

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.

A For the 2018 calendar year, or tax year beginning **JUL 1, 2018** and ending **JUN 30, 2019**

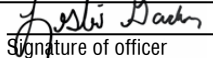
B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization FOOD BANK FOR NEW YORK CITY Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 39 BROADWAY 10 City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10006	D Employer identification number 13-3179546
	F Name and address of principal officer: LESLIE GORDON SAME AS C ABOVE	E Telephone number 212-566-7855
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	G Gross receipts \$ 51,094,700.
J Website: ▶ WWW.FOODBANKNYC.ORG		H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? Yes No If "No," attach a list. (see instructions)
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶	L Year of formation: 1983	M State of legal domicile: NY

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: THE MISSION OF FOOD BANK FOR NEW YORK CITY IS TO END HUNGER BY ORGANIZING FOOD, INFORMATION AND		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3	12
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	158
	6	Total number of volunteers (estimate if necessary)	6	25112
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, line 38	7b	0.
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year
9		Program service revenue (Part VIII, line 2g)	68,588,690.	49,149,503.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,195,316.	1,217,753.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,506.	15,583.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-551,598.	-460,556.
			69,235,914.	49,922,283.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	32,408,490.	15,282,413.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	12,850,841.	12,731,774.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	69,667.	112,564.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,958,924.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	22,202,965.	21,875,986.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	67,531,963.	50,002,737.
	19	Revenue less expenses. Subtract line 18 from line 12	1,703,951.	-80,454.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	20,400,605.	19,624,022.
	22	Net assets or fund balances. Subtract line 21 from line 20	7,907,584.	7,207,778.
			12,493,021.	12,416,244.

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  COPY	Date 7/13/2020
	Type or print name and title LESLIE GORDON, PRESIDENT & CEO	
Paid Preparer Use Only	Print/Type preparer's name MAGDALENA CZERNIAWSKI	Preparer's signature MAGDALENA CZERNIAWSKI
	Date 07/13/20	Check if self-employed <input type="checkbox"/> PTIN P00535099
	Firm's name ▶ MARKS PANETH LLP	Firm's EIN ▶ 11-3518842
	Firm's address ▶ 685 THIRD AVENUE NEW YORK, NY 10017	Phone no. 212-503-8800

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: FOOD BANK FOR NYC HAS BEEN THE CITY'S MAJOR HUNGER-RELIEF ORGANIZATION WORKING TO END HUNGER THROUGHOUT THE FIVE BOROUGHES FOR MORE THAN 35 YEARS. NEARLY ONE IN FIVE NEW YORKERS RELIES ON FOOD BANK FOR FOOD AND OTHER RESOURCES. FOOD BANK TAKES A STRATEGIC, MULTIFACETED APPROACH

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

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

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

4a (Code:) (Expenses \$ 33,432,729. including grants of \$ 15,282,413.) (Revenue \$ 1,252,807.) FOOD PROCUREMENT, DISTRIBUTION AND STORAGE AS THE CITY'S PRIMARY DISTRIBUTOR OF EMERGENCY FOOD, FOOD BANK FOR NEW YORK CITY ("FOOD BANK") SECURES, WAREHOUSES, TRANSPORTS, AND DISTRIBUTES FOOD TO NEARLY 1,000 CHARITIES CITYWIDE FROM ITS 90,000 SQUARE FOOT BRONX WAREHOUSE. IN FISCAL YEAR 2019, FOOD BANK DISTRIBUTED 58 MILLION MEALS FOR LOW-INCOME, FOOD-INSECURE NEW YORKERS. THOSE MEALS WERE EQUIVALENT TO 69 MILLION POUNDS OF FOOD, INCLUDING MORE THAN 16.4 MILLION POUNDS OF FRESH FRUITS AND VEGETABLES, PROCURED THROUGH A VARIETY OF NATIONAL AND LOCAL SOURCES. AS A FULL SERVICE EMERGENCY FOOD DISTRIBUTION OPERATION, FOOD BANK DISPATCHES TRACTOR TRAILERS FROM ITS WAREHOUSE EVERY WEEKDAY TO ORGANIZATIONS IN EACH OF THE FIVE BOROUGHES OF NEW YORK CITY, INCLUDING FOOD PANTRIES, SOUP KITCHENS, SENIOR

4b (Code:) (Expenses \$ 3,578,862. including grants of \$) (Revenue \$) FOOD AND NUTRITION SERVICES AND EDUCATION FOOD BANK'S PORTFOLIO OF NUTRITION EDUCATION PROGRAMS AND SERVICES REACHES MORE THAN 50,000 CHILDREN, TEENS AND ADULTS, PROMOTING GOOD NUTRITION AND HEALTHY EATING TO COMBAT THE PREVALANCE OF OBESITY AND DIET-RELATED DISEASE IN LOW INCOME NEIGHBORHOODS. FOOD BANK ALSO PARTNERS WITH SCHOOLS TO ENSURE THAT CHILDREN AND THEIR FAMILIES CAN ACCESS FOOD IN A SAFE, FRIENDLY ENVIRONMENT WITH DIGNITY. THROUGH COLLABORATION WITH A RANGE OF PUBLIC AND PRIVATE PARTNERS, FOOD BANK OPERATED CAMPUS PANTRIES IN FY 2017 AT 41 K-12 SCHOOLS AND 11 COLLEGES AND DISTRIBUED MORE THAN 1.1 MILLION MEALS TO MORE THAN 21,000 STUDENTS AND THEIR FAMILIES.

4c (Code:) (Expenses \$ 2,612,245. including grants of \$) (Revenue \$) INCOME SUPPORT PROGRAMS AND BENEFITS ACCESS SERVICES FOOD BANK'S IMPLEMENTS A MULTIFACETED STRATEGY IN THE FIGHT AGAINST HUNGER THAT TETHERS EMERGENCY FOOD ASSISTANCE TO VITAL INCOME SUPPORTS THAT HELP LIFT LOW-INCOME NEW YORKERS OUT OF POVERTY AND BETTER POSITIONED TO AFFORD FOOD AND OTHER HOUSEHOLD ESSENTIALS WITH DIGNITY. FOOD BANK'S INCOME SUPPORT OFFERINGS INCLUDE FREE TAX PREPARARTION, SNAP ASSISTANCE SERVICES (FORMERLY FOOD STAMPS), PERSONALIZED FINANCIAL COUNSELING, AND ITS AWARD WINNING PLATFORM FOR COMMUNITY RESILIENCE CALLED THE TIERED ENGAGEMENT NETWORK (TEN). OUR FREE SNAP ASSISTANCE AND TAX PREPARATION SERVICES HAVE HELPED RETURN OVER \$1 BILLION DOLLARS TO LOW INCOME NEW YORKERS.

4d Other program services (Describe in Schedule O.) (Expenses \$ 2,122,679. including grants of \$) (Revenue \$)

4e Total program service expenses 41,746,515.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	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		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 16 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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 in Schedule O.		
	1a 12		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 12		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
7a			
7b			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
8a			
b	Each committee with authority to act on behalf of the governing body?	X	
8b			
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 in Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NY**
- 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 in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **VERONICA JARRETT, CFO - 212-566-7855**
39 BROADWAY FLOOR 10, , NEW YORK, NY 10006

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ARTHUR STAINMAN TREASURER	2.00	X		X				0.	0.	0.
(2) GLORIA PITAGORSKY VICE CHAIR	2.00	X		X				0.	0.	0.
(3) JOHN FRITTS, ESQ BOARD MEMBER	2.00	X						0.	0.	0.
(4) KATIE LEE BOARD MEMBER	2.00	X						0.	0.	0.
(5) KEVIN FIRSZ BOARD MEMBER	2.00	X						0.	0.	0.
(6) LARY STROMFELD EXECUTIVE VICE CHAIR	2.00	X		X				0.	0.	0.
(7) LAUREN BUSH LAUREN BOARD MEMBER	2.00	X						0.	0.	0.
(8) LEE BRIAN SCHRAGER BOARD MEMBER	2.00	X						0.	0.	0.
(9) MICHAEL SMITH BOARD MEMBER (OUTGOING)	2.00	X						0.	0.	0.
(10) NICOLAS POITEVIN BOARD MEMBER	2.00	X						0.	0.	0.
(11) PASTOR MICHAEL WALROND BOARD MEMBER	2.00	X						0.	0.	0.
(12) REV. HENRY BELIN SECRETARY	2.00	X		X				0.	0.	0.
(13) SERAINA MACIA CHAIR	2.00	X		X				0.	0.	0.
(14) STANLEY TUCCI BOARD MEMBER (OUTGOING)	2.00	X						0.	0.	0.
(15) LISA HINES-JOHNSON COO	35.00			X				268,779.	0.	33,942.
(16) MARGARETTE PURVIS PRESIDENT & CEO (THRU 02/2020)	35.00			X				628,451.	0.	28,857.
(17) VERONICA JARRETT CFO	35.00			X				192,603.	0.	38,717.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) FRANCISCO TEZEN VP OF FUNDRAISING	35.00				X			158,789.	0.	27,525.
(19) ANTONIO PERALTA DIRECTOR OF IT	35.00					X		122,268.	0.	32,904.
(20) CAMESHA GRANT VP OF COMMUNITY CONNECTION	35.00					X		160,601.	0.	24,920.
(21) JANIS ROBINSON DIR. OF CORPORATOR ENGAGEMENT	35.00					X		126,349.	0.	19,060.
(22) JASON BONILLA DIRECTOR, TECH. INFRASTRUCTURE & SUPP	35.00					X		120,156.	0.	16,048.
(23) TAMI WILSON VP OPERATIONS/ADMIN SERVI	35.00					X		150,129.	0.	26,785.
1b Sub-total								1,928,125.	0.	248,758.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,928,125.	0.	248,758.

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 **14**

	Yes	No
3 Did the organization list any former officer, director, or 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
RKD GROUP, LLC 35 PARKWOOD DRIVE, HOPKINTON, MA 01748	DIRECT MAIL SERVICES	1,264,420.
HIRE POINT PO BOX 327, WILLIAMSVILLE, NY 14231	TEMPORARY STAFFING SERVICES	371,756.
EXECUSEARCH GROUP LLC PO BOX 844276, BOSTON, MA 02284	TEMPORARY STAFFING SERVICES	257,927.
JBC PLACTFORM LLC, 108 WEST 39TH STREET, SUITE 2701, NEW YORK, NY 10018	TEMPORARY STAFFING SERVICES	218,349.
WINTER WYMAN TECHNOLOGY PO BOX 845054, BOSTON, MA 02284	TEMPORARY STAFFING SERVICES	133,824.

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 **9**

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	1,522,884.				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	18,882,371.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	28,744,248.				
	g	Noncash contributions included in lines 1a-1f: \$		13,192,271.				
	h	Total. Add lines 1a-1f		49,149,503.				
	Program Service Revenue	2 a	SALE OF FOOD AND PAPER PRODUCTS	Business Code	900099	1,176,180.	1,176,180.	
b		PALLET SALES		900099	23,520.	23,520.		
c		CONFERENCE FEES		900099	18,053.	18,053.		
d								
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f			1,217,753.			
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts)			18,011.		18,011.
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	(i) Real	(ii) Personal				
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		Less: cost or other basis and sales expenses						
		Gain or (loss)						
		Net gain or (loss)				-2,428.		-2,428.
	8 a	Gross income from fundraising events (not including \$ 1,522,884. of contributions reported on line 1c). See Part IV, line 18						
		Less: direct expenses						
		Net income or (loss) from fundraising events				-495,610.		-495,610.
	9 a	Gross income from gaming activities. See Part IV, line 19						
Less: direct expenses								
Net income or (loss) from gaming activities								
10 a	Gross sales of inventory, less returns and allowances							
	Less: cost of goods sold							
	Net income or (loss) from sales of inventory							
Miscellaneous Revenue				Business Code				
11 a	OTHER			900099	35,054.	35,054.		
	All other revenue							
	Total. Add lines 11a-11d				35,054.			
12	Total revenue. See instructions				49,922,283.	1,252,807.	0.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	15,282,413.	15,282,413.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,213,753.	158,707.	648,212.	406,834.
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	9,339,962.	6,537,700.	1,610,184.	1,192,078.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	154,421.	115,346.	12,788.	26,287.
9 Other employee benefits	1,251,847.	842,119.	206,475.	203,253.
10 Payroll taxes	771,791.	490,685.	145,927.	135,179.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	112,564.			112,564.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	780,625.	314,191.	423,537.	42,897.
12 Advertising and promotion	416,488.	29,573.	368,708.	18,207.
13 Office expenses	603,240.	218,647.	275,240.	109,353.
14 Information technology	452,410.	238,418.	52,945.	161,047.
15 Royalties				
16 Occupancy	2,850,151.	2,529,423.	221,476.	99,252.
17 Travel	40,368.	9,528.	27,006.	3,834.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	211,593.	211,593.		
20 Interest	87,616.	87,616.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	491,221.	367,963.	56,388.	66,870.
23 Insurance	191,288.	139,995.	29,286.	22,007.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD PURCHASE DIST.	6,616,856.	6,616,856.		
b FOOD DELIVERY COST	3,430,146.	3,430,146.		
c DIRECT MAIL	1,372,101.		28,227.	1,343,874.
d OTHER PROGRAM EXP.	1,149,087.	1,130,997.	6,836.	11,254.
e All other expenses	3,182,796.	2,994,599.	184,063.	4,134.
25 Total functional expenses. Add lines 1 through 24e	50,002,737.	41,746,515.	4,297,298.	3,958,924.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,837,028.	1	2,985,484.
	2 Savings and temporary cash investments	895,533.	2	1,849,159.
	3 Pledges and grants receivable, net	9,180,276.	3	8,795,737.
	4 Accounts receivable, net	60,183.	4	295,955.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	2,942,579.	8	1,312,150.
	9 Prepaid expenses and deferred charges	28,101.	9	253,099.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 8,215,329.		
	b Less: accumulated depreciation	10b 5,629,259.	2,901,457.	10c 2,586,070.
	11 Investments - publicly traded securities	9,860.	11	780.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,545,588.	15	1,545,588.
16 Total assets. Add lines 1 through 15 (must equal line 34)	20,400,605.	16	19,624,022.	
Liabilities	17 Accounts payable and accrued expenses	4,954,094.	17	4,357,845.
	18 Grants payable		18	
	19 Deferred revenue	492,715.	19	527,952.
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,741,992.	23	1,630,471.
	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	718,783.	25	691,510.
	26 Total liabilities. Add lines 17 through 25	7,907,584.	26	7,207,778.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	11,368,045.	27	9,947,431.
	28 Temporarily restricted net assets	1,074,976.	28	2,418,813.
	29 Permanently restricted net assets	50,000.	29	50,000.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	12,493,021.	33	12,416,244.	
34 Total liabilities and net assets/fund balances	20,400,605.	34	19,624,022.	

