C3		14,676	FMV	FOOD	FIGHT HUNGER

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

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

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

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	CEDAR POST FOOD PANTRY 362 EAST M-134 CEDARVILLE MI 49719	30-0097364	501C3		14,869 FMV	FMV	FOOD	FIGHT HUNGER
(2)	CEDAR SPRINGS COMMUNITY FOOD PANTRY 140 S. MAIN STREET CEDAR SPRINGS MI 49319	88-1288340	501C3		11,712 FMV	FMV	FOOD	FIGHT HUNGER
(3)	CEDAR SPRINGS ROTARY FDTN (M) 204 E MUSKEGON ST CEDAR SPRINGS MI 49319	27-4686038	501C3		59,531 FMV	FMV	FOOD	FIGHT HUNGER
(4)	CENTRAL UNITED METHODIST CHURCH (M) 912 FOURTH AVENUE LAKE ODESSA MI 48849	31-1813333	501C3		97,051 FMV	FMV	FOOD	FIGHT HUNGER
(5)	CHILDREN FIRST LAKESHORE 6874 WILEY RD FENNVILLE MI 49408	82-4754358	501C3		12,645 FMV	FMV	FOOD	FIGHT HUNGER
(6)	CHIPPEWA LAKE COMMUNITY CHURCH (M) 10467 19 MILE ROAD CHIPPEWA LAKE MI 49320		501C3		43,243 FMV	FMV	FOOD	FIGHT HUNGER
(7)	CHRIST CHURCH OF TRAVERSE CITY 430 FAIR STREET TRAVERSE CITY MI 49686		501C3		5,668 FMV	FMV	FOOD	FIGHT HUNGER
(8)	CHRIST TEMPLE APOSTOLIC FAITH CHURCH 412 E. SHERMAN BLVD. MUSKEGON HEIGHTS MI 49444	38-2213048	501C3		28,389 FMV	FMV	FOOD	FIGHT HUNGER
(9)	CHRIST'S FELLOWSHIP MINISTRIES/HLM 8082 CORNELL ROAD GERMFASK MI 49836	36-4558386	501C3		33,061 FMV	FMV	FOOD	FIGHT HUNGER

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

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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(1)	CHRISTIAN NEIGHBORS, INC. OF DOUGLAS 6874 WILEY ROAD DOUGLAS MI 49408	38-2411343	501C3		49,326 FMV	FMV	FOOD	FIGHT HUNGER
(2)	CHRISTIAN REFORMED CHURCH FALMOUTH/ 1975 E PROSPER ROAD FALMOUTH MI 49632	81-5336674	501C3		30,632 FMV	FMV	FOOD	FIGHT HUNGER
(3)	CHRISTIAN REFORMED CHURCH- ST. JOSE 3275 WASHINGTON AVE. ST. JOSEPH MI 49085	38-2051351	501C3		25,013 FMV	FMV	FOOD	FIGHT HUNGER
(4)	CHRISTIAN SERVICE CENTER - ST. MARY 322 CLAY STREET NILES MI 49120	53-0196617	501C3		18,386 FMV	FMV	FOOD	FIGHT HUNGER
(5)	CHRISTIAN SERVICE CENTER/USCCB (M) 322 CLAY STREET NILES MI 49120	53-0196617	501C3		14,968 FMV	FMV	FOOD	FIGHT HUNGER
(6)	CHURCH OF CHRIST OF DOWAGIAC 58273 M-51 S. DOWAGIAC MI 49047	84-0563716	501C3		13,865 FMV	FMV	FOOD	FIGHT HUNGER
(7)	CHURCH OF THE NAZARENE-REED CITY 5300 220TH AVE REED CITY MI 49639	44-0552034	501C3		5,787 FMV	FMV	FOOD	FIGHT HUNGER
(8)	CHURCH OF THE NAZARENE-REED CITY (M) 5300 220TH AVE REED CITY MI 49639	44-0552034	501C3		105,027 FMV	FMV	FOOD	FIGHT HUNGER
(9)	CHURCH OF THE SERVANT CRC (M) 3835 BURTON AVE SE GRAND RAPIDS MI 49546	38-2051351	501C3		116,627 FMV	FMV	FOOD	FIGHT HUNGER

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number

38-2439659

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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(1)	CIM-CMC PATIENT PANTRY/COREWELL HEALTH SERVICES 75 SHELDON BLVD SE, SUITE 100 GRAND RAPIDS MI 49503	38-3382353	501C3		24,525	FMV	FOOD	FIGHT HUNGER
(2)	CITI BOI CORPORATION 318 CENTER ST. MUSKEGON MI 49445	87-4025619	501C3		8,280	FMV	FOOD	FIGHT HUNGER
(3)	CITI BOI CORPORATION (M) 318 CENTER ST, SUITE 8 MUSKEGON MI 49445	87-4025619	501C3		63,623	FMV	FOOD	FIGHT HUNGER
(4)	CITY CHURCH GREENVILLE/LOCAL IMPACT 204 W CASS ST. GREENVILLE MI 48838	82-1355582	501C3		23,602	FMV	FOOD	FIGHT HUNGER
(5)	CITY HEART MINISTRIES 2731 PECK STREET MUSKEGON HEIGHTS MI 49444	82-1355582	501C3		27,456	FMV	FOOD	FIGHT HUNGER
(6)	CITY IMPACT DBA/LOCAL IMPACT 288 N MAIN ST. CEDAR SPRINGS MI 49319	82-1355582	501C3		134,609	FMV	FOOD	FIGHT HUNGER
(7)	CLM CAA FOOD PANTRY 524 ASHMUN ST. SAULT STE MARIE MI 49783	38-1798626	501C3		12,040	FMV	FOOD	FIGHT HUNGER
(8)	CLM CAA SENIOR MEALS-SUGAR ISLAND 6401 EAST 1 1/2 MILE ROAD SUGAR ISLAND MI 49783	38-1798626	501C3		15,019	FMV	FOOD	FIGHT HUNGER
(9)	CLUB CADILLAC 2105 6TH AVE. CADILLAC MI 49601	20-1865066	501C3		10,166	FMV	FOOD	FIGHT HUNGER

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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OMB No. 1545-0047

2023

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Name of the organization

Employer identification number
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FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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(1)	COGIC COMMUNITY CENTER @ HOLY TRINI 2140 VALLEY MUSKEGON MI 49442	38-2929137	501C3		22,924 FMV	FMV	FOOD	FIGHT HUNGER
(2)	COLFAX COMMUNITY CHURCH FOOD PANTRY 2010 E. 16 ROAD MANTON MI 49663		501C3		6,489 FMV	FMV	FOOD	FIGHT HUNGER
(3)	COMMUNITY ACTION HOUSE 739 PAW PAW DRIVE HOLLAND MI 49423	23-7120670	501C3		1,463,926 FMV	FMV	FOOD	FIGHT HUNGER
(4)	COMMUNITY BASKET/COMMUNITY SERVICES 3178 68TH ST SE CALEDONIA MI 49316	27-2506891	501C3		40,526 FMV	FMV	FOOD	FIGHT HUNGER
(5)	COMMUNITY CRC (M) 150 BURT AVE SE WYOMING MI 49548	38-2051351	501C3		102,085 FMV	FMV	FOOD	FIGHT HUNGER
(6)	COMMUNITY FOOD CLUB 1100 S. DIVISION AVE. GRAND RAPIDS MI 49507	82-2265189	501C3		1,100,374 FMV	FMV	FOOD	FIGHT HUNGER
(7)	COMMUNITY FOOD PROGRAM/ ST. MARY'S 404 N. DIVISION STREET CARSON CITY MI 48811	53-0196617	501C3		47,353 FMV	FMV	FOOD	FIGHT HUNGER
(8)	COMMUNITY HOPE BACK PACKS/COMMUNITY 1657 S MOREY RD LAKE CITY MI 49651	81-5336674	501C3		11,310 FMV	FMV	FOOD	FIGHT HUNGER
(9)	COMMUNITY NONPROFIT HOUSING CORP/CO 870 NATE WELLS SR. DR. BENTON HARBOR MI 49022	38-2929137	501C3		20,022 FMV	FMV	FOOD	FIGHT HUNGER

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

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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OMB No. 1545-0047

2023

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Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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(1)	COMMUNITY REFORMED CHURCH OF ZEELAN 10376 FELCH STREET ZEELAND MI 49464	86-1960271	501C3		140,371	FMV	FOOD	FIGHT HUNGER
(2)	COOPERATING MINISTRIES (M)/HARTFORD 425 E. MAIN ST. HARTFORD MI 49057	31-1813333	501C3		139,297	FMV	FOOD	FIGHT HUNGER
(3)	COOPERATING MINISTRIES INC./HARTFOR 425 E MAIN STREET HARTFORD MI 49057	31-1813333	501C3		24,517	FMV	FOOD	FIGHT HUNGER
(4)	COOPERSVILLE CARES (M) 180 68TH AVE. COOPERSVILLE MI 49404	38-2978248	501C3		127,074	FMV	FOOD	FIGHT HUNGER
(5)	COPPER COUNTRY ANGEL MISSION FOOD P 433 5TH ST CALUMET MI 49913	84-4106746	501C3		6,037	FMV	FOOD	FIGHT HUNGER
(6)	CORNERSTONE BAPTIST FOOD PANTRY 121 NELSON ROAD LUDINGTON MI 49431	36-2181949	501C3		20,656	FMV	FOOD	FIGHT HUNGER
(7)	CORNERSTONE CHURCH (M) 1675 84TH STREET SE CALEDONIA MI 49316	92-3270362	501C3		121,595	FMV	FOOD	FIGHT HUNGER
(8)	COVENANT PRESBYTERIAN CHURCH (M) 108 WEST CHURCH ST TUSTIN MI 49688	23-6393377	501C3		38,171	FMV	FOOD	FIGHT HUNGER
(9)	COVERT TOWNSHIP LIONS CLUB (M) 78085 CR 378 COVERT MI 49043	38-2678531	501C3		31,634	FMV	FOOD	FIGHT HUNGER

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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OMB No. 1545-0047

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Name of the organization

Employer identification number
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FEEDING AMERICA WEST MICHIGAN

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(1)	CROSS ROADS COMPASSION CENTER/GREEN 10087 S. GREENVILLE ROAD GREENVILLE MI 48838	32-0221237	501C3		10,158 FMV	FMV	FOOD	FIGHT HUNGER
(2)	CROSSROADS CHURCH (M) 1463 E. US 10 SCOTTVILLE MI 49454	38-2130823	501C3		72,484 FMV	FMV	FOOD	FIGHT HUNGER
(3)	DIANE PEPLER RESOURCE CENTER PROTECTED SAULT STE MARIE MI 49783	38-2300187	501C3		18,889 FMV	FMV	FOOD	FIGHT HUNGER
(4)	DICKINSON IRON COMMUNITY SERVICE AG 1238 CARPENTER AVE IRON MOUNTAIN MI 49801	38-2889846	501C3		40,170 FMV	FMV	FOOD	FIGHT HUNGER
(5)	DISCOVERING CHRIST CHURCH (M) 2330 HOLTON ROAD MUSKEGON MI 49445	86-1960271	501C3		146,877 FMV	FMV	FOOD	FIGHT HUNGER
(6)	DISCOVERY CRC (M) 7245 EASTERN AVE. SE GRAND RAPIDS MI 49508	38-2051351	501C3		118,419 FMV	FMV	FOOD	FIGHT HUNGER
(7)	DIVINE MERCY PARISH PANTRY 249 6TH STREET MANISTEE MI 49660	53-0196617	501C3		52,933 FMV	FMV	FOOD	FIGHT HUNGER
(8)	EAST PARIS COMM FOOD PANTRY/ISLAMIC 3357 EAST PARIS GRAND RAPIDS MI 49512	38-3594619	501C3		20,824 FMV	FMV	FOOD	FIGHT HUNGER
(9)	EAU CLAIRE S.D.A. (M) 6562 NAOMI ROAD EAU CLAIRE MI 49111	52-0643036	501C3		77,629 FMV	FMV	FOOD	FIGHT HUNGER

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
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Name of the organization

Employer identification number

FEEDING AMERICA WEST MICHIGAN
38-2439659

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(1)	EDGETTS WESLEYAN CHURCH 3446 RAYMOND RD. LUTHER MI 49656	35-1148762	501C3		40,555	FMV	FOOD	FIGHT HUNGER
(2)	EDGETTS WESLEYAN CHURCH (M) 3446 RAYMOND RD. LUTHER MI 49656	35-1148762	501C3		59,150	FMV	FOOD	FIGHT HUNGER
(3)	EDWARDSBURG EMERGENCY FUND 24832 US 12 E EDWARDSBURG MI 49112	27-1214971	501C3		48,938	FMV	FOOD	FIGHT HUNGER
(4)	EDWARDSBURG EMERGENCY FUND (M) 69941 ELKHART RD. EDWARDSBURG MI 49112	27-1214971	501C3		18,686	FMV	FOOD	FIGHT HUNGER
(5)	ELEANOR'S PANTRY 221 DREW ST PAW PAW MI 49079	38-2364961	501C3		68,673	FMV	FOOD	FIGHT HUNGER
(6)	ELEANOR'S PANTRY 221 DREW ST. PAW PAW MI 49079	38-2364961	501C3		39,308	FMV	FOOD	FIGHT HUNGER
(7)	EMPIRE FOOD PANTRY/ST. PHILIP NERI 4902 W MACFARLANE RD GLEN ARBOR MI 49636	53-0196617	501C3		9,641	FMV	FOOD	FIGHT HUNGER
(8)	EMPOWERMENT NETWORK FOOD PANTRY 5 E. MAIN STREET FREMONT MI 49412	81-0568467	501C3		26,200	FMV	FOOD	FIGHT HUNGER
(9)	ENGEDI CHURCH (M) 710 CHICAGO DRIVE SUITE 100 HOLLAND MI 49423	38-3717953	501C3		114,734	FMV	FOOD	FIGHT HUNGER

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Department of the Treasury
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FEEDING AMERICA WEST MICHIGAN

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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	EPISCOPAL CHURCH OF THE MEDIATOR (M) 14280 RED ARROW HIGHWAY HARBERT MI 49115	13-5562208	501C3		49,924 FMV	FMV	FOOD	FIGHT HUNGER
(2)	ESCANABA SDA FOOD PANTRY 210 SOUTH LINCOLN ESCANABA MI 49829	52-0643036	501C3		620,525 FMV	FMV	FOOD	FIGHT HUNGER
(3)	EVART UNITED METHODIST CHURCH (M) 619 NORTH CHERRY STREET EVART MI 49631	31-1813333	501C3		158,313 FMV	FMV	FOOD	FIGHT HUNGER
(4)	EXODUS PLACE / EXODUS BLDG. 322 FRONT STREET SW GRAND RAPIDS MI 49504	27-0526744	501C3		17,763 FMV	FMV	FOOD	FIGHT HUNGER
(5)	FAIRPLAIN PRESBYTERIAN CHURCH 210 W. NAPIER BENTON HARBOR MI 49022	38-1387661	501C3		21,380 FMV	FMV	FOOD	FIGHT HUNGER
(6)	FAIRPLAIN S.D.A. CHURCH 140 SENECA BENTON HARBOR MI 49022	52-0643036	501C3		21,823 FMV	FMV	FOOD	FIGHT HUNGER
(7)	FAITH LUTHERAN CHURCH PANTRY & BACK 4081 E MAPLE RIDGE 37TH ROAD ROCK MI 49880	41-1568278	501C3		31,252 FMV	FMV	FOOD	FIGHT HUNGER
(8)	FAMILY CARE NETWORK MANTON FP 800 S MICHIGAN AVE MANTON MI 49663		501C3		25,114 FMV	FMV	FOOD	FIGHT HUNGER
(9)	FAMILY CARE NETWORK/LIVING WORD MIN 800 S MICHIGAN AVE MANTON MI 49663	38-2533219	501C3		56,757 FMV	FMV	FOOD	FIGHT HUNGER

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

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

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

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number

FEEDING AMERICA WEST MICHIGAN
38-2439659

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	FAMILY LIFE CENTER/CZDC 5945 FILLMORE STREET ALLENDALE MI 49401	51-0149771	501C3		14,829	FMV	FOOD	FIGHT HUNGER
(2)	FAMILY NETWORK 1029 44TH STREET SW WYOMING MI 49509	26-3264303	501C3		440,429	FMV	FOOD	FIGHT HUNGER
(3)	FEED MY SHEEP FOOD PANTRY/FIRST CHR 121 OAK ST DOWAGIAC MI 49047	35-2035882	501C3		9,527	FMV	FOOD	FIGHT HUNGER
(4)	FELLOWSHIP BAPTIST CHURCH 308 ELM STREET LUTHER MI 49656	82-1833853	501C3		23,040	FMV	FOOD	FIGHT HUNGER
(5)	FGF/AFRICAN AMER. HISTORY & LITERAT 725 BROADWAY BENTON HARBOR MI 49022	82-3690593	501C3		5,867	FMV	FOOD	FIGHT HUNGER
(6)	FGF/BENTON HARBOR HIGH SCHOOL/BH ED 870 COLFAX AVENUE BENTON HARBOR MI 49022	82-3690593	501C3		12,896	FMV	FOOD	FIGHT HUNGER
(7)	FGF/FAIR PLAIN E ELEM. SCHOOL/BH ED 1998 UNION AVENUE BENTON HARBOR MI 49022	82-3690593	501C3		7,162	FMV	FOOD	FIGHT HUNGER
(8)	FGF/LIFEQUEST URBAN OUTREACH/ALPHA 1050 FISK ST SE GRAND RAPIDS MI 49507	82-1447543	501C3		23,677	FMV	FOOD	FIGHT HUNGER
(9)	FGF/MLK JR. ELEMENTARY SCHOOL/BH ED 750 E BRITAIN AVENUE BENTON HARBOR MI 49022	82-3690593	501C3		11,861	FMV	FOOD	FIGHT HUNGER

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number

FEEDING AMERICA WEST MICHIGAN

38-2439659

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(1)	FGF/MOSAIC CCDA 1804 M-139 BENTON HARBOR MI 49022	27-1050319	501C3		48,998 FMV	FMV	FOOD	FIGHT HUNGER
(2)	FIRST BAPTIST OF WOODLAND PARK (M) 9073 BINGHAM BITELY MI 49309	38-6095426	501C3		74,627 FMV	FMV	FOOD	FIGHT HUNGER
(3)	FIRST CHURCH OF GOD/GACG (M) 101 SOUTH FRANKLIN STREET GREENVILLE MI 48838	35-6064030	501C3		91,173 FMV	FMV	FOOD	FIGHT HUNGER
(4)	FIRST COMMUNITY AME CHURCH FOOD PAN 500 JAMES STREET SE GRAND RAPIDS MI 49503		501C3		73,875 FMV	FMV	FOOD	FIGHT HUNGER
(5)	FIRST CONGREGATIONAL CHURCH OF ROCK 192 E. BRIDGE ST ROCKFORD MI 49341	13-1957221	501C3		5,641 FMV	FMV	FOOD	FIGHT HUNGER
(6)	FIRST CONGREGATIONAL UCC - BACKPACK 2001 NILES AVENUE ST. JOSEPH MI 49085	13-1957221	501C3		6,271 FMV	FMV	FOOD	FIGHT HUNGER
(7)	FIRST CONGREGATIONAL UCC - BACKPACK 2001 NILES AVENUE ST. JOSEPH MI 49085	13-1957221	501C3		13,890 FMV	FMV	FOOD	FIGHT HUNGER
(8)	FIRST CONGREGATIONAL UCC PANTRY 1201 JEFFERSON STREET MUSKEGON MI 49441	13-1957221	501C3		47,920 FMV	FMV	FOOD	FIGHT HUNGER
(9)	FIRST CUTLERVILLE CRC (M) 1425 68TH ST. SW BYRON CENTER MI 49315	38-2051351	501C3		31,469 FMV	FMV	FOOD	FIGHT HUNGER

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

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(1)	FIRST EVANGELICAL LUTHERAN CHURCH - 1210 S STEPHENSON AVE IRON MOUNTAIN MI 49801	41-1991463	501C3		21,391	FMV	FOOD	FIGHT HUNGER
(2)	FIRST PARK CONGREGATIONAL U.C.C. (M) 10 EAST PARK PLACE NE GRAND RAPIDS MI 49503	13-1957221	501C3		45,723	FMV	FOOD	FIGHT HUNGER
(3)	FIVECAP - LAKE COUNTY (TEFAP) 2476 W 44TH ST BALDWIN MI 49304	38-1814318	501C3		27,001	FMV	FOOD	FIGHT HUNGER
(4)	FIVECAP - MANISTEE COUNTY (TEFAP) 265 FIRST STREET MANISTEE MI 49660	38-1814318	501C3		21,931	FMV	FOOD	FIGHT HUNGER
(5)	FIVECAP - MASON COUNTY (TEFAP) 44 E JOHNSON RD SCOTTVILLE MI 49454	38-1814318	501C3		23,099	FMV	FOOD	FIGHT HUNGER
(6)	FIVECAP - NEWAYGO COUNTY (TEFAP) 434 NORTH EVERGREEN WHITE CLOUD MI 49349	38-1814318	501C3		27,312	FMV	FOOD	FIGHT HUNGER
(7)	FIVECAP/LAKE CO - BALDWIN (CSFP) 2476 W 44TH ST BALDWIN MI 49304	38-1814318	501C3		129,896	FMV	FOOD	FIGHT HUNGER
(8)	FIVECAP/MANISTEE CO - MANISTEE (CSFP) 265 FIRST STREET MANISTEE MI 49660	38-1814318	501C3		103,540	FMV	FOOD	FIGHT HUNGER
(9)	FIVECAP/MASON CO - SCOTTVILLE (CSFP) 44 E JOHNSON RD SCOTTVILLE MI 49454	38-1814318	501C3		103,725	FMV	FOOD	FIGHT HUNGER

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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(1)	FIVECAP/NEWAYGO CO - WHITE CLOUD (C) 434 NORTH EVERGREEN WHITE CLOUD MI 49349	38-1814318	501C3		129,268	FMV	FOOD	FIGHT HUNGER
(2)	FLAT RIVER OUTREACH MINISTRIES 11535 FULTON STREET EAST LOWELL MI 49331	38-3402457	501C3		31,844	FMV	FOOD	FIGHT HUNGER
(3)	FLAT RIVER OUTREACH MINISTRIES (M) 11535 FULTON STREET EAST LOWELL MI 49331	38-3402457	501C3		94,114	FMV	FOOD	FIGHT HUNGER
(4)	FOOD BANK OF EASTERN MICHIGAN 2300 LAPEER ROAD FLINT MI 48503-4221	38-2379678	501C3		373,431	FMV	FOOD	FIGHT HUNGER
(5)	FOOD RESCUE OF NW MI A PROGRAM OF G 2889 AERO PARK DRIVE TRAVERSE CITY MI 49684	38-1976268	501C3		1,223,553	FMV	FOOD	FIGHT HUNGER
(6)	FORGOTTEN HARVEST 21800 GREENFIELD RD. OAK PARK MI 48237	38-2926476	501C3		265,985	FMV	FOOD	FIGHT HUNGER
(7)	FOUNTAIN UNITED METHODIST CHURCH (M) 5043 N FOSTER STREET FOUNTAIN MI 49410	81-4673437	501C3		86,939	FMV	FOOD	FIGHT HUNGER
(8)	FREMONT UNITED METHODIST CHURCH (M) 351 BUTTERFIELD STREET FREMONT MI 49412	31-1813333	501C3		126,831	FMV	FOOD	FIGHT HUNGER
(9)	FRESH WIND CHRISTIAN COMMUNITY FOOD 18201 HONOR HWY INTERLOCHEN MI 49643		501C3		29,670	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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OMB No. 1545-0047

2023

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Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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

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(1)	FRIENDS OF DECATUR HUMAN SERVICES 102 S. PHELPS DECATUR MI 49045	38-2649293	501C3		16,251	FMV	FOOD	FIGHT HUNGER
(2)	FROST SEVENTH DAY ADVENTIST CHURCH 977 NORTH NEFF ROAD STANTON MI 48888	52-0643036	501C3		21,278	FMV	FOOD	FIGHT HUNGER
(3)	FULLER AVENUE CRC 1239 FULLER AVENUE SE GRAND RAPIDS MI 49506	38-2051351	501C3		26,175	FMV	FOOD	FIGHT HUNGER
(4)	GALIEN & OLIVE BRANCH PARISH UMC (M) PO BOX 266 GALIEN MI 49113	31-1813333	501C3		74,837	FMV	FOOD	FIGHT HUNGER
(5)	GEORGETOWN CRC (M) 6475 40TH AVENUE HUDSONVILLE MI 49426	38-2051351	501C3		94,425	FMV	FOOD	FIGHT HUNGER
(6)	GEORGETOWN UMC (M) 2766 BALDWIN STREET JENISON MI 49428	31-1813333	501C3		36,339	FMV	FOOD	FIGHT HUNGER
(7)	GEORGETOWN UMC FOOD PANTRY 2766 BALDWIN STREET JENISON MI 49428	31-1813333	501C3		8,115	FMV	FOOD	FIGHT HUNGER
(8)	GLADSTONE-RAPID RIVER BACKPACK/CF F 2100 HW 35 GLADSTONE MI 49837	38-3227080	501C3		14,011	FMV	FOOD	FIGHT HUNGER
(9)	GLEANERS COMMUNITY FOOD BANK 2131 BEAUFAIT STREET DETROIT MI 48207	38-2156255	501C3		330,691	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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FEEDING AMERICA WEST MICHIGAN