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	49,922,283.
2	Total expenses (must equal Part IX, column (A), line 25)	2	50,002,737.
3	Revenue less expenses. Subtract line 2 from line 1	3	-80,454.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,493,021.
5	Net unrealized gains (losses) on investments	5	3,677.
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 in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	12,416,244.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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 in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2018)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization: FOOD BANK FOR NEW YORK CITY
Employer identification number: 13-3179546

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).
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).
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).
6 [] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 [] A community trust described in section 170(b)(1)(A)(vi).
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.
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...
11 [] An organization organized and operated exclusively to test for public safety.
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).
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.
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).
c [] Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions).
d [] Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
e [] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	85368575.	82037487.	80160286.	68588690.	49149503.	365304541
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	85368575.	82037487.	80160286.	68588690.	49149503.	365304541
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						365304541

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	85368575.	82037487.	80160286.	68588690.	49149503.	365304541
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	43,550.	22,910.	14,632.	5,150.	18,011.	104,253.
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.)	576,028.	838,718.	598,645.	232,040.	71,594.	2317025.
11 Total support. Add lines 7 through 10						367725819
12 Gross receipts from related activities, etc. (see instructions)					12	7,070,751.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	99.34 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	99.37 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 in 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 five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</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 in 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 in 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 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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>		
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>		

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>		

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?		
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>		
3 By reason of the relationship described in (2), 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>		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) 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>		
b Did the activities described in (a) 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>		
3 Parent of Supported Organizations. Answer (a) and (b) 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>Provide details in Part VI.</i>		
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>		

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 1-1/2% 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 .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2018

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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS

2014 AMOUNT: \$ 93,014.

2015 AMOUNT: \$ 115,748.

2016 AMOUNT: \$ 32,810.

2017 AMOUNT: \$ 139,986.

2018 AMOUNT: \$ 35,054.

FUNDRAISING

2014 AMOUNT: \$ 483,014.

2015 AMOUNT: \$ 722,970.

2016 AMOUNT: \$ 565,835.

2017 AMOUNT: \$ 89,875.

2018 AMOUNT: \$ 36,540.

FOOD BANK GIVES

2017 AMOUNT: \$ 2,179.

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization FOOD BANK FOR NEW YORK CITY	Employer identification number 13-3179546
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? **Yes** **No**
- 4a Was a correction made? **Yes** **No**
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? **Yes** **No**
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. **Schedule C (Form 990 or 990-EZ) 2018**

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

Yes No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		2,462.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			2,462.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

LOBBYING ACTIVITIES ARE DONE BY INTERNAL STAFF.

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

2018 Open to Public Inspection

Name of the organization: FOOD BANK FOR NEW YORK CITY; Employer identification number: 13-3179546

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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? (Yes/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? (Yes/No)

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of a historically important land area, Preservation of a certified historic structure; 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: a Total number of conservation easements, b Total acreage restricted by conservation easements, c Number of conservation easements on a certified historic structure included in (a), d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register; 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year; 4 Number of states where property subject to conservation easement is located; 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? (Yes/No); 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year; 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year; 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? (Yes/No); 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

Table with 2 columns: \$. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.; 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) 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 SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1; b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2018

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

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

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

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

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,314,242.	2,312,742.	4,700,270.	4,700,270.	4,500,000.
b Contributions					200,000.
c Net investment earnings, gains, and losses	500.	1,500.		18,605.	46,281.
d Grants or scholarships					
e Other expenditures for facilities and programs			2,387,528.	18,605.	46,011.
f Administrative expenses					
g End of year balance	2,314,742.	2,314,242.	2,312,742.	4,700,270.	4,700,270.

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

- a Board designated or quasi-endowment 97.75 %
- b Permanent endowment 2.25 %
- c Temporarily restricted endowment _____ %

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

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

- (i) unrelated organizations
- (ii) related organizations

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

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				
b Buildings		661,394.	550,380.	111,014.
c Leasehold improvements		4,698,449.	2,864,450.	1,833,999.
d Equipment		2,781,641.	2,214,429.	567,212.
e Other		73,845.		73,845.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,586,070.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) DUE FROM AFFILIATE	1,174,878.
(2) SECURITY DEPOSIT	370,710.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	1,545,588.

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) CONTRACT ADVANCES	691,510.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	691,510.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements	1	50,506,490.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	3,677.
b	Donated services and use of facilities	2b	614,337.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-33,807.
e	Add lines 2a through 2d	2e	584,207.
3	Subtract line 2e from line 1	3	49,922,283.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	49,922,283.

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	50,675,974.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	614,337.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	92,707.
e	Add lines 2a through 2d	2e	707,044.
3	Subtract line 2e from line 1	3	49,968,930.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	33,807.
c	Add lines 4a and 4b	4c	33,807.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	50,002,737.

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:

THE FUNDS ARE INTENDED TO BE USED ACCORDING TO THE DONOR STIPULATED RESTRICTIONS AND TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO THE ORGANIZATION'S PROGRAMS WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS.

PART X, LINE 2:

FOOD BANK FOR NYC BELIEVES IT HAS NO UNCERTAIN INCOME TAX POSITIONS AS OF JUNE 30, 2019 IN ACCORDANCE WITH ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC 740 ("INCOME TAXES"), WHICH PROVIDES STANDARDS FOR ESTABLISHING AND CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS.

Part XIII Supplemental Information *(continued)*

PART XI, LINE 2D - OTHER ADJUSTMENTS:

INDIRECT FUNDRAISING EXPENSES -33,807.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RELATED ENTITY'S EXPENSES 92,707.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INDIRECT FUNDRAISING EXPENSES 33,807.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2018

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

Name of the organization

FOOD BANK FOR NEW YORK CITY

Employer identification number

13-3179546

Part I

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

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

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

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
JLG, INC. - 310 46TH STREET #4E, NEW YORK, NY 10017	CAN DO AWARDS		X	1,559,424.	112,564.	1,446,860.
Total				1,559,424.	112,564.	1,446,860.

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.

NY

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		CAN DO AWARDS (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	1,559,424.		1,559,424.
	2	Less: Contributions	1,522,884.		1,522,884.
	3	Gross income (line 1 minus line 2)	36,540.		36,540.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	150,340.		150,340.
	7	Food and beverages			
	8	Entertainment	26,174.		26,174.
	9	Other direct expenses	355,636.		355,636.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			532,150.
11	Net income summary. Subtract line 10 from line 3, column (d)			-495,610.	

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 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 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

2018

**Open to Public
Inspection**

Name of the organization **FOOD BANK FOR NEW YORK CITY** Employer identification number **13-3179546**

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 noncash assistance	(h) Purpose of grant or assistance
ABRAHAM HOUSE INC. 342 WILLIS AVENUE BRONX, NY 10454	13-3721924	501(C)(3)	0.	11,899.	FMV	FOOD	PROGRAM SUPPORT
ABRIGO DEL ALTISIMO 2009 MONTEREY AVENUE BRONX, NY 10457	11-2870965	501(C)(3)	0.	122,301.	FMV	FOOD	PROGRAM SUPPORT
ABUNDANT GRACE FOR THE FORSAKEN FOOD PANTRY - 3101 EASTCHESTER ROAD - BRONX, NY 10469	47-2400616	501(C)(3)	0.	33,592.	FMV	FOOD	PROGRAM SUPPORT
ABUNDANT LIFE TABERNACLE INC 2692 3RD AVENUE BRONX, NY 10454	13-2983499	501(C)(3)	0.	19,760.	FMV	FOOD	PROGRAM SUPPORT
ACS - THE ADMINISTRATION FOR CHILDREN'S SERVICES - 2501 GRAND CONCOURSE, 5TH FLOOR - BRONX, NY 10468	13-6400434	501(C)(3)	0.	11,025.	FMV	FOOD	PROGRAM SUPPORT
ACT OF FAITH MINISTRIES 141 MANHATTAN AVENUE BROOKLYN, NY 11206	11-3383554	501(C)(3)	0.	15,875.	FMV	FOOD	PROGRAM SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ **507.**

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

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

Schedule I (Form 990) (2018)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACTS COMMUNITY DEVELOPMENT CORP. 2114 MERMAID AVENUE BROOKLYN, NY 11224	01-6796521	501(C)(3)	0.	5,870.	FMV	FOOD	PROGRAM SUPPORT
ADMIRABLE CHURCH, INC. 1910 FLATBUSH AVENUE BROOKLYN, NY 11210	74-3089498	501(C)(3)	0.	18,482.	FMV	FOOD	PROGRAM SUPPORT
ADVENT LUTHERAN CHURCH 2504 BROADWAY NEW YORK, NY 10025	13-1635264	501(C)(3)	0.	8,219.	FMV	FOOD	PROGRAM SUPPORT
AGAPE SOCIAL SERVICES BEULAH CHURCH - 956 MARCY AVENUE - BROOKLYN, NY 11216	23-7375776	501(C)(3)	0.	27,357.	FMV	FOOD	PROGRAM SUPPORT
AGATHA HOUSE FOUNDATION 4471 MUNDY LANE BRONX, NY 10466	47-1170349	501(C)(3)	0.	16,878.	FMV	FOOD	PROGRAM SUPPORT
AGATHA HOUSE FOUNDATION-MOBILE PANTRY - 4471 MUNDY LANE - BRONX, NY 10466	69-0210637	501(C)(3)	0.	16,339.	FMV	FOOD	PROGRAM SUPPORT
AISHEL SHABBAT 1002 QUENTIN RD BROOKLYN, NY 11223	30-6043783	501(C)(3)	0.	53,439.	FMV	FOOD	PROGRAM SUPPORT
ALL NATIONS BAPTIST CHURCH OF WOODHAVEN - 86-74 80TH STREET - WOODHAVEN, NY 11421	11-1761498	501(C)(3)	0.	28,407.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
ALL PEOPLE'S CHURCH APOSTOLIC FAITH, INC. - 182 TOMPKINS AVENUE - BROOKLYN, NY 11206	11-3315069	501(C)(3)	0.	16,681.	FMV	FOOD	PROGRAM SUPPORT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLEN OUTREACH MINISTRY FEEDING PROGRAM - 111-54 MERRICK BLVD - JAMAICA, NY 11433	11-2527706	501(C)(3)	0.	13,357.	FMV	FOOD	PROGRAM SUPPORT
AMMI EVANGELICAL BAPTIST CHURCH 1799 FLATBUSH AVENUE BROOKLYN, NY 11210	11-2602988	501(C)(3)	0.	35,654.	FMV	FOOD	PROGRAM SUPPORT
ANTIOCH OUTREACH 41 WEST 124TH STREET NEW YORK, NY 10024	13-6400434	501(C)(3)	0.	10,797.	FMV	FOOD	PROGRAM SUPPORT
APOSTOLIC ASSEMBLY OF JESUS CHRIST 3808 CHURCH AVENUE BROOKLYN, NY 11203	11-3034715	501(C)(3)	0.	15,605.	FMV	FOOD	PROGRAM SUPPORT
ASCENSION OUTREACH INC. 12 WEST 11TH STREET NEW YORK, NY 10011	20-5871993	501(C)(3)	0.	19,948.	FMV	FOOD	PROGRAM SUPPORT
ATONEMENT LUTHERAN CHURCH 30-61 87TH STREET EAST ELMHURST, NY 11369	23-7042808	501(C)(3)	0.	25,380.	FMV	FOOD	PROGRAM SUPPORT
BARRIER FREE LIVING FREEDOM HOUSE 121-135 EAST 115TH STREET NEW YORK, NY 10035	54-2082229	501(C)(3)	0.	40,464.	FMV	FOOD	PROGRAM SUPPORT
BAY VIEW HOUSES RESIDENT ASSOCIATION - 2085 ROCKAWAY PARKWAY - BROOKLYN, NY 11236	03-0550191	501(C)(3)	0.	8,678.	FMV	FOOD	PROGRAM SUPPORT
BEDFORD CENTRAL PRESBYTERIAN CHURCH - 1200 DEAN STREET - BROOKLYN, NY 11216	11-1660857	501(C)(3)	0.	7,620.	FMV	FOOD	PROGRAM SUPPORT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BENSONHURST COUNCIL JEWISH ORG. 8635 21ST AVENUE BROOKLYN, NY 11214	11-2568013	501(C)(3)	0.	12,076.	FMV	FOOD	PROGRAM SUPPORT
BETHANIE FRENCH SEVENTH-DAY ADVENTIST CHURCH - 2059 BEDFORD AVENUE - BROOKLYN, NY 11226		501(C)(3)	0.	8,691.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
BETHANY BAPTIST CHURCH OF JAMAICA 157-11 111TH AVENUE JAMAICA, NY 11433	11-2538705	501(C)(3)	0.	5,538.	FMV	FOOD	PROGRAM SUPPORT
BETHANY UNITED METHODIST CHURCH 1208 ST JOHNS PLACE BROOKLYN, NY 11213	36-2167731	501(C)(3)	0.	23,763.	FMV	FOOD	PROGRAM SUPPORT
BETHEL AME CHURCH 50 WEST 132ND STREET NEW YORK, NY 10037	13-1945828	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
BETHEL GOSPEL TABERNACLE CHURCH 110-25 GUY R BREWER BLVD JAMAICA, NY 11433	11-2517879	501(C)(3)	0.	10,625.	FMV	FOOD	PROGRAM SUPPORT
BETHEL GOSPEL TABERNACLE CHURCH 110-25 GUY R BREWER BLVD JAMAICA, NY 11433	11-2517879	501(C)(3)	0.	23,948.	FMV	FOOD	PROGRAM SUPPORT
BETHEL SEVENTH-DAY ADVENTIST CHURCH - 457 GRAND AVENUE - BROOKLYN, NY 11238	11-2500161	501(C)(3)	0.	14,388.	FMV	FOOD	PROGRAM SUPPORT
BETHEL SEVENTH-DAY ADVENTIST CHURCH - 457 GRAND AVENUE - BROOKLYN, NY 11238	11-3237690	501(C)(3)	0.	28,043.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETHESDA MISSIONARY BAPTIST CHURCH 179-09 JAMAICA AVENUE JAMAICA, NY 11432	11-2673958	501(C)(3)	0.	23,395.	FMV	FOOD	PROGRAM SUPPORT
BFFY - OUR LADY OF LOURDES OUTREACH - 92-96 220TH STREET - QUEENS VILLAGE, NY 11428	11-1677499	501(C)(3)	0.	23,672.	FMV	FOOD	PROGRAM SUPPORT
BLACK FORUM OF COOP CITY INC 920 BAYCHESTER AVENUE BRONX, NY 10475	13-4052466	501(C)(3)	0.	81,907.	FMV	FOOD	PROGRAM SUPPORT
BLACK VETERANS FOR SOCIAL JUSTICE 665 WILLOUGHBY AVENUE BROOKLYN, NY 11206	11-2608389	501(C)(3)	0.	10,018.	FMV	FOOD	PROGRAM SUPPORT
BLESSED SACRAMENT CHURCH 152 WEST 71ST STREET NEW YORK, NY 10023		501(C)(3)	0.	19,901.	FMV	FOOD	PROGRAM SUPPORT
BLESSED VIRGIN MARY ST. MARY'S WINFIELD - 70-31 48TH AVENUE - WOODSIDE, NY 11377	11-1633501	501(C)(3)	4,395.	57,655.	FMV	FOOD	PROGRAM SUPPORT
BNAI RAPHAEL CHESED ORGANIZATION 3846 FLATLANDS AVENUE BROOKLYN, NY 11234	22-3884890	501(C)(3)	0.	40,201.	FMV	FOOD	PROGRAM SUPPORT
BRC HOMELESS SENIOR SERVICES 30 DELANCEY STREET NEW YORK, NY 10002	13-2736659	501(C)(3)	0.	59,198.	FMV	FOOD	PROGRAM SUPPORT
BRIDGE STREET MISSIONARY FEEDING PROGRAM - 277 STUYVESANT AVENUE - BROOKLYN, NY 11221	06-1630472	501(C)(3)	0.	21,727.	FMV	FOOD	PROGRAM SUPPORT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIGHT POINT HEALTH- QUEENS 105-04 SUTPHIN BLVD JAMAICA, NY 11435	13-3464470	501(C)(3)	0.	31,106.	FMV	FOOD	PROGRAM SUPPORT
BRIGHT TEMPLE AME CHURCH 812 FAILE STREET BRONX, NY 10474	13-3141241	501(C)(3)	0.	5,593.	FMV	FOOD	PROGRAM SUPPORT
BROADWAY COMMUNITY INC. 601 WEST 114TH STREET NEW YORK, NY 10025	13-3652817	501(C)(3)	0.	35,782.	FMV	FOOD	PROGRAM SUPPORT
BRONX ACADEMY FOR MULTI MEDIA 730 BRYANT AVENUE BRONX, NY 10474	69-0210637	501(C)(3)	0.	89,200.	FMV	FOOD	PROGRAM SUPPORT
BRONX COMMUNITY COLLEGE 2155 UNIVERSITY AVENUE BRONX, NY 10453	13-3277699	501(C)(3)	0.	18,001.	FMV	FOOD	PROGRAM SUPPORT
BRONX FULL GOSPEL TABERNACLE INC. 4221 PARK AVENUE BRONX, NY 10457	13-3521249	501(C)(3)	0.	20,525.	FMV	FOOD	PROGRAM SUPPORT
BRONX SDA CHURCH 1695 WASHINGTON AVENUE BRONX, NY 10457	13-1865286	501(C)(3)	0.	32,866.	FMV	FOOD	PROGRAM SUPPORT
BRONX TEMPLE SDA COMMUNITY SERVICES - 495 WILLIS AVENUE - BRONX, NY 10455	52-0643036	501(C)(3)	0.	34,048.	FMV	FOOD	PROGRAM SUPPORT
BRONX WORKS 80 EAST 181ST STREET BRONX, NY 10453	13-3254484	501(C)(3)	0.	12,764.	FMV	FOOD	PROGRAM SUPPORT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROOKLYN ADULT DAY HEALTH CARE 803 STERLING PLACE BROOKLYN, NY 11216	13-3464470	501(C)(3)	0.	58,292.	FMV	FOOD	PROGRAM SUPPORT
BROOKLYN RESCUE MISSION URBAN HARVEST - 919 GATES AVENUE - BROOKLYN, NY 11221	32-0019367	501(C)(3)	0.	21,993.	FMV	FOOD	PROGRAM SUPPORT
BROOKS MEMORIAL UMC 143-22 109TH AVENUE JAMAICA, NY 11435	36-2167731	501(C)(3)	0.	8,074.	FMV	FOOD	PROGRAM SUPPORT
BROWN MEMORIAL BAPTIST CHURCH FOOD PANTRY - 484 WASHINGTON AVENUE - BROOKLYN, NY 11238	11-1962041	501(C)(3)	0.	14,664.	FMV	FOOD	PROGRAM SUPPORT
BROWNSVILLE SDA TEMPLE 1085 CLARKSON AVENUE BROOKLYN, NY 11212	02-0632575	501(C)(3)	0.	70,240.	FMV	FOOD	PROGRAM SUPPORT
CABRINI IMMIGRANT SERVICES 139 HENRY STREET NEW YORK, NY 10002	13-3742893	501(C)(3)	0.	8,441.	FMV	FOOD	PROGRAM SUPPORT
CALDWELL TEMPLE AME ZION CHURCH 1288 REV JAMES A POLITE AVENUE BRONX, NY 10459	19-4171987	501(C)(3)	0.	12,401.	FMV	FOOD	PROGRAM SUPPORT
CALVARY AME CHURCH 790 HERKIMER STREET BROOKLYN, NY 11233	53-0204696	501(C)(3)	12,500.	16,513.	FMV	FOOD	PROGRAM SUPPORT
CALVARY BAPTIST CHURCH 111-10 GUY R BREWER BOULEVARD JAMAICA, NY 11433	11-2480945	501(C)(3)	0.	6,614.	FMV	EQUIPMENT	PROGRAM SUPPORT