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(1)	GOBLES-KENDALL MINISTERIAL ASSOC/G 210 E EXCHANGE ST GOBLES MI 49055	31-1813333	501C3		26,547	FMV	FOOD	FIGHT HUNGER
(2)	GOD'S ABUNDANT PANTRY/PIONEER MEMOR 4519 INTERNATIONAL COURT BERRIEN SPRINGS MI 49104	52-0643036	501C3		24,660	FMV	FOOD	FIGHT HUNGER
(3)	GOD'S HELPING HANDS OF MECOSTA 8760 50TH AVENUE REMUS MI 49340	38-3358125	501C3		36,550	FMV	FOOD	FIGHT HUNGER
(4)	GOD'S KITCHEN - CAPITOL LUNCH/CCWM 303 DIVISION AVENUE SOUTH GRAND RAPIDS MI 49503	53-0196617	501C3		24,415	FMV	FOOD	FIGHT HUNGER
(5)	GOGEBIC-ONTONAGON CAA FOOD PANTRY 100 S. MILL ST BESSEMER MI 49911	38-1802755	501C3		5,084	FMV	FOOD	FIGHT HUNGER
(6)	GOOD HANDS PLAINWELL 684 STARR ROAD PLAINWELL MI 49080	45-5460079	501C3		17,100	FMV	FOOD	FIGHT HUNGER
(7)	GOOD NEIGHBOR FOOD PANTRY/LAKE CITY 5804 W. HOUGHTON LAKE RD. LAKE CITY MI 49651	38-2329622	501C3		79,839	FMV	FOOD	FIGHT HUNGER
(8)	GOOD NEIGHBOR SERVICES/A NEIGHBOR'S 200 DEER STREET MANISTIQUE MI 49854	38-3426777	501C3		43,872	FMV	FOOD	FIGHT HUNGER
(9)	GOOD NEIGHBORS SERVICES (M) 7870 US-2 MANISTIQUE MI 49854	38-3426777	501C3		189,194	FMV	FOOD	FIGHT HUNGER

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Department of the Treasury
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Name of the organization

Employer identification number
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FEEDING AMERICA WEST MICHIGAN

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(1)	GRACE BIBLE CHURCH/ IFCA (M) 3715 WILSON AVE SW GRANDVILLE MI 49418	36-2307744	501C3		31,524 FMV	FMV	FOOD	FIGHT HUNGER
(2)	GRACE COVENANT CHURCH (M) 316 JASPER ST. IRON RIVER MI 49935	36-2167730	501C3		124,005 FMV	FMV	FOOD	FIGHT HUNGER
(3)	GRACE CRC 100 BUCKLEY STREET SE GRAND RAPIDS MI 49503	38-2051351	501C3		28,842 FMV	FMV	FOOD	FIGHT HUNGER
(4)	GRACE LUTHERAN CHURCH (M) 8636 S M-37 BALDWIN MI 49304	43-0658188	501C3		102,309 FMV	FMV	FOOD	FIGHT HUNGER
(5)	GRACE LUTHERAN CHURCH (M) 558 W STATE HWY M-35 GWINN MI 49841	36-3514629	501C3		110,596 FMV	FMV	FOOD	FIGHT HUNGER
(6)	GRANDVILLE SENIOR NEIGHBORS FOOD PA 3380 DIVISION SW GRANDVILLE MI 49418	23-7195491	501C3		7,301 FMV	FMV	FOOD	FIGHT HUNGER
(7)	GREAT LAKES RECOVERY CENTER ADULT 241 WRIGHT STREET MARQUETTE MI 49855	38-2453316	501C3		9,535 FMV	FMV	FOOD	FIGHT HUNGER
(8)	GREAT LAKES RECOVERY CENTERS NEW HO 1416 W. EASTERDAY AVENUE SAULT STE MARIE MI 49783	38-2453316	501C3		29,912 FMV	FMV	FOOD	FIGHT HUNGER
(9)	GREAT LAKES RECOVERY CENTERS NEW HOP 2655 ASHMUN STREET SAULT STE MARIE MI 49783	38-2453316	501C3		11,525 FMV	FMV	FOOD	FIGHT HUNGER

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Department of the Treasury
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FEEDING AMERICA WEST MICHIGAN

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(1)	GREATER LANSING FOOD BANK P. O. BOX 16224 LANSING MI 48901	38-2424756	501C3		64,638	FMV	FOOD	FIGHT HUNGER
(2)	GREATER MARINETTE-MENOMINEE YMCA (M) 1600 WEST DRIVE MENOMINEE MI 49858	38-6119445	501C3		123,181	FMV	FOOD	FIGHT HUNGER
(3)	GUARDIANSHIP AND FIDUCIARY SERVICES 895 MICHIGAN AVE BALDWIN MI 49304	88-2977960	501C3		34,433	FMV	FOOD	FIGHT HUNGER
(4)	HAND2HAND CENTRAL 306 CHICAGO DR. JENISON MI 49428	27-2973348	501C3		36,782	FMV	FOOD	FIGHT HUNGER
(5)	HAND2HAND/CHRIST MEMORIAL CHURCH RC 595 GRAAFSCHAP ROAD HOLLAND MI 49423	13-3204416	501C3		67,213	FMV	FOOD	FIGHT HUNGER
(6)	HAND2HAND/CORINTH REFORMED CHURCH 129 100TH STREET SE BYRON CENTER MI 49315	86-1960271	501C3		13,467	FMV	FOOD	FIGHT HUNGER
(7)	HAND2HAND/CORNERSTONE UMC 2730 56TH ST. SW WYOMING MI 49418	31-1813333	501C3		26,436	FMV	FOOD	FIGHT HUNGER
(8)	HAND2HAND/FELLOWSHIP REFORMED CHURCH 6610 36TH AVE HUDSONVILLE MI 49426	86-1960271	501C3		5,873	FMV	FOOD	FIGHT HUNGER
(9)	HAND2HAND/FIRST REFORMED CHURCH GRA 301 WASHINGTON AVE GRAND HAVEN MI 49417	13-3204416	501C3		8,233	FMV	FOOD	FIGHT HUNGER

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

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

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

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number

FEEDING AMERICA WEST MICHIGAN
38-2439659

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	HAND2HAND/HIGH POINTE COMMUNITY CHURCH 2975 76TH ST. BYRON CENTER MI 49315	44-0552034	501C3		10,116	FMV	FOOD	FIGHT HUNGER
(2)	HAND2HAND/HOLTON COMMUNITY CENTER 6500 4TH ST. HOLTON MI 49425	26-4268519	501C3		6,837	FMV	FOOD	FIGHT HUNGER
(3)	HAND2HAND/INSPIRE CHURCH 918 GARDEN AVE FREMONT MI 49412	35-1148762	501C3		10,608	FMV	FOOD	FIGHT HUNGER
(4)	HAND2HAND/JOURNEY CHURCH WCC 9185 CHERRY VALLEY CALEDONIA MI 49316	35-1148762	501C3		10,813	FMV	FOOD	FIGHT HUNGER
(5)	HAND2HAND/KENTWOOD COMMUNITY CHURCH 1200 60TH STREET SE KENTWOOD MI 49508	35-1148762	501C3		21,468	FMV	FOOD	FIGHT HUNGER
(6)	HAND2HAND/LAKETON BETHEL CHURCH 1568 W. GILES ROAD MUSKEGON MI 49445	38-6071384	501C3		12,461	FMV	FOOD	FIGHT HUNGER
(7)	HAND2HAND/NEW HOPE CHURCH ROCKFORD 6175 NORTHLAND DR NE ROCKFORD MI 49341		501C3		5,790	FMV	FOOD	FIGHT HUNGER
(8)	HAND2HAND/ROCKFORD/SOUTH HARBOR-GSR 5100 BELDING RD NE ROCKFORD MI 49341	13-3204416	501C3		11,847	FMV	FOOD	FIGHT HUNGER
(9)	HAND2HAND/THE STORY CHURCH/THE ZERO 475 6 MILE RD NW COMSTOCK PARK MI 49321	35-1148762	501C3		5,228	FMV	FOOD	FIGHT HUNGER

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

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	HAND2HAND/UNITY REFORMED CHURCH 1521 PORTER RD NORTON SHORES MI 49441	13-3204416	501C3		10,499	FMV	FOOD	FIGHT HUNGER
(2)	HAND2HAND/WYOMING HARBOR/FAIR HAVEN 3330 BURLINGAME AVE SW WYOMING MI 49509	13-3204416	501C3		6,355	FMV	FOOD	FIGHT HUNGER
(3)	HANDS IN MISSION - FEEDING WALKER K 4575 REMEMBRANCE ROAD NW GRAND RAPIDS MI 49534	20-4273471	501C3		9,546	FMV	FOOD	FIGHT HUNGER
(4)	HARBERT COMMUNITY CHURCH (M) 6444 HARBERT RD SAWYER MI 49125	36-2167730	501C3		78,541	FMV	FOOD	FIGHT HUNGER
(5)	HARBOR OF HOPE/PIONEER MEMORIAL CHU 769 PIPESTONE ST. BENTON HARBOR MI 49022	52-0643036	501C3		23,682	FMV	FOOD	FIGHT HUNGER
(6)	HARVEST STAND MINISTRIES PANTRY 100 SOUTH PINE STREET, SUITE 100 ZEELAND MI 49464	32-0069107	501C3		24,627	FMV	FOOD	FIGHT HUNGER
(7)	HELPING HANDS FOOD PANTRY 1105 SOUTH ENSLEY HOWARD CITY MI 49329	38-2909148	501C3		40,671	FMV	FOOD	FIGHT HUNGER
(8)	HELPING HANDS FOOD PANTRY/ROTHBURY 2500 W. WINSTON ROAD ROTHBURY MI 49452	38-2343626	501C3		18,919	FMV	FOOD	FIGHT HUNGER
(9)	HELPING HANDS FOUNDATION 133 NAPIER AVE. BENTON HARBOR MI 49022	36-4513441	501C3		20,258	FMV	FOOD	FIGHT HUNGER

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	HELPING HANDS OF CASS COUNTY 130 S. BROADWAY CASSOPOLIS MI 49031	38-2663969	501C3		8,695 FMV	FMV	FOOD	FIGHT HUNGER
(2)	HELPING HANDS OF CASS COUNTY (M) 130 S. BROADWAY CASSOPOLIS MI 49031	38-2663969	501C3		45,392 FMV	FMV	FOOD	FIGHT HUNGER
(3)	HESPERIA COMMUNITY FOOD PANTRY/ 45 HOSKINS HESPERIA MI 49421	38-3598027	501C3		45,142 FMV	FMV	FOOD	FIGHT HUNGER
(4)	HISPANIC CENTER OF WESTERN MI (M) 1204 GRANDVILLE AVE. SW GRAND RAPIDS MI 49503	38-2265825	501C3		181,960 FMV	FMV	FOOD	FIGHT HUNGER
(5)	HOLLAND SDA CHURCH (M) 11385 OTTOGAN STREET HOLLAND MI 49423	52-0643036	501C3		83,141 FMV	FMV	FOOD	FIGHT HUNGER
(6)	HOLY CROSS LUTHERAN (M) 1481 BALDWIN JENISON MI 49428	43-0658188	501C3		100,802 FMV	FMV	FOOD	FIGHT HUNGER
(7)	HOLY TRINITY EPISCOPAL CHURCH (M) 221 WEST B ST. IRON MOUNTAIN MI 49801		501C3		102,474 FMV	FMV	FOOD	FIGHT HUNGER
(8)	HOPE COMMUNITY CACG CHURCH (M) 2390 LAKE STREET NILES MI 49120	35-6064030	501C3		89,479 FMV	FMV	FOOD	FIGHT HUNGER
(9)	HOPE FREE LUTHERAN CHURCH 795 NORTH LAKE DRIVE ISHPEMING MI 49849	41-0884943	501C3		6,873 FMV	FMV	FOOD	FIGHT HUNGER

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

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

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DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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OMB No. 1545-0047

2023

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Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	HOPE RESOURCES 262 NORTH PAW PAW STREET COLOMA MI 49038	81-4103453	501C3		43,610	FMV	FOOD	FIGHT HUNGER
(2)	HOPE WITHIN FOOD PANTRY/LAKEFIELD B 24230 COUNTY ROAD 98 MCMILLAN MI 49853		501C3		12,863	FMV	FOOD	FIGHT HUNGER
(3)	HUDSONVILLE CONGREGATIONAL UCC (M) 4950 32ND AVENUE HUDSONVILLE MI 49426	38-2456087	501C3		24,131	FMV	FOOD	FIGHT HUNGER
(4)	IDEAL PARK CRC (M) 320 56TH STREET SW GRAND RAPIDS MI 49548	38-2051351	501C3		132,244	FMV	FOOD	FIGHT HUNGER
(5)	ILLUMINATE CHURCH/GLRCWCC 83 E. TUTTLE IONIA MI 48846	35-1148762	501C3		62,696	FMV	FOOD	FIGHT HUNGER
(6)	IM KIDS 3RD MEAL/MI CENTER FOR 21ST 10260 SOUTH SHERIDAN ROAD FENWICK MI 48834	27-2325075	501C3		57,037	FMV	FOOD	FIGHT HUNGER
(7)	IRONS SEVENTH DAY ADVENTIST 5071 10 1/2 MILE RD IRONS MI 49644	52-0643036	501C3		12,488	FMV	FOOD	FIGHT HUNGER
(8)	JENISON BIBLE CHURCH 6360 14TH AVE. HUDSONVILLE MI 49426		501C3		34,326	FMV	FOOD	FIGHT HUNGER
(9)	K.A.I.R. 324 S. CEDAR STREET KALKASKA MI 49646	38-3240697	501C3		54,970	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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(1)	KALKASKA COMM ON AGING/NW MI CAA 303 S. CORAL STREET KALKASKA MI 49646	38-2027389	501C3		14,155 FMV	FMV	FOOD	FIGHT HUNGER
(2)	KANDU ISLAND DROP IN CENTER & THIRD 3003 GARFIELD RD SUITE B TRAVERSE CITY MI 49686	81-0616267	501C3		12,670 FMV	FMV	FOOD	FIGHT HUNGER
(3)	KENTWOOD CHRISTIAN CHURCH (M) 5841 KALAMAZOO AVE. SE KENTWOOD MI 49508	38-2099777	501C3		104,584 FMV	FMV	FOOD	FIGHT HUNGER
(4)	KIDS FOOD BASKET 1300 PLYMOUTH AVE NE GRAND RAPIDS MI 49505	04-3760991	501C3		231,875 FMV	FMV	FOOD	FIGHT HUNGER
(5)	KIDS FOOD BASKET - HOLLAND 652 HASTINGS AVE HOLLAND MI 49423	04-3760991	501C3		13,840 FMV	FMV	FOOD	FIGHT HUNGER
(6)	KIDS FOOD BASKET - MUSKEGON @ CENTR 1537 SOUTH GETTY ST MUSKEGON MI 49442	04-3760991	501C3		23,910 FMV	FMV	FOOD	FIGHT HUNGER
(7)	KINGS STORE HOUSE FOOD PANTRY/FIRST 125 STIMSON STREET CADILLAC MI 49601	13-5563018	501C3		32,735 FMV	FMV	FOOD	FIGHT HUNGER
(8)	LADDERS OF HOPE USA INC. 717 E. MAIN STREET FENNIVILLE MI 49408	38-3863090	501C3		25,940 FMV	FMV	FOOD	FIGHT HUNGER
(9)	LAKE CITY FREE METHODIST/NEW LIFE F 128 CANAL ST. LAKE CITY MI 49651	35-0877568	501C3		8,337 FMV	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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2023

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Employer identification number

38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	LAKESHORE FOOD CLUB 920 E TINKHAM AVE LUDINGTON MI 49431	81-4673437	501C3		196,493	FMV	FOOD	FIGHT HUNGER
(2)	LAKESHORE FOOD CLUB 920 E TINKHAM AVE LUDINGTON MI 49431	81-4673437	501C3		94,936	FMV	FOOD	FIGHT HUNGER
(3)	LAKETON BETHEL REFORMED (M) 1568 GILES ROAD MUSKEGON MI 49445	13-3204416	501C3		204,847	FMV	FOOD	FIGHT HUNGER
(4)	LAKEVIEW CHURCH OF THE BRETHREN FOOD 14049 NORTH COATES HWY BRETHREN MI 49619	36-2167026	501C3		13,818	FMV	FOOD	FIGHT HUNGER
(5)	LAKEVIEW MINISTERIAL ASSOC (M) PO BOX 272 LAKEVIEW MI 48850	84-4805645	501C3		40,696	FMV	FOOD	FIGHT HUNGER
(6)	LAKEWOOD COMMUNITY COUNCIL (H) 912 FOURTH AVENUE LAKE ODESSA MI 48849	38-2318134	501C3		6,806	FMV	FOOD	FIGHT HUNGER
(7)	LAWRENCE UNITED METHODIST CHURCH 122 SOUTH EXCHANGE ST. LAWRENCE MI 49064	31-1813333	501C3		10,251	FMV	FOOD	FIGHT HUNGER
(8)	LEBANON LUTHERAN CHURCH/WHITE LAKE 1101 S MEARS AVENUE WHITEHALL MI 49461	41-1568278	501C3		92,161	FMV	FOOD	FIGHT HUNGER
(9)	LEELANAU CHRISTIAN NEIGHBORS 7322 E DUCK LAKE RD LAKE LEELANAU MI 49653	38-3345824	501C3		38,120	FMV	FOOD	FIGHT HUNGER

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Department of the Treasury
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FEEDING AMERICA WEST MICHIGAN

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(1)	LIFEHOUSE ASSEMBLY OF GOD 1120 WEST DIVISION CADILLAC MI 49601	44-0577787	501C3		32,859	FMV	FOOD	FIGHT HUNGER
(2)	LIGHTHOUSE CC (M) 7624 LAKE MICHIGAN DRIVE ALLENDALE MI 49401	45-5142128	501C3		73,217	FMV	FOOD	FIGHT HUNGER
(3)	LIGHTHOUSE CHURCH OF GOD (M) 2770 LAFRANIER RD TRAVERSE CITY MI 49686	62-0484177	501C3		53,950	FMV	FOOD	FIGHT HUNGER
(4)	LINC UP (M) 1167 MADISON AVE. SE GRAND RAPIDS MI 49507	38-3537915	501C3		39,752	FMV	FOOD	FIGHT HUNGER
(5)	LIVING LIGHT CHRISTIAN CHURCH/FAMILI 7700 W BLUE ROAD LAKE CITY MI 49651		501C3		150,268	FMV	FOOD	FIGHT HUNGER
(6)	LIVING LIGHT CHRISTIAN CHURCH/FAMILI 7700 W BLUE ROAD LAKE CITY MI 49651		501C3		64,025	FMV	FOOD	FIGHT HUNGER
(7)	LIVING WATER FOOD PANTRY/WATERVLIET 7734 PAW PAW AVENUE WATERVLIET MI 49098	20-0690370	501C3		20,933	FMV	FOOD	FIGHT HUNGER
(8)	LIVING WATER FOOD PANTRY/WATERVLIET 7734 PAW PAW AVENUE WATERVLIET MI 49098	20-0690370	501C3		34,446	FMV	FOOD	FIGHT HUNGER
(9)	LIVING WATERS COMMUNITY CHURCH (M) 5458 124TH AVE FENNIVILLE MI 49408		501C3		81,965	FMV	FOOD	FIGHT HUNGER

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(1)	LOAVES & FISHES FOOD PANTRY AT HOLY 1200 POST DRIVE NE BELMONT MI 49306	31-1629166	501C3		6,556 FMV	FMV	FOOD	FIGHT HUNGER
(2)	LOAVES OF GRACE FP/HARBOR OF GRACE 1132 W SOUTHERN AVE. MUSKEGON MI 49441	41-1568278	501C3		49,086 FMV	FMV	FOOD	FIGHT HUNGER
(3)	LOCKER LUNCH 1133 HWY M-73 IRON RIVER MI 49935	46-3142141	501C3		13,091 FMV	FMV	FOOD	FIGHT HUNGER
(4)	LOVE IN ACTION - TRI-CITIES (M) 326 N FERRY STREET GRAND HAVEN MI 49417	38-2856482	501C3		296,578 FMV	FMV	FOOD	FIGHT HUNGER
(5)	LOVE IN ACTION OF THE TRI CITIES 1106 FULTON ST GRAND HAVEN MI 49417	38-2856482	501C3		180,514 FMV	FMV	FOOD	FIGHT HUNGER
(6)	LOVE IN ACTION TRI CITIES (M) 3520 E PONTALUNA ROAD FRUITPORT MI 49415	38-2856482	501C3		17,432 FMV	FMV	FOOD	FIGHT HUNGER
(7)	LOVE INC - ALLENDALE 11620 60TH STREET ALLENDALE MI 49426-9533	38-2623774	501C3		13,089 FMV	FMV	FOOD	FIGHT HUNGER
(8)	LOVE INC - NEWAYGO COUNTY 11 W. 96TH STREET GRANT MI 49327	38-2871534	501C3		297,361 FMV	FMV	FOOD	FIGHT HUNGER
(9)	LOVE INC OF WEST MACKINAC COUNTY W 14019 MELVILLE STREET ENGADINE MI 49827	46-4566509	501C3		12,218 FMV	FMV	FOOD	FIGHT HUNGER

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

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

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

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	LUTHER BIBLE CHAPEL 1018 230TH AVE. NEWAYGO MI 49337	38-2232340	501C3		62,987	FMV	FOOD	FIGHT HUNGER
(2)	LUTHER LIONS CLUB (M) 1003 N STATE ROAD LUTHER MI 49656	38-2365030	501C3		120,370	FMV	FOOD	FIGHT HUNGER
(3)	M-46 TABERNACLE PANTRY/PENTECOSTAL 11098 M-46 HIGHWAY RIVERDALE MI 48877	44-0612817	501C3		22,431	FMV	FOOD	FIGHT HUNGER
(4)	MAMRELUND EVANGELICAL LUTHERAN CHUR 4085 LUTHERAN CHURCH RD. KENT CITY MI 49330	41-1568278	501C3		23,395	FMV	FOOD	FIGHT HUNGER
(5)	MANISTEE COUNTY COUNCIL ON AGING 260 SAINT MARYS PARKWAY MANISTEE MI 49660	38-1949993	501C3		21,911	FMV	FOOD	FIGHT HUNGER
(6)	MANISTEE FRIENDSHIP SOCIETY 50 FILER ST. MANISTEE MI 49660	38-3636893	501C3		9,365	FMV	FOOD	FIGHT HUNGER
(7)	MANISTEE FRIENDSHIP SOCIETY (M) 1475 US-31 N MANISTEE MI 49660	38-3636893	501C3		219,575	FMV	FOOD	FIGHT HUNGER
(8)	MANNA FOOD PROJECT, INC (EMMET) 8791 MCBRIDE PARK DR. HARBOR SPRINGS MI 49740-9697	38-2764533	501C3		1,112,884	FMV	FOOD	FIGHT HUNGER
(9)	MANNA PANTRY OF BIG RAPIDS 315 SOUTH STATE ST., SUITE B BIG RAPIDS MI 49307	46-2870828	501C3		100,450	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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OMB No. 1545-0047

2023

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Inspection**

Name of the organization

Employer identification number

FEEDING AMERICA WEST MICHIGAN
38-2439659

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

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(1)	MANNA PANTRY OF BIG RAPIDS (M) 315 SOUTH STATE ST., SUITE B BIG RAPIDS MI 49307	46-2870828	501C3		141,010	FMV	FOOD	FIGHT HUNGER
(2)	MANTON AREA RETIREES CLUB 302 W MAIN STREET MANTON MI 49663	23-7187079	501C3		16,688	FMV	FOOD	FIGHT HUNGER
(3)	MANTON AREA RETIREES CLUB 302 W MAIN STREET MANTON MI 49663	23-7187079	501C3		9,411	FMV	FOOD	FIGHT HUNGER
(4)	MANTON FOOD PANTRY/MANTON FREE METH 201 N MICHIGAN AVE. MANTON MI 49663	35-0877568	501C3		8,586	FMV	FOOD	FIGHT HUNGER
(5)	MARANATHA ASSEMBLY OF GOD 917 PYLE DRIVE KINGSFORD MI 49802	44-0577787	501C3		19,157	FMV	FOOD	FIGHT HUNGER
(6)	MARCELLUS COMMUNITY FOOD PANTRY 175 S CENTRE STREET MARCELLUS MI 49067	26-4737267	501C3		33,914	FMV	FOOD	FIGHT HUNGER
(7)	MARCELLUS COMMUNITY FOOD PANTRY (M) 197 WEST MAIN MARCELLUS MI 49067	26-4737267	501C3		45,762	FMV	FOOD	FIGHT HUNGER
(8)	MARCY'S PANTRY WEST 17455 MAIN STREET CURTIS MI 49820	84-4452557	501C3		134,045	FMV	FOOD	FIGHT HUNGER
(9)	MARILLA FOOD PANTRY/CHURCH OF THE B 9991 MARILLA ROAD COPEMISH MI 49625	52-0643036	501C3		15,143	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

2023

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Employer identification number

FEEDING AMERICA WEST MICHIGAN
38-2439659

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	MARION COMMUNITY FOOD PANTRY COC 112 N CLARK STREET MARION MI 49665	44-0552038	501C3		26,230	FMV	FOOD	FIGHT HUNGER
(2)	MARION COMMUNITY MOBILE PANTRY/COC 530 E MAIN STREET MARION MI 49665	44-0552038	501C3		130,556	FMV	FOOD	FIGHT HUNGER
(3)	MARTIN RESOURCE CENTER 1445 S. 10TH STREET MARTIN MI 49070	38-3467198	501C3		23,770	FMV	FOOD	FIGHT HUNGER
(4)	MATTAWAN AREA PANTRY 56720 MURRAY ST. MATTAWAN MI 49071	30-0666170	501C3		136,935	FMV	FOOD	FIGHT HUNGER
(5)	MATTAWAN AREA PANTRY (CP DIRECT) 56720 MURRAY ST. MATTAWAN MI 49071	30-0666170	501C3		61,453	FMV	FOOD	FIGHT HUNGER
(6)	MATTHEW'S HOUSE MINISTRY 766 7TH STREET NW GRAND RAPIDS MI 49504	80-0268721	501C3		141,156	FMV	FOOD	FIGHT HUNGER
(7)	MCCLEES CLINIC/MERCY HEALTH PARTNER 1675 LEAHY ST. MUSKEGON MI 49442	38-2589966	501C3		19,438	FMV	FOOD	FIGHT HUNGER
(8)	MEALS ON WHEELS WESTERN MICHIGAN - 1954 FULLER AVENUE NE GRAND RAPIDS MI 49505	38-2535537	501C3		161,046	FMV	FOOD	FIGHT HUNGER
(9)	MEALS ON WHEELS WESTERN MICHIGAN - 10075 NORTHLAND DR. NE ROCKFORD MI 49341	38-2535537	501C3		155,888	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
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Department of the Treasury
Internal Revenue Service