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CALVARY FREE WILL BAPTIST CHURCH 1520-30 HERKIMER STREET BROOKLYN, NY 11207	23-7076024	501(C)(3)	0.	42,129.	FMV	FOOD	PROGRAM SUPPORT
CAMBA FOOD PANTRY 21 SNYDER AVENUE BROOKLYN, NY 11226	11-2480339	501(C)(3)	0.	10,546.	FMV	FOOD	PROGRAM SUPPORT
CARIBBEAN AMERICAN STEELPAN EDUCATION CENTER - 511 ELTON STREET - BROOKLYN, NY 11208	11-3259424	501(C)(3)	0.	18,038.	FMV	FOOD	PROGRAM SUPPORT
CATHEDRAL COMMUNITY CARES 1047 AMSTERDAM AVENUE NEW YORK, NY 10025	13-3839228	501(C)(3)	0.	21,796.	FMV	FOOD	PROGRAM SUPPORT
CATHEDRAL OF JOY CDC 43 GEORGE STREET BROOKLYN, NY 11206	23-7149275	501(C)(3)	0.	53,298.	FMV	FOOD	PROGRAM SUPPORT
CATHOLIC CHARITIES WASHINGTON HEIGHTS FOOD PANTRY - 402 EAST 152ND STREET - BRONX, NY 10455	13-5562185	501(C)(3)	20,515.	48,635.	FMV	FOOD	PROGRAM SUPPORT
CCNS-BFFY @ OUR LADY OF SOLACE 2866 WEST 17TH STREET BROOKLYN, NY 11224	11-2047151	501(C)(3)	0.	30,744.	FMV	FOOD	PROGRAM SUPPORT
CCNS-BROOKLYN WEST FAMILY CENTER 333 HART STREET BROOKLYN, NY 11206	11-2047151	501(C)(3)	0.	19,265.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
CCNS-OUR LADY OF MIRACLES-CANARSIE CLUSTER CENTER - 757 EAST 86TH STREET - BROOKLYN, NY 11236	11-1715971	501(C)(3)	0.	14,070.	FMV	FOOD	PROGRAM SUPPORT

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CCNS-RIVERDALE OSBORNE 440 WATKINS STREET BROOKLYN, NY 11212	11-2047151	501(C)(3)	0.	6,430.	FMV	FOOD	PROGRAM SUPPORT
CENTER OF HOPE INTERNATIONAL 38-49 12TH STREET LONG ISLAND CITY, NY 11101	11-2919760	501(C)(3)	0.	8,903.	FMV	FOOD	PROGRAM SUPPORT
CENTRAL SYNAGOGUE CARING COMMUNITY 123 EAST 55TH STREET NEW YORK, NY 10022	13-1628161	501(C)(3)	0.	34,936.	FMV	FOOD	PROGRAM SUPPORT
CHANCE FOR CHILDREN 11 MCKEEVER PLACE BROOKLYN, NY 11225	11-3321718	501(C)(3)	0.	13,768.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
CHRIST ABUNDANT LIFE MINISTRIES 121 GRANDVIEW AVENUE STATEN ISLAND, NY 10303	13-4193844	501(C)(3)	0.	31,463.	FMV	FOOD	PROGRAM SUPPORT
CHRIST AND ST. STEPHEN'S FOOD PANTRY - 120 WEST 69TH STREET - NEW YORK, NY 10023	13-1655275	501(C)(3)	0.	29,591.	FMV	FOOD	PROGRAM SUPPORT
CHRIST APOSTOLIC CHURCH GOKE FOOD PANTRY - 622 CORTELYOU ROAD - BROOKLYN, NY 11218	13-3393519	501(C)(3)	0.	23,741.	FMV	FOOD	PROGRAM SUPPORT
CHRIST APOSTOLIC CHURCH WOSEM 442 EAST 183RD STREET BRONX, NY 10458	11-3260747	501(C)(3)	0.	38,879.	FMV	FOOD	PROGRAM SUPPORT
CHRIST CHURCH INTERNATIONAL JOSEPH'S HOUSE - 122-20 MERRILL STREET - JAMAICA, NY 11434	11-2698664	501(C)(3)	0.	10,484.	FMV	FOOD	PROGRAM SUPPORT

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

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CHRIST DISCIPLES INTERNATIONAL MINISTRIES - 3021-33 WEBSTER AVENUE - BRONX, NY 10467	69-0210637	501(C)(3)	9,343.	119,912.	FMV	FOOD	PROGRAM SUPPORT
CHRIST JESUS BAPTIST CHURCH 1812 WHITE PLAINS RD BRONX, NY 10462	13-3697025	501(C)(3)	0.	56,492.	FMV	FOOD	PROGRAM SUPPORT
CHRIST TEMPLE OF THE APOSTOLIC FAITH - 13-17 W 128TH STREET - NEW YORK, NY 10027	13-3037719	501(C)(3)	0.	15,673.	FMV	FOOD	PROGRAM SUPPORT
CHRIST THE ROCK INTERNATIONAL 2324 PITKIN AVENUE BROOKLYN, NY 11208	11-3311113	501(C)(3)	0.	25,343.	FMV	FOOD	PROGRAM SUPPORT
CHRISTIAN CROSSROADS 130 WATKINS STREET BROOKLYN, NY 11212	11-2991531	501(C)(3)	0.	23,090.	FMV	FOOD	PROGRAM SUPPORT
CHRISTIAN CULTURAL CENTER 716 CHESTER STREET BROOKLYN, NY 11212	11-2732579	501(C)(3)	0.	46,018.	FMV	FOOD	PROGRAM SUPPORT
CHRISTIAN FELLOWSHIP SDA COMMUNITY SVCS FP - 777-779 SCHENECTADY AVENUE - BROOKLYN, NY 11203	52-0643036	501(C)(3)	0.	20,109.	FMV	FOOD	PROGRAM SUPPORT
CHRISTIAN PENTECOSTAL CHURCH 910 RICHMOND ROAD STATEN ISLAND, NY 10304	13-6122698	501(C)(3)	1,055.	27,141.	FMV	FOOD	PROGRAM SUPPORT
CHRISTINA HOME CARE FOOD PANTRY 120-13 LIBERTY AVE JAMAICA, NY 11419	13-3959333	501(C)(3)	0.	35,976.	FMV	FOOD	PROGRAM SUPPORT

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

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CHURCH OF GOD IN CHRIST 627-29 REMSEN AVENUE BROOKLYN, NY 11236	11-3281623	501(C)(3)	0.	12,425.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF GOD INC. 1011 WINTHROP STREET BROOKLYN, NY 11212	31-1576158	501(C)(3)	0.	8,066.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF GOD OF PROPHECY 71 MALTA STREET BROOKLYN, NY 11207	11-2696904	501(C)(3)	0.	43,338.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF GOD OF SALVATION 1615 NOSTRAND AVENUE BROOKLYN, NY 11226	11-7051029	501(C)(3)	0.	23,292.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF PRAISE AND WORSHIP GOD IN CHRIST - 526 RALPH AVENUE - BROOKLYN, NY 11233	27-3136327	501(C)(3)	0.	6,364.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF ST. FRANCES OF ROME 760 WHITEHALL PLACE BRONX, NY 10466	13-1740199	501(C)(3)	0.	66,601.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF ST. MARK 1417 UNION STREET BROOKLYN, NY 11213	11-1694941	501(C)(3)	0.	36,194.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF ST. PAUL THE APOSTLE 405 WEST 59TH STREET NEW YORK, NY 10019	13-2689015	501(C)(3)	0.	8,364.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF THE ANNUNCIATION 88 CONVENT AVENUE NEW YORK, NY 10027	53-0196617	501(C)(3)	0.	17,235.	FMV	FOOD	PROGRAM SUPPORT

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CHURCH OF THE ATONEMENT FOOD PANTRY - 1344 BEACH AVENUE - BRONX, NY 10472	13-2553815	501(C)(3)	0.	33,030.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF THE HOLY SPIRIT 1712 45TH STREET BROOKLYN, NY 11204	11-2047151	501(C)(3)	0.	26,762.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF THE INCARNATION 89-28 207TH STREET QUEENS VILLAGE, NY 11427	11-2047151	501(C)(3)	0.	20,929.	FMV	FOOD	PROGRAM SUPPORT
CHURCH OF THE LIVING GOD 212 SCHENECTADY AVENUE BROOKLYN, NY 11213	11-3127347	501(C)(3)	0.	7,681.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
CIENFUEGOS FOUNDATION, INC. 3117 21ST STREET LONG ISLAND CITY, NY 11106	46-5281123	501(C)(3)	0.	26,959.	FMV	FOOD	PROGRAM SUPPORT
CITY OF FAITH CHURCH OF GOD 3453 WHITE PLAINS ROAD BRONX, NY 10467	13-3269503	501(C)(3)	0.	25,514.	FMV	FOOD	PROGRAM SUPPORT
COME WORLD MINISTRIES, INC. 1034 PROSPECT AVENUE BRONX, NY 10459	13-3507901	501(C)(3)	0.	32,383.	FMV	FOOD	PROGRAM SUPPORT
COMMUNITY ALLIANCE INITIATIVE 60-85 MYRTLE AVENUE RIDGEWOOD, NY 11385	46-4351145	501(C)(3)	0.	8,993.	FMV	FOOD	PROGRAM SUPPORT
COMMUNITY FOOD PANTRY AT HIGHBRIDGE - 1363 OGDEN AVENUE - BRONX, NY 10452	80-0010627	501(C)(3)	0.	7,479.	FMV	FOOD	PROGRAM SUPPORT