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

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OMB No. 1545-0047

2023

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Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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(1)	MEALS ON WHEELS WESTERN MICHIGAN - 2900 WILSON AVE SW, SUITE 500 GRANDVILLE MI 49418	38-2535537	501C3		63,456 FMV	FMV	FOOD	FIGHT HUNGER
(2)	MEL TROTTER MINISTRIES 225 COMMERCE AVE SW GRAND RAPIDS MI 49503	38-1410467	501C3		29,323 FMV	FMV	FOOD	FIGHT HUNGER
(3)	MEN & WOMEN OF CHARACTER/MMC 2401 8TH STREET MUSKEGON HEIGHTS MI 49444	30-0039346	501C3		5,925 FMV	FMV	FOOD	FIGHT HUNGER
(4)	MID-COUNTY MINISTERIUM FOOD PANTRY 516 W. SAMUEL ST STEPHENSON MI 49887	46-4185622	501C3		18,611 FMV	FMV	FOOD	FIGHT HUNGER
(5)	MISSIONARY CHURCH OF CHRIST INC. (M) 200 GRIGGS STREET SW GRAND RAPIDS MI 49507	38-1967844	501C3		84,304 FMV	FMV	FOOD	FIGHT HUNGER
(6)	MONTABELLA MINISTERIAL ASSOC. / FAI 833 S. FIRST STREET EDMORE MI 48829	31-1813333	501C3		22,228 FMV	FMV	FOOD	FIGHT HUNGER
(7)	MOORESTOWN-STITTSVILLE UNITED METHOD 4509 E MOORESTOWN ROAD LAKE CITY MI 49651	31-1813333	501C3		26,081 FMV	FMV	FOOD	FIGHT HUNGER
(8)	MORLEY COMMUNITY CENTER (M) 151 E. 7TH ST MORLEY MI 49336	83-0927993	501C3		49,862 FMV	FMV	FOOD	FIGHT HUNGER
(9)	MOUNT HOPE CHURCH / AOG (M) 845 IONIA ROAD PORTLAND MI 48875	38-2974010	501C3		32,161 FMV	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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OMB No. 1545-0047

2023

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FEEDING AMERICA WEST MICHIGAN
38-2439659

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(1)	MPACKS MUNISING BACKPACK PROGRAM/413 MAPLE STREET MUNISING MI 49862	46-0871458	501C3		5,239	FMV	FOOD	FIGHT HUNGER
(2)	MT. CALVARY MISSIONARY BAPTIST CHURCH 601 FERRY ST. NILES MI 49120	38-2676524	501C3		23,264	FMV	FOOD	FIGHT HUNGER
(3)	MT. ZION MISSIONARY BAPTIST CHURCH 100 MILLER STREET DOWAGIAC MI 49047		501C3		6,183	FMV	FOOD	FIGHT HUNGER
(4)	MULTITUDE MINISTRIES, INC. (H) 2018 CALVIN AVE SE GRAND RAPIDS MI 49507	46-2529623	501C3		41,026	FMV	FOOD	FIGHT HUNGER
(5)	MUSKEGON COUNTY COOPERATING CHURCHES 120 W. APPLE AVE MUSKEGON MI 49440	38-2746797	501C3		881,018	FMV	FOOD	FIGHT HUNGER
(6)	NEIGHBOR TO NEIGHBOR/GCSDA 9147 US HWY 31 BERRIEN SPRINGS MI 49103	52-0643036	501C3		24,638	FMV	FOOD	FIGHT HUNGER
(7)	NEIGHBOR TO NEIGHBOR/GCSDA (M) 9147 US 31 BERRIEN SPRINGS MI 49103	52-0643036	501C3		37,989	FMV	FOOD	FIGHT HUNGER
(8)	NEW BEGINNINGS CHURCH/ NBCFF 302 WEST MAIN STREET EDMORE MI 48829	35-2247163	501C3		40,489	FMV	FOOD	FIGHT HUNGER
(9)	NEW FREEDOM CHURCH 6210 MOUNTAIN RD. COLOMA MI 49038		501C3		8,020	FMV	FOOD	FIGHT HUNGER

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Department of the Treasury
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38-2439659

FEEDING AMERICA WEST MICHIGAN

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

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(1)	NEW FREEDOM CHURCH (M) 6210 MOUNTAIN RD. COLOMA MI 49038		501C3		67,391 FMV	FMV	FOOD	FIGHT HUNGER
(2)	NEW HEIGHTS CHRISTIAN COMMUNITY DEV 990 N. EUCLID AVE. BENTON HARBOR MI 49022	81-5017908	501C3		40,393 FMV	FMV	FOOD	FIGHT HUNGER
(3)	NEW HOPE COMMUNITY FOOD PANTRY/CRC 66 CEDAR GROVE DRIVE KINCHELOE MI 49788	38-2051351	501C3		53,595 FMV	FMV	FOOD	FIGHT HUNGER
(4)	NEW HOPE COMMUNITY RCA (M) 244 S. 79TH AVE SHELBY MI 49455	13-3204416	501C3		101,499 FMV	FMV	FOOD	FIGHT HUNGER
(5)	NEW HOPE COMMUNITY RCA PANTRY 244 S. 79TH AVE SHELBY MI 49455	13-3204416	501C3		66,829 FMV	FMV	FOOD	FIGHT HUNGER
(6)	NEW HOPE MISSIONARY BAPTIST CHURCH 130 DELAWARE SW GRAND RAPIDS MI 49507	23-7364078	501C3		23,759 FMV	FMV	FOOD	FIGHT HUNGER
(7)	NEW LIFE FOOD PANTRY COGIC 1072 JEFFERSON AVE. SE GRAND RAPIDS MI 49507	23-7002419	501C3		10,304 FMV	FMV	FOOD	FIGHT HUNGER
(8)	NONPROFIT INNOVATIONS INC. (M) 50 ANTOINE SW GRAND RAPIDS MI 49507	27-0669246	501C3		85,764 FMV	FMV	FOOD	FIGHT HUNGER
(9)	NORTH END COMMUNITY MINISTRY (NECM) 214 SPENCER STREET NE GRAND RAPIDS MI 49505	38-3572938	501C3		71,887 FMV	FMV	FOOD	FIGHT HUNGER

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FEEDING AMERICA WEST MICHIGAN

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(1)	NORTH KENT CONNECT/RCSC 10075 NORTHLAND DR. NE ROCKFORD MI 49341	38-2066893	501C3		29,470	FMV	FOOD	FIGHT HUNGER
(2)	NORTHLAND CHURCH OF CHRIST (M) 9891 S. MASON DRIVE GRANT MI 49327	84-0563716	501C3		101,367	FMV	FOOD	FIGHT HUNGER
(3)	NORTHWEST FOOD PANTRY/TRINITY REFOR 1224 DAVIS AVENUE NW GRAND RAPIDS MI 49504	38-3010758	501C3		37,179	FMV	FOOD	FIGHT HUNGER
(4)	NORWAY COMM FOOD PANTRY-BACKPACK-ME 130 ODILL DRIVE NORWAY MI 49870	31-1813333	501C3		51,702	FMV	FOOD	FIGHT HUNGER
(5)	NORWAY COMMUNITY FOOD PANTRY @ GRAC 130 ODILL DRIVE NORWAY MI 49870	31-1813333	501C3		162,002	FMV	FOOD	FIGHT HUNGER
(6)	NW OSCEOLA FOOD PANTRY 18499 20 MILE TUSTIN MI 49688	38-3056837	501C3		11,463	FMV	FOOD	FIGHT HUNGER
(7)	OAKRIDGE BAPTIST CHURCH 766 OAKRIDGE DR. ST. JOSEPH MI 49085	36-2192827	501C3		28,753	FMV	FOOD	FIGHT HUNGER
(8)	OTHER GRANTS TO ORGANIZATIONS <5000				2,453,438			
(9)	OTTAWA CO/CHURCH OF THE SAVIOR COOP 180 N. 68TH STREET COOPERSVILLE MI 49546		501C3		5,482	FMV	FOOD	FIGHT HUNGER

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(1)	OTTAWA CO/GH SALVATION ARMY (CSFP) 310 N. DESPEIDER STREET GRAND HAVEN MI 49417		501C3		9,747	FMV	FOOD	FIGHT HUNGER
(2)	OTTAWA CO/JEHOVAH JIREH HUDSONVILLE 4055 VANBUREN STREET HUDSONVILLE MI 49426		501C3		7,517	FMV	FOOD	FIGHT HUNGER
(3)	OTTAWA CO/PINEWOOD PLACE APARTMENTS 1500 S. FERRY STREET GRAND HAVEN MI 49417		501C3		5,602	FMV	FOOD	FIGHT HUNGER
(4)	OTTAWA CO/SALVATION ARMY HOLLAND (C) 104 CLOVER STEET HOLLAND MI 49423		501C3		33,523	FMV	FOOD	FIGHT HUNGER
(5)	OUR HOPE ASSOCIATION - LYON ST 324 LYON STREET NE GRAND RAPIDS MI 49503	38-1998209	501C3		11,601	FMV	FOOD	FIGHT HUNGER
(6)	OUR LADY QUEEN OF PEACE 3903 LAKE ST. BRIDGMAN MI 49106	53-0196617	501C3		6,738	FMV	FOOD	FIGHT HUNGER
(7)	PAW PAW SEVENTH-DAY ADVENTIST CHURCH 60409 SOUTH M-40 PAW PAW MI 49079	52-0643036	501C3		72,131	FMV	FOOD	FIGHT HUNGER
(8)	PEACE LUTHERAN CHURCH (M) 1225 12 MILE ROAD NW SPARTA MI 49345	41-1568278	501C3		77,669	FMV	FOOD	FIGHT HUNGER
(9)	PEACE LUTHERAN CHURCH PANTRY 1225 12 MILE ROAD NW SPARTA MI 49345	41-1568278	501C3		40,413	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	PENTWATER AREA MOBILE PANTRY/CENTEN 486 E PARK STREET PENTWATER MI 49449	31-1813333	501C3		87,005	FMV	FOOD	FIGHT HUNGER
(2)	PENTWATER COMMUNITY FOOD PANTRY @ F 101 SOUTH RUSH STREET PENTWATER MI 49449	38-2289867	501C3		13,596	FMV	FOOD	FIGHT HUNGER
(3)	PEOPLE HELPING PEOPLE 943 56TH STREET PULLMAN MI 49450	26-3902533	501C3		8,403	FMV	FOOD	FIGHT HUNGER
(4)	PILGRIM REST MISSIONARY BAPTIST (M) 510 FRANKLIN STREET SE GRAND RAPIDS MI 49507	38-6095426	501C3		55,421	FMV	FOOD	FIGHT HUNGER
(5)	PILGRIM REST MISSIONARY BAPTIST CHU 510 FRANKLIN STREET SE GRAND RAPIDS MI 49507	38-6095426	501C3		9,166	FMV	FOOD	FIGHT HUNGER
(6)	PINE GROVE COMMUNITY CRC (M) 8775 E. 88TH STREET HOWARD CITY MI 49329	38-2051351	501C3		104,738	FMV	FOOD	FIGHT HUNGER
(7)	PINEVIEW HOMES, INC. 8444 OAK ROAD EVART MI 49631	38-1851783	501C3		12,307	FMV	FOOD	FIGHT HUNGER
(8)	PORTLAND COMMUNITY FOOD PANTRY /PCF 310 EAST BRIDGE ST. PORTLAND MI 48875	38-2832191	501C3		33,264	FMV	FOOD	FIGHT HUNGER
(9)	POSITIVE OPTIONS, INC. 710 EASTERN AVE SE GRAND RAPIDS MI 49503	38-3373835	501C3		5,132	FMV	FOOD	FIGHT HUNGER

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

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

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DAA

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(Form 990)**

Department of the Treasury
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OMB No. 1545-0047