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COMMUNITY HEALTH ACTION OF STATEN ISLAND - 2134 RICHMOND TERRACE - STATEN ISLAND, NY 10302	13-3556132	501(C)(3)	0.	29,997.	FMV	FOOD	PROGRAM SUPPORT
COMMUNITY HEALTH ACTION OF STATEN ISLAND INC. - 2134 RICHMOND TERRACE - STATEN ISLAND, NY 10302	13-3556132	501(C)(3)	0.	14,473.	FMV	FOOD	PROGRAM SUPPORT
COMMUNITY IMPACT FOOD PANTRY 616 WEST 114TH STREET NEW YORK, NY 10025	13-3386904	501(C)(3)	0.	14,067.	FMV	FOOD	PROGRAM SUPPORT
COMMUNITY LEAGUE OF THE HEIGHTS 508 WEST 159TH STREET NEW YORK, NY 10032	13-2564241	501(C)(3)	0.	6,578.	FMV	FOOD	PROGRAM SUPPORT
CONGREGATION BNAI JESHURUN 257 WEST 88TH STREET NEW YORK, NY 10024	13-0594858	501(C)(3)	0.	25,160.	FMV	FOOD	PROGRAM SUPPORT
CONVENT AVENUE BAPTIST CHURCH 425 WEST 144TH STREET NEW YORK, NY 10031	13-1769584	501(C)(3)	0.	8,621.	FMV	FOOD	PROGRAM SUPPORT
CO-OP CITY SEVENTH DAY ADVENTIST CHURCH - 1010 BAYCHESTER AVENUE - BRONX, NY 10475	52-0643036	501(C)(3)	0.	7,633.	FMV	FOOD	PROGRAM SUPPORT
CORE SERVICES GROUP 771 MACDONOUGH STREET BROOKLYN, NY 11233	69-0210637	501(C)(3)	0.	30,194.	FMV	FOOD	PROGRAM SUPPORT
CORNERSTONE BAPTIST FOOD PANTRY 562-574 MADISON STREET BROOKLYN, NY 11221	11-2028472	501(C)(3)	0.	38,978.	FMV	FOOD	PROGRAM SUPPORT

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CORNERSTONE SDA CHURCH 138 PENNSYLVANIA AVENUE BROOKLYN, NY 11207	11-3234267	501(C)(3)	0.	17,561.	FMV	FOOD	PROGRAM SUPPORT
CORONA SDA CHURCH 35-30 103RD STREET CORONA, NY 11368	13-1865286	501(C)(3)	0.	31,634.	FMV	FOOD	PROGRAM SUPPORT
CORPUS CHRISTI FOOD PANTRY 31-31 60TH STREET WOODSIDE, NY 11377	13-1840399	501(C)(3)	0.	21,462.	FMV	FOOD	PROGRAM SUPPORT
COUNCIL OF AID FOR CENTRAL ASIAN JEWS - 75-02 113TH STREET - FOREST HILLS, NY 11375	11-3383509	501(C)(3)	0.	24,156.	FMV	FOOD	PROGRAM SUPPORT
COVENANT HOUSE 550 10TH AVENUE NEW YORK, NY 10018	13-2725416	501(C)(3)	0.	46,054.	FMV	FOOD	PROGRAM SUPPORT
CREATE INC. FRANCISCAN HANDMAIDS OF MARY - 73 LENOX AVENUE - NEW YORK, NY 10026	13-2739938	501(C)(3)	0.	10,347.	FMV	FOOD	PROGRAM SUPPORT
CRESTON AVENUE BAPTIST CHURCH 114 EAST 188TH STREET BRONX, NY 10468	13-1813811	501(C)(3)	0.	24,196.	FMV	FOOD	PROGRAM SUPPORT
CROSSOVER BAPTIST CHURCH COMM. OUTREACH HELP CNTR. - 85-12 101ST AVENUE - OZONE PARK, NY 11416	11-2844973	501(C)(3)	0.	8,885.	FMV	FOOD	PROGRAM SUPPORT
CROSSROADS COMMUNITY SERVICES INC. 108 EAST 51ST STREET NEW YORK, NY 10022	13-5651315	501(C)(3)	0.	51,959.	FMV	FOOD	PROGRAM SUPPORT

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CROWN HEIGHTS JEWISH COMMUNITY COUNCIL - 899 MONTGOMERY STREET - BROOKLYN, NY 11213	11-2322490	501(C)(3)	0.	24,789.	FMV	FOOD	PROGRAM SUPPORT
CUYLER WARREN UNITED METHODIST CHURCH - 424 DEAN STREET - BROOKLYN, NY 11217	36-2167731	501(C)(3)	0.	22,338.	FMV	FOOD	PROGRAM SUPPORT
DAVIDSON COMMUNITY CENTER 2038 DAVIDSON AVENUE BRONX, NY 10453	23-7010206	501(C)(3)	0.	9,778.	FMV	FOOD	PROGRAM SUPPORT
DELIVERANCE TEMPLE CHURCH 134-10 ROCKAWAY BOULEVARD SOUTH OZONE PARK, NY 11420	11-2867086	501(C)(3)	0.	22,128.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
DEPARTMENT OF PROBATION 162-24 JAMAICA AVENUE JAMAICA, NY 11432	13-6400434	501(C)(3)	5,700.	245,838.	FMV	FOOD	PROGRAM SUPPORT
DEWITT REFORMED CHURCH 280 RIVINGTON STREET NEW YORK, NY 10002	13-2550948	501(C)(3)	0.	26,840.	FMV	FOOD	PROGRAM SUPPORT
DIVINE TRUTH MINISTRY 215-31 99TH AVENUE QUEENS VILLAGE, NY 11429	11-3100418	501(C)(3)	0.	33,223.	FMV	FOOD	PROGRAM SUPPORT
E JOY COMMUNITY RESOURCES CENTER INC. - 29-10 THOMSON AVENUE - LONG ISLAND CITY, NY 11101	26-4403049	501(C)(3)	0.	79,703.	FMV	FOOD	PROGRAM SUPPORT
EAST BRONX ACADEMY FOR THE FUTURE 1716 SOUTHERN BOULEVARD BRONX, NY 10460	69-0210637	501(C)(3)	0.	27,216.	FMV	FOOD	PROGRAM SUPPORT

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EBENEZER WESLEY METHODIST CHURCH 47 ROGERS AVENUE BROOKLYN, NY 11216	11-2676895	501(C)(3)	0.	15,813.	FMV	FOOD	PROGRAM SUPPORT
EL AMANECER DE LA ESPERANZA MINISTRY, INC. - 1769 EAST 172ND STREET - BRONX, NY 10472	13-3305576	501(C)(3)	0.	23,113.	FMV	FOOD	PROGRAM SUPPORT
ELMCOR YOUTH & ADULT ACTIVITIES INC. - 107-20 NORTHERN BLVD - CORONA, NY 11368	11-2224539	501(C)(3)	0.	188,366.	FMV	FOOD	PROGRAM SUPPORT
ELOHIM COMMUNITY DEVELOPMENT AND OUTREACH INC. - 87-47 111TH STREET - RICHMOND HILL, NY 11418	06-1693124	501(C)(3)	0.	7,000.	FMV	FOOD	PROGRAM SUPPORT
EMANUEL PENTECOSTAL FAITH CHURCH 1310 ELDER AVENUE BRONX, NY 10472	13-6135307	501(C)(3)	0.	32,086.	FMV	FOOD	PROGRAM SUPPORT
EMMAUS HOUSE INC. 160 WEST 120TH STREET NEW YORK, NY 10027	13-2580509	501(C)(3)	0.	16,105.	FMV	FOOD	PROGRAM SUPPORT
EMMAUS SDA CHURCH 1144 FLATBUSH AVE BROOKLYN, NY 11226	69-0210637	501(C)(3)	0.	5,040.	FMV	FOOD	PROGRAM SUPPORT
ENTRADA ACADEMY 977 FOX STREET BRONX, NY 10459	69-0210637	501(C)(3)	0.	53,435.	FMV	FOOD	PROGRAM SUPPORT
ESTHER GRUNBLAT CENTER OF CENTRAL QUEENS - 66-05 108TH STREET - FOREST HILLS, NY 11375	11-1633509	501(C)(3)	0.	68,409.	FMV	FOOD	PROGRAM SUPPORT

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EVANGEL FOOD PANTRY 39-21 CRESENT ST. LONG ISLAND CITY, NY 11101	13-6400434	501(C)(3)	0.	56,806.	FMV	FOOD	PROGRAM SUPPORT
EVANGELICAL CHURCH CHRIST IS THE LIGHT - 89-16 48TH AVENUE - ELMHURST, NY 11373	11-2778293	501(C)(3)	0.	41,861.	FMV	FOOD	PROGRAM SUPPORT
EVANGELICAL GARIFUNA CHURCH 344 BROOK AVENUE BRONX, NY 10454	13-3996637	501(C)(3)	1,185.	79,414.	FMV	FOOD	PROGRAM SUPPORT
EVERY DAY IS A MIRACLE - HARVEST HAND FOOD PANTRY - 2626 EAST TREMONT AVENUE - BRONX, NY 10561	64-1236598	501(C)(3)	0.	9,620.	FMV	FOOD	PROGRAM SUPPORT
EVERY DAY IS A MIRACLE CO THE ALMOND TREE CHURCH - 2427 MORRIS AVENUE - BRONX, NY 10468	27-4262907	501(C)(3)	0.	31,684.	FMV	FOOD	PROGRAM SUPPORT
FACES NY INC. 123 WEST 115TH STREET NEW YORK, NY 10026	13-3449087	501(C)(3)	0.	12,191.	FMV	FOOD	PROGRAM SUPPORT
FAITH APOSTOLIC GOSPEL TEMPLE 3956 BRONXWOOD AVENUE BRONX, NY 10466	13-2553815	501(C)(3)	2,117.	72,567.	FMV	FOOD	PROGRAM SUPPORT
FAITH BASED FOOD DISTRIBUTION DEV. CORP. - 121 CHAUNCEY STREET - BROOKLYN, NY 11233	53-0204696	501(C)(3)	0.	68,982.	FMV	FOOD	PROGRAM SUPPORT
FAMILY LIFE DEVELOPMENT CENTER 1476 BEDFORD AVENUE BROOKLYN, NY 11216	31-1741545	501(C)(3)	0.	7,415.	FMV	FOOD	PROGRAM SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILY SERVICES NETWORK OF NY, INC. - 1420 BUSHWICK AVENUE - BROOKLYN, NY 11207	11-2592651	501(C)(3)	0.	38,707.	FMV	FOOD	PROGRAM SUPPORT
FAMILY WORSHIP CENTER CHURCH OF GOD OF PROPHECY - 3031 CROSS BRONX EXPRESSWAY EXT - BRONX, NY 10465	86-1071955	501(C)(3)	0.	26,986.	FMV	FOOD	PROGRAM SUPPORT
FATHER CREAVINS FOOD PANTRY 276 WEST 151ST STREET NEW YORK, NY 10039		501(C)(3)	0.	45,884.	FMV	FOOD	PROGRAM SUPPORT
FATHER'S HEART MINISTRIES 543-545 EAST 11TH STREET NEW YORK, NY 10009	22-3495873	501(C)(3)	0.	66,189.	FMV	FOOD	PROGRAM SUPPORT
FEED MY SHEEP COMMUNITY PANTRY 1104 ELDER AVENUE #15 BRONX, NY 10472	13-3786404	501(C)(3)	0.	105,322.	FMV	FOOD	PROGRAM SUPPORT
FEEDING WITH TLC, INC. 175 BEACH STREET STATEN ISLAND, NY 10304	14-4129070	501(C)(3)	0.	10,607.	FMV	FOOD	PROGRAM SUPPORT
FELLOWSHIP COVENANT CHURCH 720 CASTLE HILL AVENUE BRONX, NY 10473	13-3961490	501(C)(3)	0.	24,380.	FMV	FOOD	PROGRAM SUPPORT
FERNANDE VALME MINISTRIES INC. 1120 FLATBUSH AVENUE BROOKLYN, NY 11226	11-2697518	501(C)(3)	0.	20,328.	FMV	FOOD	PROGRAM SUPPORT
FIRST BAPTIST CHURCH 100-10 ASTORIA BOULEVARD QUEENS, NY 11369	11-2009943	501(C)(3)	0.	85,082.	FMV	FOOD	PROGRAM SUPPORT

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

(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
FIRST CHURCH OF GOD 21-23 BIRDSALL AVENUE FAR ROCKAWAY, NY 11691	11-2973310	501(C)(3)	0.	25,695.	FMV	FOOD	PROGRAM SUPPORT
FIRST CHURCH OF GOD IN CHRIST 187-10 BAISLEY BLVD ST. ALBANS, NY 11412	11-2678382	501(C)(3)	0.	43,430.	FMV	FOOD	PROGRAM SUPPORT
FIRST PRESBYTERIAN CHURCH 124 HENRY STREET BROOKLYN, NY 11201	11-1630765	501(C)(3)	0.	18,536.	FMV	FOOD	PROGRAM SUPPORT
FIRST PRESBYTERIAN CHURCH OF JAMAICA - 89-60 164TH STREET - JAMAICA, NY 11432	11-1666813	501(C)(3)	35,840.	9,367.	FMV	FOOD	PROGRAM SUPPORT
FIRST PRESBYTERIAN CHURCH OF JAMAICA - 89-60 164TH STREET - JAMAICA, NY 11432	11-1666813	501(C)(3)	0.	15,364.	FMV	FOOD	PROGRAM SUPPORT
FIRST PRESBYTERIAN CHURCH OF SPRINGFIELD GARDENS - 216-02 137TH AVENUE - SPRINGFIELD GARDENS, NY 11413	23-6393377	501(C)(3)	0.	16,169.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
FIRST UNITED METHODIST CHURCH OF JAMAICA - 162-10 HIGHLAND AVENUE - JAMAICA, NY 11432	11-1797173	501(C)(3)	0.	22,417.	FMV	FOOD	PROGRAM SUPPORT
FLATBUSH SDA CHURCH 261 EAST 21ST STREET BROOKLYN, NY 11226	11-3399550	501(C)(3)	0.	23,841.	FMV	FOOD	PROGRAM SUPPORT
FLUSHING JEWISH COMMUNITY COUNCIL 4343 BOWNE STREET FLUSHING, NY 11355	11-2669559	501(C)(3)	0.	21,340.	FMV	FOOD	PROGRAM SUPPORT

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FOOD AND NUTRITION HARRY SIMMONS 1649 AMSTERDAM AVENUE NEW YORK, NY 10031	69-0210637	501(C)(3)	0.	13,251.	FMV	FOOD	PROGRAM SUPPORT
FOOD BANK FOR NEW YORK CITY 355 FOOD CENTER DRIVE BRONX, NY 10474	13-3179546	501(C)(3)	0.	61,256.	FMV	FOOD	PROGRAM SUPPORT
FOOD FIRST, INC. 165 CONOVER STREET BROOKLYN, NY 11231	13-3635059	501(C)(3)	0.	32,061.	FMV	FOOD	PROGRAM SUPPORT
FOREST HILLS SENIOR CENTER 108-25 62ND DRIVE FOREST HILLS, NY 11375	69-0210637	501(C)(3)	0.	12,000.	FMV	FOOD	PROGRAM SUPPORT
FORT GREENE COUNCIL HAZEL BROOKS NEIGHBORHOOD CTR. - 961 OCEAN AVENUE, LOWER LEVEL - BROOKLYN, NY 11226	11-2300840	501(C)(3)	0.	7,180.	FMV	FOOD	PROGRAM SUPPORT
FRATERNITE NOTRE DAME 2290 1ST AVENUE NEW YORK, NY 10035	13-3600714	501(C)(3)	0.	52,797.	FMV	FOOD	PROGRAM SUPPORT
FRIENDLY HANDS MINISTRY INC. 229 EAST 118TH STREET (GROUND FLOOR NEW YORK, NY 10035	13-4126976	501(C)(3)	0.	37,195.	FMV	FOOD	PROGRAM SUPPORT
FULL EFFECT GOSPEL MINISTRIES 900 NEW LOTS AVE BROOKLYN, NY 11208	11-3439984	501(C)(3)	0.	8,619.	FMV	FOOD	PROGRAM SUPPORT
FULL GOSPEL TABERNACLE FOOD PANTRY 361 BEACH 42ND STREET FAR ROCKAWAY, NY 11691	06-1073382	501(C)(3)	0.	90,456.	FMV	FOOD	PROGRAM SUPPORT

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

(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
GARDEN OF PRAYER 1874 WASHINGTON AVENUE BRONX, NY 10457	13-3424901	501(C)(3)	0.	53,059.	FMV	FOOD	PROGRAM SUPPORT
GENESIS TRANSITIONAL HOUSING MINISTRIES INC. - 195-12 HOLLIS AVENUE - ST. ALBANS, NY 11412	16-1621304	501(C)(3)	6,651.	62,945.	FMV	FOOD	PROGRAM SUPPORT
GETHSEMANE BAPTIST CHURCH 771 FAIRMOUNT PLACE BRONX, NY 10460	13-3340224	501(C)(3)	0.	21,237.	FMV	FOOD	PROGRAM SUPPORT
GETHSEMANE SDA CHURCH 357 EMPIRE BLVD. BROOKLYN, NY 11225	69-0210637	501(C)(3)	0.	24,890.	FMV	FOOD	PROGRAM SUPPORT
GETHSEMANE SOUL SAVING OUTREACH 145-41 228TH STREET ROSEDALE, NY 11413	11-2596494	501(C)(3)	0.	106,392.	FMV	FOOD	PROGRAM SUPPORT
GIVE THEM TO EAT 800 EAST 156TH STREET BRONX, NY 10455	13-2548177	501(C)(3)	0.	23,892.	FMV	FOOD	PROGRAM SUPPORT
GLOVER MEMORIAL 2134 DEAN STREET BROOKLYN, NY 11233	11-3234267	501(C)(3)	0.	22,478.	FMV	FOOD	PROGRAM SUPPORT
GOD'S BATTALION PRAYER CHURCH 661 LINDEN BOULEVARD BROOKLYN, NY 11203	11-2412215	501(C)(3)	0.	11,391.	FMV	FOOD	PROGRAM SUPPORT
GOD'S DELIVERANCE TEMPLE, INC. 438 RALPH AVENUE BROOKLYN, NY 11233	51-0174981	501(C)(3)	0.	19,925.	FMV	FOOD	PROGRAM SUPPORT

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

(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
GOOD COUNSEL HOMES 38 WIMAN PLACE STATEN ISLAND, NY 10305	22-2831271	501(C)(3)	0.	5,002.	FMV	FOOD	PROGRAM SUPPORT
GOOD NEIGHBOR PRESBYTERIAN CHURCH 115 EAST 106TH STREET NEW YORK, NY 10029	13-6193500	501(C)(3)	0.	36,052.	FMV	FOOD	PROGRAM SUPPORT
GOOD NEWS DELIVERANCE TABERNACLE 442 CLEVELAND STREET BROOKLYN, NY 11208	59-3761889	501(C)(3)	3,900.	62,391.	FMV	FOOD	PROGRAM SUPPORT
GOOD SHEPHERD FOOD PANTRY 104 COOPER STREET NEW YORK, NY 10034		501(C)(3)	0.	36,667.	FMV	FOOD	PROGRAM SUPPORT
GOSPEL ASSEMBLY FOOD PANTRY 109-14 FARMERS BOULEVARD JAMAICA, NY 11412	31-1807726	501(C)(3)	0.	32,311.	FMV	FOOD	PROGRAM SUPPORT
GOSPEL TABERNACLE CHURCH OF JESUS CHRIST INC. - 2314 SNYDER AVENUE - BROOKLYN, NY 11226	11-2865149	501(C)(3)	0.	40,118.	FMV	FOOD	PROGRAM SUPPORT
GRACE EPISCOPAL CHURCH 1909 VYSE AVENUE BRONX, NY 10460	13-3055547	501(C)(3)	0.	50,843.	FMV	FOOD	PROGRAM SUPPORT
GRACE REFORMED CHURCH OF FLATBUSH 1800 BEDFORD AVENUE BROOKLYN, NY 11225	11-1630804	501(C)(3)	0.	16,382.	FMV	FOOD	PROGRAM SUPPORT
GRAND CENTRAL FOOD PROGRAM 210 EAST 124TH STREET NEW YORK, NY 10029		501(C)(3)	0.	13,474.	FMV	FOOD	PROGRAM SUPPORT

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GRAND CENTRAL NEIGHBORHOOD SOCIAL SERVICE CORP. - 120 EAST 32ND STREET - NEW YORK, NY 10016	13-3534255	501(C)(3)	0.	12,080.	FMV	FOOD	PROGRAM SUPPORT
GRAND CONCOURSE SDA CHURCH, INC. 1275 GRAND CONCOURSE BRONX, NY 10452	13-3558483	501(C)(3)	0.	30,141.	FMV	FOOD	PROGRAM SUPPORT
GREATER CENTRAL BAPTIST CHURCH 2152-58 FIFTH AVENUE NEW YORK, NY 10037	13-3225860	501(C)(3)	0.	168,889.	FMV	FOOD	PROGRAM SUPPORT
GREATER SPRINGFIELD COMMUNITY CHURCH - 177-06 129TH AVENUE - JAMAICA, NY 11434	11-2299728	501(C)(3)	0.	12,496.	FMV	FOOD	PROGRAM SUPPORT
GREATER TABERNACLE BAPTIST CHURCH 340 CONVENT AVENUE NEW YORK, NY 10031	13-2953539	501(C)(3)	0.	13,069.	FMV	FOOD	PROGRAM SUPPORT
H. KELLY TEMPLE C.O.G.I.C 1805 REDFERN AVENUE FAR ROCKAWAY, NY 11691	11-2652537	501(C)(3)	0.	31,148.	FMV	FOOD	PROGRAM SUPPORT
HABER HOUSE SENIOR CENTER 3024 WEST 24TH STREET BROOKLYN, NY 11224	11-2665181	501(C)(3)	0.	13,244.	FMV	FOOD	PROGRAM SUPPORT
HAITIAN EVANGELICAL CLERGY 1139 BUSHWICK AVENUE BROOKLYN, NY 11221	46-0501644	501(C)(3)	0.	6,570.	FMV	FOOD	PROGRAM SUPPORT
HANNAH KOSHER FOOD SHABBAT FOUNDATION - 2102 AVENUE T - BROOKLYN, NY 11229	48-1289649	501(C)(3)	0.	23,326.	FMV	FOOD	PROGRAM SUPPORT

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HANSON PLACE SDA COMMUNITY SERVICE 150 SOUTH PORTLAND AVENUE BROOKLYN, NY 11217	52-0643036	501(C)(3)	0.	125,407.	FMV	FOOD	PROGRAM SUPPORT
HARLEM COMMUNITY NUTRITIONAL SERVICES - 132 WEST 125TH STREET - NEW YORK, NY 10027	06-1741105	501(C)(3)	390.	16,621.	FMV	FOOD	PROGRAM SUPPORT
HARLEM DOWLING WEST SIDE CENTER 2139 ADAM CLAYTON POWELL JR BOULEVA NEW YORK, NY 10027	13-3030378	501(C)(3)	0.	8,702.	FMV	FOOD	PROGRAM SUPPORT
HARVEST OF SOULS 13-15 EAST 125TH STREET NEW YORK, NY 10035	13-3793553	501(C)(3)	0.	37,142.	FMV	FOOD	PROGRAM SUPPORT
HEALTH ESSENTIAL ASSOCIATION 2101 EAST 16TH STREET BROOKLYN, NY 11229	45-2871053	501(C)(3)	0.	69,011.	FMV	FOOD	PROGRAM SUPPORT
HEAVENLY VISION CHRISTIAN CENTER 2868 JEROME AVENUE BRONX, NY 10468	13-3706003	501(C)(3)	0.	34,361.	FMV	FOOD	PROGRAM SUPPORT
HEBRON SDA CHURCH 1256 DEAN STREET BROOKLYN, NY 11216	52-0643036	501(C)(3)	0.	23,717.	FMV	FOOD	PROGRAM SUPPORT
HELP USA BRONX 285 EAST 171ST STREET BRONX, NY 10457	13-3507989	501(C)(3)	0.	5,097.	FMV	FOOD	PROGRAM SUPPORT
HILLSIDE HOUSE 163-03 89TH AVENUE JAMAICA, NY 11432	13-3678724	501(C)(3)	0.	41,225.	FMV	FOOD	PROGRAM SUPPORT

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HOLDING HANDS MINISTRIES 6324 7TH AVENUE BROOKLYN, NY 11220	46-0679566	501(C)(3)	0.	17,222.	FMV	FOOD	PROGRAM SUPPORT
HOLLIS COMMUNITY CHRISTIAN CHURCH 191-22 JAMAICA AVENUE HOLLIS, NY 11423	26-3281241	501(C)(3)	6,538.	151,156.	FMV	FOOD	PROGRAM SUPPORT
HOLLIS PRESBYTERIAN CHURCH 100-50 196TH STREET HOLLIS, NY 11423	11-1631786	501(C)(3)	0.	32,907.	FMV	FOOD	PROGRAM SUPPORT
HOLY APOSTLES SOUP KITCHEN 296 9TH AVENUE NEW YORK, NY 10001	13-2892297	501(C)(3)	0.	28,738.	FMV	FOOD	PROGRAM SUPPORT
HOLY CROSS CHURCH CROSSROADS 329 WEST 42ND STREET NEW YORK, NY 10036	13-1656612	501(C)(3)	0.	35,201.	FMV	FOOD	PROGRAM SUPPORT
HOLY CROSS CHURCH FOOD PANTRY 2530 CHURCH AVENUE BROOKLYN, NY 11226	11-1666822	501(C)(3)	0.	6,877.	FMV	FOOD	PROGRAM SUPPORT
HOLY GHOST UPPER ROOM FILING STATION MINISTRY INC. - 146-17 133RD AVENUE - JAMAICA, NY 11436	16-1679213	501(C)(3)	0.	19,681.	FMV	FOOD	PROGRAM SUPPORT
HOLY INNOCENTS 279 EAST 17TH STREET BROOKLYN, NY 11226	11-1666825	501(C)(3)	0.	7,390.	FMV	FOOD	PROGRAM SUPPORT
HOLY NAME FOOD PANTRY 207 WEST 96TH STREET NEW YORK, NY 10025	81-2699412	501(C)(3)	0.	13,067.	FMV	FOOD	PROGRAM SUPPORT

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HOLY TEMPLE CHURCH INC. 136-25 SPRINGFIELD BLVD SPRINGFIELD GARDENS, NY 11413	11-3124463	501(C)(3)	0.	8,380.	FMV	FOOD	PROGRAM SUPPORT
HOPE CITY EMPOWERMENT CENTER 650-656 WASHINGTON AVENUE BROOKLYN, NY 11238	11-3629292	501(C)(3)	0.	10,414.	FMV	FOOD	PROGRAM SUPPORT
HOPE FOR THE FUTURE MINISTRIES 131 VERDI STREET FARMINGDALE, NY 11735	11-2967943	501(C)(3)	0.	12,522.	FMV	FOOD	PROGRAM SUPPORT
HOREB SDA COMMUNITY SERVICES 520 KINGSTON AVENUE BROOKLYN, NY 11225	11-3295780	501(C)(3)	0.	13,248.	FMV	FOOD	PROGRAM SUPPORT
HOSTOS COMMUNITY COLLEGE 120 WALTON AVE BRONX, NY 10451	13-0289080	501(C)(3)	0.	33,560.	FMV	FOOD	PROGRAM SUPPORT
HOUR CHILDREN COMMUNITY OUTREACH 36-49 11TH STREET LONG ISLAND CITY, NY 11106	13-3647412	501(C)(3)	0.	7,226.	FMV	FOOD	PROGRAM SUPPORT
HOUSE OF COMPLETION COMMUNITY DEVELOPMENT - 112-07 GUY R BREWER BLVD - JAMAICA, NY 11433	11-3094604	501(C)(3)	0.	38,970.	FMV	FOOD	PROGRAM SUPPORT
HOUSING OPTIONS & GERIATRIC ASSOCIATION RESOURCES - 732 EAST 152ND STREET - BRONX, NY 10455	13-3887707	501(C)(3)	0.	49,482.	FMV	FOOD	PROGRAM SUPPORT
HS 440 X DEWITT CLINTON HIGH SCHOOL - 100 WEST MOSHOLU PARKWAY SOUTH - BRONX, NY 10468	69-0210637	501(C)(3)	0.	40,969.	FMV	FOOD	PROGRAM SUPPORT