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(1)	PROJECT HOPE OF ALLEGAN COUNTY 1808 143RD AVENUE DORR MI 49323	38-3194627	501C3		158,754	FMV	FOOD	FIGHT HUNGER
(2)	PROJECT STARBURST 120 S. STATE STREET BIG RAPIDS MI 49307	38-1988807	501C3		106,470	FMV	FOOD	FIGHT HUNGER
(3)	PROTECTED PAW PROJECT INC 5445 HIPPS HOLLOW ROAD EAU CLAIRE MI 49111	86-2108072	501C3		15,097	FMV	FOOD	FIGHT HUNGER
(4)	PURITAN REFORMED THEOLOGICAL SEMINA 2927 LEONARD ST. NE GRAND RAPIDS MI 49525	20-2394946	501C3		34,083	FMV	FOOD	FIGHT HUNGER
(5)	RAPID CITY AREA FP/TORCH LAKE AOG C 9456 VALLEY ROAD RAPID CITY MI 49676	44-0577787	501C3		5,603	FMV	FOOD	FIGHT HUNGER
(6)	RED PINE BIBLE CHURCH (M) 17195 RED PINE DR. KENT CITY MI 49330		501C3		26,108	FMV	FOOD	FIGHT HUNGER
(7)	RED PROJECT GRAND RAPIDS 401 HALL ST. SE GRAND RAPIDS MI 49507	38-3414580	501C3		14,990	FMV	FOOD	FIGHT HUNGER
(8)	RED PROJECT MUSKEGON 1270 E. LAKETON AVE MUSKEGON MI 49442	38-3414580	501C3		7,685	FMV	FOOD	FIGHT HUNGER
(9)	REDEMER LUTHERAN CHURCH 1896 ROGERS ROAD GRAWN MI 49637	43-0658188	501C3		17,350	FMV	FOOD	FIGHT HUNGER

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Department of the Treasury
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(1)	REED CITY AREA FOOD PANTRY 831 SOUTH CHESTNUT ST REED CITY MI 49677	38-3056454	501C3		87,388	FMV	FOOD	FIGHT HUNGER
(2)	REHOBOTH REFORMED CHURCH MCBAIN/COM 8372 S LUCAS ROAD MCBAIN MI 49657	81-5336674	501C3		147,222	FMV	FOOD	FIGHT HUNGER
(3)	RESTORATION OF THE BREACH 352 EAST AYER ST IRONWOOD MI 49938	31-1367429	501C3		28,703	FMV	FOOD	FIGHT HUNGER
(4)	REVIVE AND THRIVE 1815 HALL ST. SE GRAND RAPIDS MI 49506	90-1015393	501C3		7,647	FMV	FOOD	FIGHT HUNGER
(5)	ROAD TO HOPE 3800 NILES ROAD ST. JOSEPH MI 49085	82-1002663	501C3		26,742	FMV	FOOD	FIGHT HUNGER
(6)	ROSEY'S PANTRY / GODS MERCY SEAT MIN 2706 E DETROIT ROAD NILES MI 49120	06-1830606	501C3		5,484	FMV	FOOD	FIGHT HUNGER
(7)	SALVATION ARMY - ADULT REHAB 1491 S. DIVISION GRAND RAPIDS MI 49507	38-1370971	501C3		215,178	FMV	FOOD	FIGHT HUNGER
(8)	SALVATION ARMY - BENTON HARBOR 233 MICHIGAN ST. BENTON HARBOR MI 49022	38-1370971	501C3		14,968	FMV	FOOD	FIGHT HUNGER
(9)	SALVATION ARMY - CADILLAC 725 WRIGHT ST CADILLAC MI 49601	38-1370971	501C3		68,893	FMV	FOOD	FIGHT HUNGER

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(1)	SALVATION ARMY - ESCANABA 3001 5TH AVE S. ESCANABA MI 49829	36-2167910	501C3		103,662	FMV	FOOD	FIGHT HUNGER
(2)	SALVATION ARMY - ESCANABA (M) 3001 5TH AVE S. ESCANABA MI 49829	36-2167910	501C3		200,020	FMV	FOOD	FIGHT HUNGER
(3)	SALVATION ARMY - FULTON HTS. CITADEL 1235 E. FULTON STREET GRAND RAPIDS MI 49503	38-1370971	501C3		37,748	FMV	FOOD	FIGHT HUNGER
(4)	SALVATION ARMY - HANCOCK 408 RAVINE ST HANCOCK MI 49930	36-2167910	501C3		6,957	FMV	FOOD	FIGHT HUNGER
(5)	SALVATION ARMY - HOLLAND 104 CLOVER STREET HOLLAND MI 49423	38-1370971	501C3		12,037	FMV	FOOD	FIGHT HUNGER
(6)	SALVATION ARMY - KENT COUNTY SOCIAL 1215 E. FULTON STREET GRAND RAPIDS MI 49503	38-1370971	501C3		142,333	FMV	FOOD	FIGHT HUNGER
(7)	SALVATION ARMY - KINGSFORD 145 ROSELAND STREET KINGSFORD MI 49802	36-2167910	501C3		47,844	FMV	FOOD	FIGHT HUNGER
(8)	SALVATION ARMY - LUDINGTON 1101 S MADISON LUDINGTON MI 49431	38-1370971	501C3		6,454	FMV	FOOD	FIGHT HUNGER
(9)	SALVATION ARMY - MARINETTE/MENOMINEE 1307 8TH AVE MENOMINEE MI 49858	36-2167910	501C3		138,337	FMV	FOOD	FIGHT HUNGER

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OMB No. 1545-0047

2023

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Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

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

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(1)	SALVATION ARMY - MARQUETTE 1009 W. BARAGA AVE. MARQUETTE MI 49855	36-2167910	501C3		46,295 FMV	FMV	FOOD	FIGHT HUNGER
(2)	SALVATION ARMY - MUSKEGON 1221 SHONAT STREET MUSKEGON MI 49442	38-1370971	501C3		24,483 FMV	FMV	FOOD	FIGHT HUNGER
(3)	SALVATION ARMY - SAULT STE MARIE 132 W SPRUCE STREET SAULT STE MARIE MI 49783	38-1370971	501C3		120,322 FMV	FMV	FOOD	FIGHT HUNGER
(4)	SARANAC COMMUNITY CHURCH (M) 125 S. BRIDGE ST. SARANAC MI 48881	36-2167730	501C3		48,577 FMV	FMV	FOOD	FIGHT HUNGER
(5)	SARANAC COMMUNITY CHURCH FOOD PANTRY 125 S. BRIDGE STREET SARANAC MI 48881	36-2167730	501C3		10,740 FMV	FMV	FOOD	FIGHT HUNGER
(6)	SCS - 22 MILE HOME 2200 22 MILE ROAD NE SAND LAKE MI 49343	38-2882853	501C3		5,093 FMV	FMV	FOOD	FIGHT HUNGER
(7)	SCS - BLYTHEFIELD HOME 3485 ROGUE RIVER ROAD NE BELMONT MI 49306	38-2882853	501C3		18,331 FMV	FMV	FOOD	FIGHT HUNGER
(8)	SCS - KINGDOM HOME 2975 52ND STREET SE KENTWOOD MI 49508	38-2882853	501C3		5,070 FMV	FMV	FOOD	FIGHT HUNGER
(9)	SCS - MADISON HOME 5993 MADISON AVE KENTWOOD MI 49301	38-2882853	501C3		5,008 FMV	FMV	FOOD	FIGHT HUNGER

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FEEDING AMERICA WEST MICHIGAN

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(1)	SCS - STAUFFER HOME 4661 STAUFFER AVE SE KENTWOOD MI 49508	38-2882853	501C3		10,199	FMV	FOOD	FIGHT HUNGER
(2)	SCS - TERRACE PARK HOME 5901 TERRACE PARK ROCKFORD MI 49341	38-2882853	501C3		6,349	FMV	FOOD	FIGHT HUNGER
(3)	SEARS FOOD PANTRY 5841 50TH AVE SEARS MI 49679	38-3288540	501C3		36,021	FMV	FOOD	FIGHT HUNGER
(4)	SEARS FOOD PANTRY (M) 5841 50TH AVE SEARS MI 49679	38-3288540	501C3		89,594	FMV	FOOD	FIGHT HUNGER
(5)	SECOND BAPTIST BENEVOLENT MINISTERIE 600 DONALD ATKINS DRIVE BENTON HARBOR MI 49022	32-0048628	501C3		54,104	FMV	FOOD	FIGHT HUNGER
(6)	SECOND CHRISTIAN REFORMED CHURCH (M) 600 APACHE DRIVE FREMONT MI 49412	38-2051351	501C3		28,233	FMV	FOOD	FIGHT HUNGER
(7)	SENIOR SERVICES OF VAN BUREN COUNTY 1635 76TH STREET SOUTH HAVEN MI 49090	38-3200638	501C3		32,890	FMV	FOOD	FIGHT HUNGER
(8)	SEVENTH DAY ADVENTIST COMMUNITY SER 2055 4 MILE ROAD NORTH TRAVERSE CITY MI 49686	52-0643036	501C3		6,842	FMV	FOOD	FIGHT HUNGER
(9)	SHAWNEE PARK CHRISTIAN REFORMED (M) 2255 TECUMSEH DRIVE SE GRAND RAPIDS MI 49506	38-2051351	501C3		27,908	FMV	FOOD	FIGHT HUNGER

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38-2439659

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(1)	SHEKINAH REVIVAL MINISTRIES - FAITH 1941 WASHINGTON AVE. HOLLAND MI 49423	73-6109354	501C3		42,085 FMV	FMV	FOOD	FIGHT HUNGER
(2)	SHELBY ROAD BAPTIST CHURCH (M) 4066 W. SHELBY RD. SHELBY MI 49455	38-2239381	501C3		41,010 FMV	FMV	FOOD	FIGHT HUNGER
(3)	SHEPHERDS OF INDEPENDENCE 1400 MORGAN STREET NW GRAND RAPIDS MI 49504	58-2641404	501C3		19,817 FMV	FMV	FOOD	FIGHT HUNGER
(4)	SHERMAN STREET CRC (M) 1000 SHERMAN ST. SE GRAND RAPIDS MI 49506	38-2051351	501C3		77,208 FMV	FMV	FOOD	FIGHT HUNGER
(5)	SHILOH COMMUNITY CHURCH (M) 8197 HETH STREET ORLEANS MI 48865	38-2170276	501C3		93,519 FMV	FMV	FOOD	FIGHT HUNGER
(6)	SHILOH COMMUNITY CHURCH FOOD PANTRY 8197 HETH STREET ORLEANS MI 48865	38-2170276	501C3		10,164 FMV	FMV	FOOD	FIGHT HUNGER
(7)	SILVER CREEK THRIFT STORE (M) 219 SILVER CREEK RD HARVEY MI 49855	47-2568953	501C3		364,794 FMV	FMV	FOOD	FIGHT HUNGER
(8)	SOUTH END COMMUNITY OUTREACH MINIST 1545 BUCHANAN AVE. SW GRAND RAPIDS MI 49507	38-3038706	501C3		104,623 FMV	FMV	FOOD	FIGHT HUNGER
(9)	SOUTH ENSLEY COMMUNITY CHURCH (M) 13600 CYPRESS AVENUE SAND LAKE MI 49343	31-1813333	501C3		33,697 FMV	FMV	FOOD	FIGHT HUNGER

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(1)	SOUTH MICHIGAN FOOD BANK P.O. BOX 408 BATTLE CREEK MI 49016	38-2445918	501C3		6,029	FMV	FOOD	FIGHT HUNGER
(2)	SOUTH ONTONAGON COUNTY FOOD PANTRY 20142 M 28 WEST EWEN MI 49925	38-3385337	501C3		11,307	FMV	FOOD	FIGHT HUNGER
(3)	SOUTHEAST CHURCH OF CHRIST (M) 1915 NELSON SE GRAND RAPIDS MI 49507	38-2994544	501C3		18,655	FMV	FOOD	FIGHT HUNGER
(4)	SPARTA AREA MIGRANT RESOURCE COUNCIL 4085 LUTHERAN CHURCH RD. KENT CITY MI 49330	41-1568278	501C3		26,199	FMV	FOOD	FIGHT HUNGER
(5)	ST. ALPHONSUS (M) 228 CARRIER STREET NE GRAND RAPIDS MI 49505	53-0196617	501C3		77,340	FMV	FOOD	FIGHT HUNGER
(6)	ST. ALPHONSUS FOOD & CLOTHING CENTE 228 CARRIER STREET NE GRAND RAPIDS MI 49505	53-0196617	501C3		102,014	FMV	FOOD	FIGHT HUNGER
(7)	ST. ANN'S LAKE COUNTY SENIOR SERVICE 690 E 9TH STREET BALDWIN MI 49304	53-0196617	501C3		9,527	FMV	FOOD	FIGHT HUNGER
(8)	ST. ANN'S LAKE COUNTY SENIOR SERVICE 690 9TH STREET BALDWIN MI 49304	53-0196617	501C3		102,760	FMV	FOOD	FIGHT HUNGER
(9)	ST. ANTHONY'S CATHOLIC CHAPEL 13421 GREEN STREET GRAND HAVEN MI 49417	53-0196617	501C3		17,772	FMV	FOOD	FIGHT HUNGER