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I.S. 229 X 275 HARLEM RIVER PARK BRIDGE BRONX, NY 10453	69-0210637	501(C)(3)	0.	37,929.	FMV	FOOD	PROGRAM SUPPORT
ICNA RELIEF USA 87-91 144TH STREET JAMAICA, NY 11435	69-0210637	501(C)(3)	0.	35,600.	FMV	FOOD	PROGRAM SUPPORT
IGLESIA ALIANZA CRISTIANA MISIONERA EBENEZER - 43-02 38TH STREET - LONG ISLAND CITY, NY 11101	11-3309562	501(C)(3)	0.	25,415.	FMV	FOOD	PROGRAM SUPPORT
IGLESIA DE DIOS DE LA PROFECIA 414 HOOPER STREET BROOKLYN, NY 11211	11-2369072	501(C)(3)	0.	18,115.	FMV	FOOD	PROGRAM SUPPORT
IGLESIA DE DIOS PENTECOSTAL 3801 DYRE AVENUE BRONX, NY 10466	11-3518348	501(C)(3)	0.	21,427.	FMV	FOOD	PROGRAM SUPPORT
IGLESIA PENTECOSTAL LA HERMOSA 3161 FULTON STREET BROOKLYN, NY 11208	51-0199562	501(C)(3)	0.	24,308.	FMV	FOOD	PROGRAM SUPPORT
IMMACULATE CONCEPTION CHURCH 754 EAST GUN HILL ROAD BRONX, NY 10467	13-4112393	501(C)(3)	0.	20,296.	FMV	FOOD	PROGRAM SUPPORT
IN THE BEGINNING OUTREACH, INC. 189-13 LIBERTY AVE ST. ALBANS, NY 11412	11-3570773	501(C)(3)	0.	38,777.	FMV	FOOD	PROGRAM SUPPORT
INFINITY BIBLE CHURCH 1326 MORRISON AVENUE BRONX, NY 10472	13-3159260	501(C)(3)	0.	26,598.	FMV	FOOD	PROGRAM SUPPORT

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INSPIRATIONAL GOSPEL ASSEMBLY 1211 BROOK AVENUE BRONX, NY 10456	69-0210637	501(C)(3)	0.	23,259.	FMV	FOOD	PROGRAM SUPPORT
INTERNATIONAL PENTECOSTAL 9202-14 CHURCH AVENUE BROOKLYN, NY 11236	11-3052243	501(C)(3)	0.	34,815.	FMV	FOOD	PROGRAM SUPPORT
IRIS HOUSE WEST SIDE FOOD PANTRY 2348 ADAM CLAYTON POWELL JR BOULEVA NEW YORK, NY 10030	13-3699201	501(C)(3)	0.	9,704.	FMV	FOOD	PROGRAM SUPPORT
ISAIAH'S TEMPLE OF MT. HOPE 862 GLENMORE AVENUE BROOKLYN, NY 11208	11-3095808	501(C)(3)	0.	24,510.	FMV	FOOD	PROGRAM SUPPORT
ISLAMIC SOCIETY OF BAY RIDGE 6807 5TH AVENUE BROOKLYN, NY 11220	11-3144804	501(C)(3)	0.	26,216.	FMV	FOOD	PROGRAM SUPPORT
J.U.S.T.I.C.E. ORGANIZATION 223 BEACH 28TH STREET FAR ROCKAWAY, NY 11691	11-3341990	501(C)(3)	0.	8,015.	FMV	FOOD	PROGRAM SUPPORT
JAMAICA HISPANIC SDA CHURCH 88-28 161 STREET JAMAICA, NY 11432	11-3072042	501(C)(3)	0.	32,345.	FMV	FOOD	PROGRAM SUPPORT
JAMAICA QUEENS WESLEYAN CHURCH 134-49 228TH STREET LAURELTON, NY 11413	11-2981859	501(C)(3)	0.	26,045.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
JAMAICA SDA CHURCH 88-28 163RD STREET JAMAICA, NY 11432	11-3480522	501(C)(3)	0.	16,067.	FMV	FOOD	PROGRAM SUPPORT

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JAN HUS HOMELESS OUTREACH AND ADVOCACY PROGRAM - 161 EAST 104TH STREET - NEW YORK, NY 10029	13-1635255	501(C)(3)	0.	39,227.	FMV	FOOD	PROGRAM SUPPORT
JASA STARRETT CITY SENIOR CENTER 1540 VAN SICLEN AVENUE BROOKLYN, NY 11239	13-2620896	501(C)(3)	0.	10,580.	FMV	FOOD	PROGRAM SUPPORT
JEWISH COMMUNITY COUNCIL OF PELHAM PARKWAY - 2157 HOLLAND AVENUE - BRONX, NY 10462	13-3099520	501(C)(3)	0.	5,140.	FMV	FOOD	PROGRAM SUPPORT
JITA COMMUNITY OUTREACH CENTER 103-02 171ST STREET JAMAICA, NY 11433	20-2129024	501(C)(3)	0.	17,883.	FMV	FOOD	PROGRAM SUPPORT
JOHN JAY COLLEGE CAMPUS PANTRY 524 WEST 59TH STREET NEW YORK, NY 10019	13-2553815	501(C)(3)	1,500.	61,640.	FMV	FOOD	PROGRAM SUPPORT
JOSHUA AND CALEB MINISTRIES INC 1688 WEBSTER AVENUE BRONX, NY 10457	11-3427128	501(C)(3)	0.	20,652.	FMV	FOOD	PROGRAM SUPPORT
JOVENES CRISTIANOS DEL BRONX 641 EAST 233RD STREET BRONX, NY 10466	26-2007243	501(C)(3)	0.	28,488.	FMV	FOOD	PROGRAM SUPPORT
KENMORE ASSOCIATES HALL 145 EAST 23RD STREET NEW YORK, NY 10010	13-3862850	501(C)(3)	0.	13,530.	FMV	FOOD	PROGRAM SUPPORT
KERITH SDA CHURCH 230-11 LINDEN BLVD CAMBRIA HEIGHTS, NY 11411	11-3558905	501(C)(3)	0.	29,813.	FMV	FOOD	PROGRAM SUPPORT

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

(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
KHALIL GIBRAN INTERNATIONAL ACADEMY - 362 SCHERMERHORN STREET - BROOKLYN, NY 11217	69-0210637	501(C)(3)	0.	32,100.	FMV	FOOD	PROGRAM SUPPORT
KING EMMANUEL COMMUNITY SERVICES 207 BAINBRIDGE STREET BROOKLYN, NY 11233	06-1548807	501(C)(3)	0.	14,674.	FMV	FOOD	PROGRAM SUPPORT
KINGSBOROUGH COMMUNITY COLLEGE 2001 ORIENTAL BLVD BROOKLYN, NY 11235	11-2620778	501(C)(3)	0.	12,923.	FMV	FOOD	PROGRAM SUPPORT
KINGSLAWN UNITED PRESBYTERIAN CHURCH - 2368 RALPH AVENUE - BROOKLYN, NY 11238	23-6393377	501(C)(3)	0.	6,738.	FMV	FOOD	PROGRAM SUPPORT
LEFRAK CITY JEWISH CENTER 98-15 HORACE HARDING EXPWY CORONA, NY 11368	11-3321101	501(C)(3)	0.	10,481.	FMV	FOOD	PROGRAM SUPPORT
LIBERTY BAPTIST CHURCH 19 GUNTHER PLACE BROOKLYN, NY 11233	11-2495580	501(C)(3)	0.	5,738.	FMV	FOOD	PROGRAM SUPPORT
LIGHTHOUSE OF HOPE OUTREACH AND RESOURCE CENTER - 66 EAST 96TH STREET - BROOKLYN, NY 11212	69-0210637	501(C)(3)	0.	48,025.	FMV	FOOD	PROGRAM SUPPORT
LITTLE SISTERS OF THE ASSUMPTION 333 EAST 115TH STREET NEW YORK, NY 10029	13-2867881	501(C)(3)	12,500.	9,105.	FMV	FOOD	PROGRAM SUPPORT
LONGWOOD PREPARATORY ACADEMY 965 LONGWOOD AVENUE BRONX, NY 10459	69-0210637	501(C)(3)	0.	9,393.	FMV	FOOD	PROGRAM SUPPORT

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LOVE FELLOWSHIP TABERNACLE 464 LIBERTY AVENUE BROOKLYN, NY 11207	11-3263606	501(C)(3)	0.	11,675.	FMV	FOOD	PROGRAM SUPPORT
LOYAL BAPTIST CHURCH 881 EAST 167TH STREET BRONX, NY 10459	13-3403285	501(C)(3)	0.	10,934.	FMV	FOOD	PROGRAM SUPPORT
MACEDONIA AME CHURCH 106-16 GUY R. BREWER BLVD. JAMAICA, NY 11433	11-3475572	501(C)(3)	0.	9,112.	FMV	FOOD	PROGRAM SUPPORT
MACEDONIA CHURCH ASSEMBLY OF GOD 340 EAST 106TH STREET NEW YORK, NY 10029	13-1950678	501(C)(3)	0.	6,058.	FMV	FOOD	PROGRAM SUPPORT
MAKE THE ROAD NEW YORK 301 GROVE STREET BROOKLYN, NY 11237	11-3344389	501(C)(3)	0.	9,113.	FMV	FOOD	PROGRAM SUPPORT
MAMRE SDA CHURCH 1623-27 UTICA AVE BROOKLYN, NY 11234	27-1704136	501(C)(3)	0.	18,646.	FMV	FOOD	PROGRAM SUPPORT
MARANATHA SDA CHURCH 899 WINTHROP STREET BROOKLYN, NY 11203	52-0643036	501(C)(3)	0.	19,623.	FMV	FOOD	PROGRAM SUPPORT
MASBIA OF BORO PARK 5402 NEW UTRECT AVE BROOKLYN, NY 11219	69-0210637	501(C)(3)	0.	61,852.	FMV	FOOD	PROGRAM SUPPORT
MASBIA OF FLATBUSH 1372 CONEY ISLAND AVE BROOKLYN, NY 11230	69-0210637	501(C)(3)	0.	12,903.	FMV	FOOD	PROGRAM SUPPORT

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MASBIA OF QUEENS 105-47 64TH ROAD FOREST HILLS, NY 11375	69-0210637	501(C)(3)	0.	11,209.	FMV	FOOD	PROGRAM SUPPORT
MESIVTHA OF STATEN ISLAND 1870 DRUMGOOLE ROAD EAST STATEN ISLAND, NY 10309	13-5600419	501(C)(3)	0.	13,685.	FMV	FOOD	PROGRAM SUPPORT
METRO WORLD CHILD MOBILE PROGRAM 11 HARMAN STREET BROOKLYN, NY 11221	11-3382193	501(C)(3)	0.	12,393.	FMV	FOOD	PROGRAM SUPPORT
METROPOLITAN COMMUNITY CHURCH OF NY - 446 WEST 36TH STREET - NEW YORK, NY 10018	51-0152961	501(C)(3)	0.	19,315.	FMV	FOOD	PROGRAM SUPPORT
METROPOLITAN COUNCIL ON JEWISH POVERTY - 5361 PRESTON COURT - BROOKLYN, NY 11234	13-2738818	501(C)(3)	0.	29,331.	FMV	FOOD	PROGRAM SUPPORT
MID-BRONX FOOD PANTRY 1125 GRAND CONCOURSE BRONX, NY 10452	23-7354073	501(C)(3)	0.	37,093.	FMV	FOOD	PROGRAM SUPPORT
MISSION WALK AN EPISCOPAL - LUTHERAN JOURNEY - 763 PROSPECT AVENUE - BRONX, NY 10455	41-1568278	501(C)(3)	0.	5,066.	FMV	FOOD	PROGRAM SUPPORT
MOMENTUM PROJECT 50 EAST 7TH STREET NEW YORK, NY 10003	13-3556768	501(C)(3)	0.	23,499.	FMV	FOOD	PROGRAM SUPPORT
MORE GRACE REDEMPTIVE CENTER INC. 11 WOODS PLACE BROOKLYN, NY 11226	11-3360284	501(C)(3)	0.	6,175.	FMV	FOOD	PROGRAM SUPPORT

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MORGAN STANLEY 1585 BROADWAY NEW YORK, NY 10036	26-4310632	501(C)(3)	0.	7,496.	FMV	FOOD	PROGRAM SUPPORT
MORRIS BROWN AME CHURCH 145-03 ROCKAWAY BLVD JAMAICA, NY 11436	11-3559462	501(C)(3)	0.	9,138.	FMV	FOOD	PROGRAM SUPPORT
MORRISANIA REVITALIZATION CORP. INC. - 576 EAST 165TH STREET - BRONX, NY 10456	13-3113427	501(C)(3)	0.	73,724.	FMV	FOOD	PROGRAM SUPPORT
MOVEMENT OF PENTECOSTAL CHRISTIAN CHURCH - 90-92 SUMMIT STREET - BROOKLYN, NY 11231	11-3047169	501(C)(3)	0.	42,928.	FMV	FOOD	PROGRAM SUPPORT
MS 391 X THE ANGELO PATRI MIDDLE SCHOOL - 2225 WEBSTER AVENUE - BRONX, NY 10457	69-0210637	501(C)(3)	0.	18,516.	FMV	FOOD	PROGRAM SUPPORT
MT. CARMEL BAPTIST CHURCH 1376 PROSPECT AVENUE BRONX, NY 10459	13-3966802	501(C)(3)	0.	9,789.	FMV	FOOD	PROGRAM SUPPORT
MT. HOREB BAPTIST CHURCH 109-20 34TH AVENUE CORONA, NY 11368	11-2074467	501(C)(3)	0.	8,820.	FMV	FOOD	PROGRAM SUPPORT
MT. MORIAH CHURCH 1149 EASTERN PARKWAY BROOKLYN, NY 11213	11-2622069	501(C)(3)	0.	8,346.	FMV	FOOD	PROGRAM SUPPORT
MT. OLIVET BAPTIST CHURCH COMMUNITY MEALS PROGRAM - 201 LENOX AVENUE - NEW YORK, NY 10027	13-1659628	501(C)(3)	650.	18,086.	FMV	FOOD	PROGRAM SUPPORT

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MT. OLIVET GOSPEL CHURCH FOOD PANTRY - 33-27 97TH STREET - CORONA, NY 11368	11-2574606	501(C)(3)	0.	24,668.	FMV	FOOD	PROGRAM SUPPORT
MT. SINAI SDA CHURCH 217-10 93RD AVE QUEENS VILLAGE, NY 11428	69-0210637	501(C)(3)	0.	36,951.	FMV	FOOD	PROGRAM SUPPORT
MT. ZION AME CHURCH 1765 MADISON AVENUE NEW YORK, NY 10029	13-4190193	501(C)(3)	0.	24,764.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
MURRAY HILL NEIGHBORHOOD ASSOCIATION - 150-20 BARCLAY AVENUE - FLUSHING, NY 11355	11-3455774	501(C)(3)	67,500.	22,110.	FMV	FOOD	PROGRAM SUPPORT
NATIONAL COUNCIL OF JEWISH WOMEN 241 WEST 72ND STREET NEW YORK, NY 10023	13-1624132	501(C)(3)	0.	13,639.	FMV	FOOD	PROGRAM SUPPORT
NATIONAL SORORITY OF PHI DELTA KAPPA - 117-08 MERRICK BLVD - JAMAICA, NY 11434	69-0210637	501(C)(3)	3,176.	13,392.	FMV	FOOD	PROGRAM SUPPORT
NEW ALTERNATIVES FOR CHILDREN 37 WEST 26TH STREET NEW YORK, NY 10010	13-3149298	501(C)(3)	0.	15,529.	FMV	FOOD	PROGRAM SUPPORT
NEW BRIGHTON CHURCH OF GOD IN CHRIST - 386 JERSEY STREET - STATEN ISLAND, NY 10301	65-1283443	501(C)(3)	0.	17,828.	FMV	FOOD	PROGRAM SUPPORT
NEW COVENANT COMMUNITY DEVELOPMENT CORP. - 1175 BOSTON ROAD - BRONX, NY 10456	13-3904826	501(C)(3)	0.	15,937.	FMV	FOOD	PROGRAM SUPPORT

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NEW DIRECTION SERVICES INC. 1027 POST AVENUE STATEN ISLAND, NY 10302	13-4118080	501(C)(3)	0.	14,259.	FMV	FOOD	PROGRAM SUPPORT
NEW HAVEN SDA CHURCH 634 PROSPECT PLACE BROOKLYN, NY 11216	52-0643036	501(C)(3)	0.	18,608.	FMV	FOOD	PROGRAM SUPPORT
NEW HOPE FAMILY WORSHIP 817 LIVONIA AVENUE BROOKLYN, NY 11207	11-3037658	501(C)(3)	0.	16,761.	FMV	FOOD	PROGRAM SUPPORT
NEW HOPE PENTECOSTAL CHURCH OF JESUS CHRIST - 1838 PARK PLACE - BROOKLYN, NY 11233	27-0718187	501(C)(3)	0.	7,912.	FMV	FOOD	PROGRAM SUPPORT
NEW LIFE FOOD & CLOTHING PANTRY 82-10 QUEENS BLVD ELMHURST, NY 11373	11-3204890	501(C)(3)	0.	14,966.	FMV	FOOD	PROGRAM SUPPORT
NEW LIFE HOLINESS CARING HANDS FOOD PANTRY - 4401 BARNES AVENUE - BRONX, NY 10466	69-0210637	501(C)(3)	0.	11,080.	FMV	FOOD	PROGRAM SUPPORT
NEW LIFE SDA CHURCH 885-887 THOMAS S BOYLAND STREET BROOKLYN, NY 11212	19-7953000	501(C)(3)	0.	27,987.	FMV	FOOD	PROGRAM SUPPORT
NEW TABERNACLE BAPTIST CHURCH 990 EAST 181ST STREET BRONX, NY 10460	13-3522658	501(C)(3)	0.	17,461.	FMV	FOOD	PROGRAM SUPPORT
NEW YORK CITY LOVE KITCHEN INC. 3816 9TH AVENUE NEW YORK, NY 10034	11-3018196	501(C)(3)	0.	29,983.	FMV	FOOD	PROGRAM SUPPORT

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NEW YORK CITY RESCUE MISSION 90 LAFAYETTE STREET NEW YORK, NY 10013	13-5596794	501(C)(3)	0.	22,088.	FMV	FOOD	PROGRAM SUPPORT
NEW YORK COMMON PANTRY 8 EAST 109TH STREET NEW YORK, NY 10029	13-3127972	501(C)(3)	0.	100,067.	FMV	FOOD	PROGRAM SUPPORT
NEWMAN MEMORIAL UNITED METHODIST CHURCH - 257 MACON STREET - BROOKLYN, NY 11216	36-2167731	501(C)(3)	0.	28,346.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
NORTH BROOKLYN ANGELS 275 N. 8TH STREET BROOKLYN BROOKLYN, NY 11211	81-4576973	501(C)(3)	0.	44,536.	FMV	FOOD	PROGRAM SUPPORT
NORTHEAST BROOKLYN SOCIAL SERVICES 376 THROOP AVENUE BROOKLYN, NY 11221	11-2737223	501(C)(3)	0.	59,794.	FMV	FOOD	PROGRAM SUPPORT
ONE WAY CHURCH OF CHRIST 216-11 MERRICK BLVD SPRINGFIELD GARDENS, NY 11413	22-2279191	501(C)(3)	0.	17,450.	FMV	FOOD	PROGRAM SUPPORT
OPEN DOOR TO HEAVEN OUTREACH MINISTRY INC. - 474 SHEPHERD AVENUE - BROOKLYN, NY 11208	27-4860420	501(C)(3)	0.	5,197.	FMV	FOOD	PROGRAM SUPPORT
ORIGINAL PENTECOSTAL APOSTOLIC CHURCH - 3901 AVENUE D - BROOKLYN, NY 11203	69-0210637	501(C)(3)	0.	20,149.	FMV	FOOD	PROGRAM SUPPORT
OUR LADY CHARITY FOR THE COMMUNITY, INC. - 5816 FARRAGUT ROAD - BROOKLYN, NY 11234	46-2527217	501(C)(3)	0.	25,337.	FMV	FOOD	PROGRAM SUPPORT

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OUR LADY OF FATIMA CHURCH 25-02 80TH STREET EAST ELMHURST, NY 11370	23-1353364	501(C)(3)	0.	16,765.	FMV	FOOD	PROGRAM SUPPORT
OUR LADY OF GOOD COUNSEL CHURCH 42 AUSTIN PLACE STATEN ISLAND, NY 10304	13-5608403	501(C)(3)	0.	10,636.	FMV	FOOD	PROGRAM SUPPORT
OUR LADY OF GRACE PARISH 2322 EAST 4TH STREET BROOKLYN, NY 11223	11-1694947	501(C)(3)	0.	27,921.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
OUR LADY OF MERCY CHURCH 680 MOTHER GASTON BLVD BROOKLYN, NY 11212	11-1982698	501(C)(3)	0.	13,991.	FMV	FOOD	PROGRAM SUPPORT
OUR LADY OF REFUGE 290 EAST 196TH STREET BRONX, NY 10458	13-1837411	501(C)(3)	0.	6,013.	FMV	FOOD	PROGRAM SUPPORT
OVERCOMING LOVE MINISTRIES 275 LIBERTY AVENUE BROOKLYN, NY 11207	11-2774575	501(C)(3)	0.	9,794.	FMV	FOOD	PROGRAM SUPPORT
P.S 66X THE SCHOOL OF HIGHER EXPECTATIONS - 1001 JENNINGS STREET - BRONX, NY 10460	69-0210637	501(C)(3)	0.	20,090.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
P.S. 067 CHARLES A. DORSEY 51 ST EDWARDS STREET BROOKLYN, NY 11205	69-0210637	501(C)(3)	0.	6,597.	FMV	FOOD	PROGRAM SUPPORT
P.S. 154X 333 E 135TH STREET BRONX, NY 10454	69-0210637	501(C)(3)	0.	8,288.	FMV	FOOD	PROGRAM SUPPORT

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P.S. 179K 202 AVENUE C BROOKLYN, NY 11218	69-0210637	501(C)(3)	945.	40,719.	FMV	FOOD	PROGRAM SUPPORT
P.S. 18X JOHN PETER ZENGER 502 MORRIS AVENUE BRONX, NY 10451	69-0210637	501(C)(3)	0.	45,016.	FMV	FOOD	PROGRAM SUPPORT
P.S. 197 THE OCEAN SCHOOL 825 HICKSVILLE ROAD FAR ROCKAWAY, NY 11691	69-0210637	501(C)(3)	0.	22,281.	FMV	FOOD	PROGRAM SUPPORT
P.S. 211 1919 PROSPECT AVENUE BRONX, NY 10457	69-0210637	501(C)(3)	0.	16,576.	FMV	FOOD	PROGRAM SUPPORT
P.S. 268 K THE EMMA LAZARUS SCHOOL 133 EAST 53RD STREET BROOKLYN, NY 11203	69-0210637	501(C)(3)	0.	5,972.	FMV	FOOD	PROGRAM SUPPORT
P.S. 50Q TALFOURD LAWN ELEMENTARY SCHOOL - 143-26 101 AVENUE - JAMAICA, NY 11435	69-0210637	501(C)(3)	0.	7,865.	FMV	FOOD	PROGRAM SUPPORT
P.S.308 CLARA CARDWELL 616 QUINCY STREET BROOKLYN, NY 11221	69-0210637	501(C)(3)	0.	12,207.	FMV	FOOD	PROGRAM SUPPORT
PARK AVENUE SYNAGOGUE 50 EAST 87TH ST. NEW YORK, NY 10128	13-1860028	501(C)(3)	0.	7,262.	FMV	FOOD	PROGRAM SUPPORT
PARK SLOPE CHRISTIAN HELP INC. (CHIPS) - 200 4TH AVENUE - BROOKLYN, NY 11217	11-2449991	501(C)(3)	750.	32,623.	FMV	FOOD	PROGRAM SUPPORT

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PART OF THE SOLUTION 2759 WEBSTER AVENUE BRONX, NY 10458	13-3425071	501(C)(3)	1,500.	11,913.	FMV	FOOD	PROGRAM SUPPORT
PENIEL HAITIAN CHURCH OF C AND MA 2741 ALBEMARLE ROAD BROOKLYN, NY 11226		501(C)(3)	0.	13,843.	FMV	FOOD	PROGRAM SUPPORT
PENIEL SDA CHURCH 1210 UTICA AVENUE BROOKLYN, NY 11203	52-0643036	501(C)(3)	0.	19,759.	FMV	FOOD	PROGRAM SUPPORT
PENTECOST CARE COMMUNITY OUTREACH 621 EAST 216TH STREET BRONX, NY 10467	13-3518705	501(C)(3)	0.	5,881.	FMV	FOOD	PROGRAM SUPPORT
PENTECOSTAL CHURCH CHRIST ETERNAL REFUGE - 9 EAST 199TH STREET - BRONX, NY 10468	13-3906044	501(C)(3)	12,500.	403,490.	FMV	FOOD	PROGRAM SUPPORT
PENTECOSTAL RESCUE HOUSE OF PRAYER 2415 PITKIN AVENUE BROOKLYN, NY 11208	11-2531216	501(C)(3)	0.	34,161.	FMV	FOOD	PROGRAM SUPPORT
POMONOK FOOD PANTRY 67-09 KISSENA BLVD. KEW GARDENS, NY 11367	11-2375583	501(C)(3)	0.	6,614.	FMV	FOOD	PROGRAM SUPPORT
PORT RICHMOND HIGH SCHOOL 85 ST. JOSEPHS AVENUE STATEN ISLAND, NY 10302	69-0210637	501(C)(3)	0.	59,810.	FMV	FOOD	PROGRAM SUPPORT
POWER PRAISE AND DELIVERANCE INC. 120 EAST 184TH STREET BRONX, NY 10468	84-1650246	501(C)(3)	23,331.	47,226.	FMV	FOOD	PROGRAM SUPPORT

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PRIMITIVE CHRISTIAN CHURCH 207-209 EAST BROADWAY NEW YORK, NY 10002	44-0577787	501(C)(3)	0.	22,250.	FMV	FOOD	PROGRAM SUPPORT
PROJECT BRAVO AT MONTEFIORE MEDICAL CTR - 3058 BAINBRIDGE AVENUE - BRONX, NY 10467	13-1740114	501(C)(3)	0.	32,469.	FMV	FOOD	PROGRAM SUPPORT
PROJECT CREATE-ANTHONY HOUSE 73 LENOX AVENUE NEW YORK, NY 10026	13-2739938	501(C)(3)	0.	5,414.	FMV	FOOD	PROGRAM SUPPORT
PROJECT FIND WOODSTOCK S.C. 127 WEST 43RD STREET NEW YORK, NY 10036	13-2666921	501(C)(3)	0.	19,557.	FMV	FOOD	PROGRAM SUPPORT
PROJECT HOPE CHARITIES 170-20 140TH AVENUE JAMAICA, NY 11434	26-0897746	501(C)(3)	0.	94,037.	FMV	FOOD	PROGRAM SUPPORT
PROJECT HOSPITALITY INC. 221 HEBERTON AVE STATEN ISLAND, NY 10302	13-3434441	501(C)(3)	0.	14,341.	FMV	FOOD	PROGRAM SUPPORT
PROJECT HOSPITALITY INC. 514 BAY STREET STATEN ISLAND, NY 10304	13-3434441	501(C)(3)	0.	43,885.	FMV	FOOD	PROGRAM SUPPORT
PROJECT LEAD 84-17 ABINGDON ROAD KEW GARDENS, NY 11415	13-3761446	501(C)(3)	0.	12,311.	FMV	FOOD	PROGRAM SUPPORT
PROJECT RENEWAL HOLLAND HOUSE 351 WEST 42ND STREET NEW YORK, NY 10036	13-2602882	501(C)(3)	0.	73,635.	FMV	FOOD	PROGRAM SUPPORT

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PS 111 Q JACOB BLACKWELL 37-15 13TH STREET LONG ISLAND CITY, NY 11101	69-0210637	501(C)(3)	0.	7,448.	FMV	FOOD	PROGRAM SUPPORT
PS 112 X BRONXWOOD 1925 SCHIEFFELIN AVENUE BRONX, NY 10466	69-0210637	501(C)(3)	0.	8,556.	FMV	FOOD	PROGRAM SUPPORT
PS 12 K DR. JACQUELINE PEEK-DAVIS 430 HOWARD AVENUE BROOKLYN, NY 11233	69-0210637	501(C)(3)	27,975.	96,750.	FMV	FOOD	PROGRAM SUPPORT
PS 19Q MARINO JEANTET 98-02 ROOSEVELT AVENUE CORONA, NY 11368	69-0210637	501(C)(3)	0.	18,658.	FMV	FOOD	PROGRAM SUPPORT
PS 23X THE NEW CHILDRENS SCHOOL 2151 WASHINGTON AVENUE BRONX, NY 10457	69-0210637	501(C)(3)	0.	25,944.	FMV	FOOD	PROGRAM SUPPORT
PS 249K CATON SCHOOL 18 MARLBOROUGH RD BROOKLYN, NY 11226	69-0210637	501(C)(3)	0.	26,725.	FMV	FOOD	PROGRAM SUPPORT
PS 294 THE WALTON AVENUE SCHOOL 1425 WALTON AVENUE BRONX, NY 10452	69-0210637	501(C)(3)	0.	21,856.	FMV	FOOD	PROGRAM SUPPORT
PS 298 K BETTY SHABAZZ 85 WATKINS STREET BROOKLYN, NY 11212	69-0210637	501(C)(3)	0.	41,776.	FMV	FOOD	PROGRAM SUPPORT
PS 30X WILTON 510 EAST 141 STREET BRONX, NY 10454	69-0210637	501(C)(3)	0.	16,402.	FMV	FOOD	PROGRAM SUPPORT