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(1)	ST. AUGUSTINE EPISCOPAL CHURCH 1753 UNION ST. BENTON HARBOR MI 49022	31-1629166	501C3		125,454 FMV	FMV	FOOD	FIGHT HUNGER
(2)	ST. GREGORY'S BREAD OF LIFE FOOD PANTRY 11 WASHINGTON STREET HART MI 49420	53-0196617	501C3		63,750 FMV	FMV	FOOD	FIGHT HUNGER
(3)	ST. IGNACE FOOD PANTRY 250 FERRY LANE ST IGNACE MI 49781	68-0518240	501C3		48,306 FMV	FMV	FOOD	FIGHT HUNGER
(4)	ST. IGNACE FOOD PANTRY (M) 250 FERRY LANE ST IGNACE MI 49781	68-0518240	501C3		105,612 FMV	FMV	FOOD	FIGHT HUNGER
(5)	ST. ISIDORE CATHOLIC CHURCH FOOD PANTRY 625 SPRING AVE NE GRAND RAPIDS MI 49503	53-0196617	501C3		5,150 FMV	FMV	FOOD	FIGHT HUNGER
(6)	ST. JAMES WHITE LAKE GIVING TREE (H) 5149 DOWLING STREET MONTAGUE MI 49437	53-0196617	501C3		11,800 FMV	FMV	FOOD	FIGHT HUNGER
(7)	ST. JOHN VIANNEY CATHOLIC CHURCH (M) 4101 CLYDE PARK AVE SW WYOMING MI 49509	38-1550061	501C3		37,584 FMV	FMV	FOOD	FIGHT HUNGER
(8)	ST. JOHN'S U.C.C. (M) 1934 BRIDGE STREET NW GRAND RAPIDS MI 49504	38-2456087	501C3		107,371 FMV	FMV	FOOD	FIGHT HUNGER
(9)	ST. JOSEPH CATHOLIC CHURCH 157 LUCINDA LANE WATERLIET MI 49098	53-0196617	501C3		9,701 FMV	FMV	FOOD	FIGHT HUNGER

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

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

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

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number

FEEDING AMERICA WEST MICHIGAN
38-2439659

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	ST. JOSEPH CATHOLIC CHURCH FOOD PANTRY 409 SOUTH BRIDGE STREET BELDING MI 48809	53-0196617	501C3		33,692	FMV	FOOD	FIGHT HUNGER
(2)	ST. JOSEPH CHURCH 8380 FIFTH STREET ONEKAMA MI 49675	53-0196617	501C3		23,713	FMV	FOOD	FIGHT HUNGER
(3)	ST. JOSEPH CHURCH (M) 126 EAST ST PEWAMO MI 48873	53-0196617	501C3		172,221	FMV	FOOD	FIGHT HUNGER
(4)	ST. JOSEPH S.D.A. CHURCH 1201 MAIDEN LANE ST. JOSEPH MI 49085-0168	52-0643036	501C3		6,468	FMV	FOOD	FIGHT HUNGER
(5)	ST. LUKE UNIVERSITY PARISH/USCCB 10144 42ND AVENUE GEORGETOWN TWP. MI 49428	53-0196617	501C3		18,182	FMV	FOOD	FIGHT HUNGER
(6)	ST. MARK'S EPISCOPAL CHURCH 134 DIVISION AVE N GRAND RAPIDS MI 49503	38-1456054	501C3		7,183	FMV	FOOD	FIGHT HUNGER
(7)	ST. MARY FOOD PANTRY 423 FIRST STREET N.W. GRAND RAPIDS MI 49504	53-0196617	501C3		11,335	FMV	FOOD	FIGHT HUNGER
(8)	ST. MARY MAGDALEN CHURCH (M) 1253 52ND STREET SE KENTWOOD MI 49508	53-0196617	501C3		162,351	FMV	FOOD	FIGHT HUNGER
(9)	ST. MARY OF THE IMMACULATE CONCEPT 239 W CLAY AVE MUSKEGON MI 49440	53-0196617	501C3		20,358	FMV	FOOD	FIGHT HUNGER

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

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	ST. PATRICK CATHOLIC CHURCH 630 S WEST SILVER LAKE RD TRAVERSE CITY MI 49685	53-0196617	501C3		20,922	FMV	FOOD	FIGHT HUNGER
(2)	ST. PATRICK'S & ST. ANTHONY'S CATHO 920 FULTON STREET GRAND HAVEN MI 49417	53-0196617	501C3		28,979	FMV	FOOD	FIGHT HUNGER
(3)	ST. PAUL LUTHERAN CHURCH 305 W. STATE ST. CASSOPOLIS MI 49031	43-0658188	501C3		10,094	FMV	FOOD	FIGHT HUNGER
(4)	ST. PAUL'S ANGLICAN CHURCH (M) 2560 LAKE MICHIGAN DR. GRAND RAPIDS MI 49504				44,442	FMV	FOOD	FIGHT HUNGER
(5)	ST. VINCENT DE PAUL - GWINN 111 N. PINE ST. GWINN MI 49841	38-1914302	501C3		50,350	FMV	FOOD	FIGHT HUNGER
(6)	ST. VINCENT DE PAUL - IRON MOUNTAIN 117 WEST A STREET IRON MOUNTAIN MI 49801	38-1914302	501C3		14,967	FMV	FOOD	FIGHT HUNGER
(7)	ST. VINCENT DE PAUL - IRON RIVER 313 W GENESEE ST IRON RIVER MI 49935	38-1914302	501C3		31,541	FMV	FOOD	FIGHT HUNGER
(8)	ST. VINCENT DE PAUL - ISHPEMING 322 CLEVELAND AVE. ISHPEMING MI 49849	38-1914302	501C3		62,436	FMV	FOOD	FIGHT HUNGER
(9)	ST. VINCENT DE PAUL - MARQUETTE 2119 PRESQUE ISLE AVE. MARQUETTE MI 49855	38-1914302	501C3		148,024	FMV	FOOD	FIGHT HUNGER

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

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

FEEDING AMERICA WEST MICHIGAN

Employer identification number

38-2439659

Part I General Information on Grants and Assistance

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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(1)	ST. VINCENT DE PAUL - MUNISING 413 MAPLE STREET MUNISING MI 49862	38-1914302	501C3		39,964 FMV	FMV	FOOD	FIGHT HUNGER
(2)	ST. VINCENT DE PAUL - NORWAY 431 MAIN STREET NORWAY MI 49870	38-1914302	501C3		25,918 FMV	FMV	FOOD	FIGHT HUNGER
(3)	ST. VINCENT DE PAUL - REPUBLIC 317 KLOMAN AVENUE REPUBLIC MI 49879	38-1914302	501C3		11,535 FMV	FMV	FOOD	FIGHT HUNGER
(4)	ST. VINCENT DE PAUL - WATERSMEET 4654 HWY 45 NORTH WATERSMEET MI 49969	38-1914302	501C3		7,688 FMV	FMV	FOOD	FIGHT HUNGER
(5)	ST. VINCENT DE PAUL CENTER/ST. FRAN 170 W. 13TH STREET HOLLAND MI 49423	53-0196617	501C3		22,707 FMV	FMV	FOOD	FIGHT HUNGER
(6)	ST. VINCENT DE PAUL FOOD PANTRY - I 14 S. MAIN ST L'ANSE MI 49946	38-1914302	501C3		6,671 FMV	FMV	FOOD	FIGHT HUNGER
(7)	ST. VINCENT DE PAUL SERVICE CENTER 231 S. CEDAR MANISTIQUE MI 49854	38-1914302	501C3		8,596 FMV	FMV	FOOD	FIGHT HUNGER
(8)	ST. VINCENT DE PAUL SOCIETY - BANGO 201 SOUTH WALNUT ST BANGOR MI 49013	80-0631346	501C3		61,288 FMV	FMV	FOOD	FIGHT HUNGER
(9)	STEVENSVILLE UMC (M) 5506 RIDGE RD. STEVENSVILLE MI 49127	31-1813333	501C3		79,412 FMV	FMV	FOOD	FIGHT HUNGER

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

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number

FEEDING AMERICA WEST MICHIGAN
38-2439659

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. Yes No

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	STEVENSVILLE UMC - BACKPACK 5506 RIDGE ROAD STEVENSVILLE MI 49127		501C3		23,974 FMV	FMV	FOOD	FIGHT HUNGER
(2)	STREAMS OF HOPE FOOD CENTER 280 60TH STREET SE GRAND RAPIDS MI 49548	72-1610023	501C3		533,362 FMV	FMV	FOOD	FIGHT HUNGER
(3)	STRONG TOWER MINISTRIES/TRINITY CRC 2851 BUCHANAN AVE SW WYOMING MI 49548	38-2051351	501C3		23,010 FMV	FMV	FOOD	FIGHT HUNGER
(4)	SVDP - GUARDIAN ANGELS CONFERENCE 11 N 5TH ST. CRYSTAL FALLS MI 49920	38-1914302	501C3		36,672 FMV	FMV	FOOD	FIGHT HUNGER
(5)	SVDP - OUR LADY OF PEACE CONFERENCE 108 S. MARQUETTE ST IRONWOOD MI 49938	38-1914302	501C3		68,017 FMV	FMV	FOOD	FIGHT HUNGER
(6)	TEACHING FAMILY HOMES - NEWBERRY 7820 STATE HIGHWAY M123 NEWBERRY MI 49868	38-2425199	501C3		13,635 FMV	FMV	FOOD	FIGHT HUNGER
(7)	THE GREEN APPLE 4307 KALAMAZOO AVE. SE GRAND RAPIDS MI 49508	46-5148847	501C3		188,590 FMV	FMV	FOOD	FIGHT HUNGER
(8)	THE GROVE CHURCH (M) 3815 S MOREY ROAD LAKE CITY MI 49651	38-2562324	501C3		37,189 FMV	FMV	FOOD	FIGHT HUNGER
(9)	THE LORD'S TABLE FOOD PANTRY/FAITH 610 GREEN STREET BIG RAPIDS MI 49307		501C3		27,040 FMV	FMV	FOOD	FIGHT HUNGER

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

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	THE OTHER WAY MINISTRIES 710 W. FULTON STREET GRAND RAPIDS MI 49504	38-2236821	501C3		111,233	FMV	FOOD	FIGHT HUNGER
(2)	THE RIVER CRC (M) 1652 M-40 NORTH ALLEGAN MI 49010	38-2051351	501C3		113,574	FMV	FOOD	FIGHT HUNGER
(3)	THE VINE AN ASSEMBLY OF GOD CHURCH/ 112 COMMERCE GRANT MI 49327	44-0577787	501C3		95,552	FMV	FOOD	FIGHT HUNGER
(4)	THIRD CHRISTIAN REFORMED CHURCH (M) 10 WEST CENTRAL AVENUE ZEELAND MI 49464	38-2051351	501C3		96,089	FMV	FOOD	FIGHT HUNGER
(5)	THRESHOLDS - VILLA EAST & PORTER 3000 PORTER SW GRANDVILLE MI 49418	38-2063018	501C3		11,499	FMV	FOOD	FIGHT HUNGER
(6)	TOGETHER IN FAITH MINISTRIES 300 HALL STREET SE GRAND RAPIDS MI 49507		501C3		6,368	FMV	FOOD	FIGHT HUNGER
(7)	TOTAL FAITH MINISTRIES (M) 352 EAST AYER ST IRONWOOD MI 49938	31-1367429	501C3		72,013	FMV	FOOD	FIGHT HUNGER
(8)	TRINITY LUTHERAN CHURCH OF MUSKEGON 3225 ROOSEVELT RD MUSKEGON MI 49441	43-0658188	501C3		28,235	FMV	FOOD	FIGHT HUNGER
(9)	TRINITY LUTHERAN CHURCH OF ST. JOSE 619 MAIN STREET ST. JOSEPH MI 49085	43-0658188	501C3		89,200	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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OMB No. 1545-0047

2023

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Name of the organization

Employer identification number

38-2439659

FEEDING AMERICA WEST MICHIGAN

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- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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(1)	TRINITY LUTHERAN COMMUNITY FOOD PAN 5631 W STONY LAKE RD NEW ERA MI 49446	20-1737867	501C3		208,011	FMV	FOOD	FIGHT HUNGER
(2)	TRUENORTH COMMUNITY SERVICES (M) 6308 S. WARNER AVE. FREMONT MI 49412	38-6158533	501C3		311,895	FMV	FOOD	FIGHT HUNGER
(3)	TRUENORTH COMMUNITY SERVICES FOOD C 6308 S. WARNER AVE. FREMONT MI 49412	38-6158533	501C3		935,492	FMV	FOOD	FIGHT HUNGER
(4)	TWELVE BASKETS/STANWOOD FREE METHOD 7486 STANWOOD DRIVE STANWOOD MI 49346	35-0877568	501C3		5,743	FMV	FOOD	FIGHT HUNGER
(5)	UNITED CHURCH OF WAYLAND (M) 411 SUPERIOR STREET WAYLAND MI 49348	13-1957221	501C3		93,503	FMV	FOOD	FIGHT HUNGER
(6)	UNITED CHURCH OUTREACH MINISTRY (UC 1311 CHICAGO DRIVE SW WYOMING MI 49509	38-2640284	501C3		401,813	FMV	FOOD	FIGHT HUNGER
(7)	UNITED WAY OF MANISTEE CO. (M) 449 RIVER STREET MANISTEE MI 49660	38-6032839	501C3		165,714	FMV	FOOD	FIGHT HUNGER
(8)	UNITED WAY OF THE EUP - CHIPPEWA CO 511 ASHMUN SUITE 200 SAULT STE MARIE MI 49783	38-1678240	501C3		28,825	FMV	FOOD	FIGHT HUNGER
(9)	UNITED WAY OF THE LAKESHORE-OCEANA 907 S. STATE STREET HART MI 49420	38-1426895	501C3		112,888	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
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OMB No. 1545-0047

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Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

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(1)	UNITY TEMPLE COGIC 435 FELTON AVE. BENTON HARBOR MI 49022		501C3		5,751 FMV	FMV	FOOD	FIGHT HUNGER
(2)	UPLIFT PINE RIVER AREA KIDS BACKPACK 108 WEST CHURCH ST TUSTIN MI 49688	93-2939698	501C3		38,823 FMV	FMV	FOOD	FIGHT HUNGER
(3)	UPPER PENINSULA HEALTH CARE SOLUTIONS 853 W. WASHINGTON ST. MARQUETTE MI 49855	45-2716432	501C3		237,026 FMV	FMV	FOOD	FIGHT HUNGER
(4)	UPPER PENINSULA HEALTH CARE SOLUTIONS 853 W. WASHINGTON STREET MARQUETTE MI 49855	45-2716432	501C3		426,637 FMV	FMV	FOOD	FIGHT HUNGER
(5)	VALLEY RESIDENTIAL SERVICES 731 STONEY CREEK DR. REED CITY MI 49677	38-2687303	501C3		6,878 FMV	FMV	FOOD	FIGHT HUNGER
(6)	VANDALIA CHURCH OF GOD 60825 WALNUT STREET VANDALIA MI 49095	35-6064030	501C3		26,508 FMV	FMV	FOOD	FIGHT HUNGER
(7)	VINEYARD NORTH CHURCH 4700 EAST BELTLINE AVE NE GRAND RAPIDS MI 49525	38-3011105	501C3		46,621 FMV	FMV	FOOD	FIGHT HUNGER
(8)	VINEYARD NORTH CHURCH (M) 4700 EAST BELTLINE AVE NE GRAND RAPIDS MI 49525	38-3011105	501C3		118,858 FMV	FMV	FOOD	FIGHT HUNGER
(9)	WE CARE FOOD PANTRY/FIRST CONGREGAT 651 PHOENIX STREET SOUTH HAVEN MI 49090	38-2463936	501C3		100,001 FMV	FMV	FOOD	FIGHT HUNGER

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**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
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FEEDING AMERICA WEST MICHIGAN

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(1)	WE CARE FP/FIRST CONGREGATIONAL UCC 651 PHOENIX STREET SOUTH HAVEN MI 49090	38-2463936	501C3		19,565	FMV	FOOD	FIGHT HUNGER
(2)	WEEKEND BACKPACK MISSION/UMC HARTFORD 425 EAST MAIN HARTFORD MI 49057	31-1813333	501C3		14,081	FMV	FOOD	FIGHT HUNGER
(3)	WELLSPRING LUTHERAN SERVICES - FTBS 1715 SUTHERLAND DR. SE KENTWOOD MI 49508	38-1359524	501C3		14,821	FMV	FOOD	FIGHT HUNGER
(4)	WEST MI VETERANS ASSISTANCE PROGRAM 620 CENTURY AVE SW GRAND RAPIDS MI 49503	45-0531112	501C3		116,951	FMV	FOOD	FIGHT HUNGER
(5)	WESTEND CRC (M) 1015 WESTEND AVE. NW GRAND RAPIDS MI 49504	38-2051351	501C3		53,269	FMV	FOOD	FIGHT HUNGER
(6)	WESTERN U.P. FOOD BANK 926 DODGE STREET HOUGHTON MI 49931-1944	87-0723404	501C3		204,858	FMV	FOOD	FIGHT HUNGER
(7)	WESTMINSTER FOOD PANTRY 47 JEFFERSON AVENUE SE. GRAND RAPIDS MI 49503	38-1415419	501C3		87,824	FMV	FOOD	FIGHT HUNGER
(8)	WHITE CLOUD CHURCH OF GOD (M) 1621 SOUTH EVERGREEN DRIVE WHITE CLOUD MI 49349	62-1870586	501C3		118,092	FMV	FOOD	FIGHT HUNGER
(9)	WHITE LAKE CONGREGATIONAL UCC (M) 1809 SOUTH MEARS RD. WHITEHALL MI 49461	23-7306674	501C3		35,443	FMV	FOOD	FIGHT HUNGER

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

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

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

DAA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

Employer identification number
38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I General Information on Grants and Assistance

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	WOLF LAKE UNITED METHODIST CHURCH 378 VISTA TERRACE MUSKEGON MI 49442	31-1813333	501C3		9,684	FMV	FOOD	FIGHT HUNGER
(2)	WOODLAWN CHRISTIAN REFORMED CHURCH 3190 BURTON STREET SE GRAND RAPIDS MI 49546	38-2051351	501C3		132,021	FMV	FOOD	FIGHT HUNGER
(3)	WOODSIDE WESLEYAN CHURCH 6789 OLE WHITE DR LAKE ANN MI 49650		501C3		7,487	FMV	FOOD	FIGHT HUNGER
(4)	ZION CHURCH OF IONIA (M) 423 W WASHINGTON STREET IONIA MI 48846	31-1813333	501C3		97,147	FMV	FOOD	FIGHT HUNGER
(5)	ZION CHURCH OF IONIA FOOD PANTRY 130 E WASHINGTON ST. IONIA MI 48846	93-4091901	501C3		27,882	FMV	FOOD	FIGHT HUNGER
(6)	ZION LUTHERAN CHURCH (M) 582 LAMOREAUX DRIVE NW COMSTOCK PARK MI 49321	41-1568278	501C3		138,947	FMV	FOOD	FIGHT HUNGER
(7)	ZION TABERNACLE HOUSE OF GOD MUSKEG 1282 4TH STREET MUSKEGON MI 49441	47-3561308	501C3		20,250	FMV	FOOD	FIGHT HUNGER
(8)								
(9)								

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

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

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

DAA

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 FOOD - FIGHT HUNGER	695000		2,254,631	FMV	FOOD
2					
3					
4					
5					
6					
7					

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 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS
 THE ORGANIZATION PERFORMS RANDOM AUDITS OF GRANTEES ANNUALLY AND REQUIRES
 DOCUMENTATION OF HOW THE FOOD IS DISTRIBUTED. GRANTEES ARE MONITORED
 ANNUALLY FOR FOOD SAFETY AND COMPLIANCE WITH USDA AND OTHER GOVERNMENT
 AGENCY REGULATIONS.

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SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No. 1545-0047

2023

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FEEDING AMERICA WEST MICHIGAN

Employer identification number
38-2439659

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(A) Name and Title	(B) Breakdown of W2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 KENNETH R. ESTELLE PRESIDENT/CEO	(i) 161,570	(ii) 10,000	(iii) 0	11,310	19,243	202,123	0
2							0
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							

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.

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SCHEDULE L

(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Public Inspection Copy
Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27,
28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Employer identification number

38-2439659

FEEDING AMERICA WEST MICHIGAN

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

Table with 5 columns: (1) Name of disqualified person, (2) Relationship between disqualified person and organization, (3) Description of transaction, (4) Corrected? (Yes/No)

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \$
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

Table with 10 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the org.?, (e) Original principal amount, (f) Balance due, (g) In default?, (h) Approved by board or committee?, (i) Written agreement?

Total \$

Part III Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues?	
				Yes	No
(1) THOMAS BYLENGA	FORMER DIRECTOR	432,872	TRUCKING SERVICES		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L. See instructions.

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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2023

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

Attach to Form 990.

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

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

FEEDING AMERICA WEST MICHIGAN

Employer identification number

38-2439659

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	459	41,953,567	WHOLESALE VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (OTHER FOOD)	X	1	450	FAIR MARKET VALUE
26 Other ()				
27 Other ()				
28 Other ()				

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

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

SCHEDULE M - SUPPLEMENTAL INFORMATION

THE NUMBER OF FOOD INVENTORY ITEMS REPORTED ON LINE 19, COLUMN B IS THE
NUMBER OF DISTINCT TYPES OF FOOD ITEMS RECEIVED. THE NUMBER OF ITEMS
REPORTED ON LINES 25-28, COLUMN B ARE THE NUMBER OF INDIVIDUAL ITEMS
RECEIVED OR THE NUMBER OF MEALS RECEIVED.

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**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

2023

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

FEEDING AMERICA WEST MICHIGAN

Employer identification number

38-2439659

FORM 990 - ADDITIONAL INFORMATION

ALL LINES LEFT BLANK ARE NOT APPLICABLE TO THE ORGANIZATION.

PART IX, LINE 1 - GRANTS AND OTHER ASSISTANCE TO DOMESTIC ORGANIZATIONS AND DOMESTIC GOVERNMENTS.

THE AMOUNT REPORTED ON THIS LINE IS STATED AT WHOLESALE VALUE AS REPORTED ON THE AUDITED FINANCIAL STATEMENTS. THE DETAIL OF GRANTS REPORTED IN SCHEDULE I IS STATED AT FAIR MARKET VALUE.

FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT

THE FOOD BANK'S REPORTED REVENUE OF \$54.4 MILLION INCLUDES THE ESTIMATED VALUE OF NON-CASH FOOD DONATIONS OF \$42.0 MILLION. THE FOOD BANK THEN DISTRIBUTES THIS FOOD TO RECIPIENT ORGANIZATIONS. TOTAL REPORTED EXPENSES OF \$51.2 MILLION INCLUDE THE ESTIMATED VALUE OF NON-CASH FOOD DISTRIBUTION OF \$41.6 MILLION. NOT INCLUDING THE ESTIMATED NON-CASH VALUE OF FOOD DONATED AND DISTRIBUTED THE FOOD BANK HAD TOTAL REVENUE OF \$12.5 MILLION AND TOTAL EXPENSES OF \$9.6 MILLION RESULTING IN A NET GAIN OF \$2.9 MILLION. THE DISTRIBUTION OF THE DONATED FOOD TAKES PLACE THROUGH FIXED SITE FOOD PANTRIES, MEAL PROGRAMS, AND GROUP HOMES, RECEIVING FOOD DIRECTLY FROM THE FOOD BANK. ADDITIONALLY, FRESH PRODUCE, DAIRY, AND OTHER GROCERY PRODUCTS ARE DISTRIBUTED DIRECTLY TO FAMILIES VIA MOBILE FOOD DISTRIBUTION. IN 2023, THE FOOD BANK DISTRIBUTED 28 MILLION POUNDS OF FOOD, WHICH IS THE EQUIVALENT OF 23 MILLION MEALS. THE FOOD BANK DELIVERED FOOD TO 533 FOOD PANTRY AGENCIES AND SERVED APPROXIMATELY 695,000 PEOPLE.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

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

Schedule O (Form 990) 2023

Public Inspection Copy

Name of the organization

Employer identification number

FEEDING AMERICA WEST MICHIGAN

38-2439659

THE FINAL 990 IS EMAILED TO ALL BOARD MEMBERS FOR COMMENT OR CORRECTION PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

ALL BOARD MEMBERS AND EMPLOYEES ARE REQUIRED TO REVIEW AND SIGN A CONFLICT OF INTEREST POLICY ANNUALLY. THE CEO REVIEWS AND SIGNS ALL THE EMPLOYEES' CONFLICT OF INTEREST STATEMENTS. THE BOARD CHAIR REVIEWS AND SIGNS THE CEO'S AND OTHER BOARD MEMBERS' CONFLICT OF INTEREST STATEMENTS. IF ANY CONFLICTS ARE NOTED, THE CONFLICT GOES TO THE BOARD CHAIR FOR REVIEW. THE EMPLOYEE WOULD MEET WITH THE BOARD CHAIR TO DISCUSS THE CONFLICT AND WOULD NOT PARTICIPATE IN THE DECISION PROCESS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE BOARD OF DIRECTORS REVIEWS SALARIES AND BONUSES ANNUALLY FOR THE CEO.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

THE FINANCIAL STATEMENTS ARE MADE AVAILABLE ON THE ORGANIZATION'S WEBSITE, AS WELL AS ON THE BETTER BUSINESS BUREAU, CHARITY NAVIGATOR, AND DUNN & BRADSTREET WEBSITES, AND ARE ALSO INCLUDED IN THE FALL NEWSLETTER THAT IS DISTRIBUTED TO ALL DONORS AND PARTNER AGENCIES. THE FINANCIAL STATEMENTS AND OTHER POLICIES ARE ALSO AVAILABLE TO THE PUBLIC UPON REQUEST. THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE AVAILABLE TO THE PUBLIC.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

RECLASS RENTAL EXPENSE TO REVENUE	\$	120,539
RECLASS RENTAL EXPENSE TO REVENUE	\$	-120,539