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

(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
PS 43X JONAS BRONCK ACADEMY 165 BROWN PLACE BRONX, NY 10454	69-0210637	501(C)(3)	0.	12,156.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
PS 71 K JUAN MOREL CAMPOS SECONDARY SCHOOL - 215 HEYWARD STREET - BROOKLYN, NY 11206	69-0210637	501(C)(3)	0.	36,743.	FMV	FOOD	PROGRAM SUPPORT
PSCH STATION ROAD 189-15 STATION ROAD FLUSHING, NY 11358	11-2542430	501(C)(3)	0.	20,939.	FMV	FOOD	PROGRAM SUPPORT
QUEENS JEWISH COMMUNITY COUNCIL 119-45 UNION TURNPIKE FOREST HILLS, NY 11375	23-7172152	501(C)(3)	0.	34,784.	FMV	FOOD	PROGRAM SUPPORT
QUEENS TABERNACLE CHURCH 114-03 COLFAX STREET CAMBRIA HEIGHTS, NY 11411	11-3502875	501(C)(3)	0.	8,095.	FMV	FOOD	PROGRAM SUPPORT
QUEENSBORO SDA CHURCH 96-50 222ND STREET QUEENS VILLAGE, NY 11429	02-0632575	501(C)(3)	0.	70,913.	FMV	FOOD	PROGRAM SUPPORT
RAUSCHENBUSCH METRO MINISTRIES, INC. - 410 WEST 40TH STREET - NEW YORK, NY 10018	13-3859713	501(C)(3)	0.	11,536.	FMV	FOOD	PROGRAM SUPPORT
REACHING OUT COMMUNITY SERVICE 7708 NEW UTRECHT AVENUE BROOKLYN, NY 11214	11-3042769	501(C)(3)	2,000.	5,122.	FMV	FOOD	PROGRAM SUPPORT
REDEEMED CHRISTIAN CHURCH OF GOD 1001 MORRIS AVENUE BRONX, NY 10456	13-4017743	501(C)(3)	0.	9,163.	FMV	FOOD	PROGRAM SUPPORT

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REDEEMED CHRISTIAN CHURCH OF GOD INTERNATIONAL - 781 EAST 93RD ST. - BROOKLYN, NY 11236	56-2327840	501(C)(3)	0.	21,328.	FMV	FOOD	PROGRAM SUPPORT
RESURRECTION AND LIFE PENTECOSTAL CHURCH - 870 EAST 163RD STREET - BRONX, NY 10459	13-3714127	501(C)(3)	0.	21,263.	FMV	FOOD	PROGRAM SUPPORT
RESURRECTION LUTHERAN CHURCH 189-20 114TH ROAD ST. ALBANS, NY 11412	41-1568278	501(C)(3)	0.	9,623.	FMV	FOOD	PROGRAM SUPPORT
RHOW BROOKLYN INC 360 SCHERMERHORN STREET BROOKLYN, NY 11217	36-2154972	501(C)(3)	0.	23,806.	FMV	FOOD	PROGRAM SUPPORT
RICHMOND HILL SDA COMMUNITY 114-08 JAMAICA AVENUE RICHMOND HILL, NY 11418		501(C)(3)	0.	10,586.	FMV	FOOD	PROGRAM SUPPORT
RIDGEWOOD OLDER ADULT CENTER & SERVICES - 59-14 70TH AVENUE - RIDGEWOOD, NY 11385	11-2325474	501(C)(3)	0.	13,157.	FMV	FOOD	PROGRAM SUPPORT
RIVERDALE COMMUNITY SCHOOL 76 RIVERDALE AVENUE BROOKLYN, NY 11212	69-0210637	501(C)(3)	0.	15,568.	FMV	FOOD	PROGRAM SUPPORT
RUSH TEMPLE A.M.E. ZION CHURCH PANTRY - 119-48 SUTPHIN BLVD - JAMAICA, NY 11434	11-3436513	501(C)(3)	0.	41,856.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
SAGE (SERVICES AND ADVOCACY FOR LGBT ELDERS) - 305 7TH AVENUE - NEW YORK, NY 10001	69-0210637	501(C)(3)	0.	17,796.	FMV	FOOD	PROGRAM SUPPORT

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SALEM UNITED METHODIST CHURCH 211 WEST 129TH STREET NEW YORK, NY 10027	13-2665561	501(C)(3)	0.	52,648.	FMV	FOOD	PROGRAM SUPPORT
SALT & SEA MISSION CHURCH INC. 2417-2419 STILLWELL AVENUE BROOKLYN, NY 11223	11-3082094	501(C)(3)	0.	9,174.	FMV	FOOD	PROGRAM SUPPORT
SALVATION ARMY BAY RIDGE CORPS 252 86TH STREET BROOKLYN, NY 11209	13-1740429	501(C)(3)	0.	28,125.	FMV	FOOD	PROGRAM SUPPORT
SALVATION ARMY HARLEM TEMPLE 540 LENOX AVENUE NEW YORK, NY 10037	13-5562351	501(C)(3)	0.	28,004.	FMV	FOOD	PROGRAM SUPPORT
SALVATION ARMY PORT RICHMOND CORPS 1295 FOREST AVENUE STATEN ISLAND, NY 10302	13-5562351	501(C)(3)	0.	9,786.	FMV	FOOD	PROGRAM SUPPORT
SALVATION ARMY RIDGEWOOD CITADEL CORPS - 69-23 CYPRESS HILLS STREET - RIDGEWOOD, NY 11385	13-5566251	501(C)(3)	0.	25,959.	FMV	FOOD	PROGRAM SUPPORT
SANCTIFIED CHURCH OF GOD INC. 404 LEFFERTS AVENUE BROOKLYN, NY 11225	11-3071894	501(C)(3)	0.	46,666.	FMV	FOOD	PROGRAM SUPPORT
SANCTUARY FOR FAMILIES 120 BROADWAY MANHATTAN, NY 10271	13-3193119	501(C)(3)	0.	6,300.	FMV	FOOD	PROGRAM SUPPORT
SCAN MULLALY ACADEMY 40 E 164TH ST BRONX, NY 10452	13-2912963	501(C)(3)	0.	7,701.	FMV	FOOD	PROGRAM SUPPORT

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SCO FAMILY OF SERVICES/BETHANY HOUSE - 164 SUYDAM STREET - BROOKLYN, NY 11221	11-2777066	501(C)(3)	0.	6,801.	FMV	FOOD	PROGRAM SUPPORT
SCO FAMILY OF SERVICES/CENTER FOR FAMILY LIFE PROG - 443 39TH STREET - BROOKLYN, NY 11232	11-2777066	501(C)(3)	3,200.	43,156.	FMV	FOOD	PROGRAM SUPPORT
SERENITY HOUSE FAMILY RESIDENCE 668 LAFAYETTE AVENUE BROOKLYN, NY 11216	11-3305070	501(C)(3)	0.	8,678.	FMV	FOOD	PROGRAM SUPPORT
SERENITY HOUSE FAMILY RESIDENCE 668 LAFAYETTE AVENUE BROOKLYN, NY 11216	13-1624157	501(C)(3)	0.	22,630.	FMV	FOOD	PROGRAM SUPPORT
SHALOM SENIOR CENTER 483 ALBANY AVENUE BROOKLYN, NY 11203	11-2322490	501(C)(3)	0.	7,078.	FMV	FOOD	PROGRAM SUPPORT
SHILOH SDA 449 EASTERN PARKWAY BROOKLYN, NY 11216	52-0643036	501(C)(3)	0.	24,785.	FMV	FOOD	PROGRAM SUPPORT
SHILOH TEMPLE PENTECOSTAL CHURCH 719 EAST 223RD STREET BRONX, NY 10466	13-3225161	501(C)(3)	0.	19,802.	FMV	FOOD	PROGRAM SUPPORT
SHOREFRONT JEWISH COMM. COUNCIL 128 BRIGHTON BEACH AVENUE BROOKLYN, NY 11235	11-2986161	501(C)(3)	0.	9,728.	FMV	FOOD	PROGRAM SUPPORT
SISTERS WITH PURPOSE 1540 VAN SICLEN AVENUE BROOKLYN, NY 11239	27-2830778	501(C)(3)	0.	15,660.	FMV	FOOD	PROGRAM SUPPORT

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SOCIETY OF ST. VINCENT DE PAUL 520 LINDEN BOULEVARD BROOKLYN, NY 11203	11-1680000	501(C)(3)	0.	12,635.	FMV	FOOD	PROGRAM SUPPORT
SOLID ROCK BAPTIST CHURCH 120 TOMPKINS AVENUE BROOKLYN, NY 11206	11-2999373	501(C)(3)	0.	22,982.	FMV	FOOD	PROGRAM SUPPORT
SOLID ROCK SDA CHURCH 52-05 ROCKAWAY BEACH BLVD ARVERNE, NY 11692	13-1865286	501(C)(3)	36,031.	25,146.	FMV	FOOD	PROGRAM SUPPORT
SOUNDVIEW PRESBYTERIAN CHURCH 760 SOUNDVIEW AVENUE BRONX, NY 10473	13-3305043	501(C)(3)	0.	59,041.	FMV	FOOD	PROGRAM SUPPORT
SOUTH ASIAN COUNCIL FOR SOCIAL SERVICES - 143-06 45TH AVENUE - QUEENS, NY 11355	11-3632920	501(C)(3)	0.	13,731.	FMV	FOOD	PROGRAM SUPPORT
SOUTH BROOKLYN SDA CHURCH COMMUNITY SERVICE - 42 PROSPECT PLACE - BROOKLYN, NY 11217	11-3005000	501(C)(3)	0.	17,342.	FMV	FOOD	PROGRAM SUPPORT
SOUTH OZONE PARK SDA CHURCH 120-20 140TH ST. JAMAICA, NY 11436	46-2370153	501(C)(3)	0.	46,482.	FMV	FOOD	PROGRAM SUPPORT
SOUTHSIDE UNITED HDFC INC 145 SOUTH 3RD STREET BROOKLYN, NY 11211	11-2268359	501(C)(3)	0.	11,132.	FMV	FOOD	PROGRAM SUPPORT
SPANISH INTERVALE SDA CHURCH 1064 INTERVALE AVENUE BRONX, NY 10459	11-3004851	501(C)(3)	0.	17,007.	FMV	FOOD	PROGRAM SUPPORT

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SPRING CREEK COMMUNITY SCHOOL 1065 ELTON STREET BROOKLYN, NY 11239	69-0210637	501(C)(3)	0.	26,996.	FMV	FOOD	PROGRAM SUPPORT
ST. ALBAN'S BAPTIST CHURCH 196-20 119TH AVENUE ST. ALBANS, NY 11412	11-2448168	501(C)(3)	0.	7,827.	FMV	FOOD	PROGRAM SUPPORT
ST. ANN'S CHURCH OF MORRISANIA 295 ST ANNS AVENUE BRONX, NY 10454	23-7454115	501(C)(3)	0.	12,602.	FMV	FOOD	PROGRAM SUPPORT
ST. ANN'S CORNER OF HARM REDUCTION 886 WESTCHESTER AVENUE BRONX, NY 10459	13-3724008	501(C)(3)	0.	6,419.	FMV	FOOD	PROGRAM SUPPORT
ST. AUGUSTINE FOOD PANTRY 1168 FRANKLIN AVE BRONX, NY 10456	13-1740193	501(C)(3)	0.	6,961.	FMV	FOOD	PROGRAM SUPPORT
ST. CECILIA'S GIFT OF LOVE FOOD PANTRY - 23 MONITOR STREET - BROOKLYN, NY 11222	13-2553815	501(C)(3)	0.	12,898.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
ST. CECILIA'S PARISH SERVICES 125 EAST 105TH ST. NEW YORK, NY 10029	13-1624165	501(C)(3)	3,176.	27,306.	FMV	FOOD	PROGRAM SUPPORT
ST. CHARLES BORROMEO CHURCH 211 WEST 141ST STREET NEW YORK, NY 10030	04-3754776	501(C)(3)	0.	11,753.	FMV	FOOD	PROGRAM SUPPORT
ST. CLEMENT POPE RC CHURCH 141-11 123RD AVENUE JAMAICA, NY 11436	11-1633530	501(C)(3)	0.	24,122.	FMV	FOOD	PROGRAM SUPPORT

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ST. CLEMENT'S FOOD PANTRY 423 WEST 46TH STREET NEW YORK, NY 10036	13-2796905	501(C)(3)	0.	28,337.	FMV	FOOD	PROGRAM SUPPORT
ST. EDMUND'S EPISCOPAL CHURCH OUTREACH PROGRAM - 1905 MORRIS AVENUE - BRONX, NY 10453	13-4136007	501(C)(3)	0.	33,742.	FMV	FOOD	PROGRAM SUPPORT
ST. EDWARD FOOD PANTRY 6581 HYLAN BLVD STATEN ISLAND, NY 10309	13-3913578	501(C)(3)	81,748.	69,504.	FMV	FOOD	PROGRAM SUPPORT
ST. JAMES HOLINESS CHURCH 89 LEGION STREET BROOKLYN, NY 11212	80-0079644	501(C)(3)	0.	18,023.	FMV	FOOD	PROGRAM SUPPORT
ST. JEROME'S HANDS COMMUNITY CENTER - 330 EAST 138TH STREET - BRONX, NY 10454	13-1740204	501(C)(3)	0.	62,995.	FMV	FOOD	PROGRAM SUPPORT
ST. JOAN OF ARC CHURCH 1372 STRATFORD AVENUE BRONX, NY 10472	13-1923400	501(C)(3)	0.	7,455.	FMV	FOOD	PROGRAM SUPPORT
ST. JOHN'S BREAD AND LIFE 795 LEXINGTON AVENUE BROOKLYN, NY 11221	11-3174514	501(C)(3)	0.	78,646.	FMV	FOOD	PROGRAM SUPPORT
ST. JOSEPH ROMAN CATHOLIC CHURCH 28-47 43RD STREET ASTORIA, NY 11103	11-1631815	501(C)(3)	0.	52,849.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
ST. JOSEPHS SOUP KITCHEN INCORPORATED - 371 SIXTH AVENUE - NEW YORK, NY 10014	47-3999417	501(C)(3)	0.	11,969.	FMV	FOOD	PROGRAM SUPPORT

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ST. LUKE'S SENIOR COMMUNITY PROGRAM - 777 EAST 222ND STREET - BRONX, NY 10467	13-2747442	501(C)(3)	0.	11,415.	FMV	FOOD	PROGRAM SUPPORT
ST. MARGARET'S EPISCOPAL CHURCH 940 EAST 156TH STREET BRONX, NY 10455	13-1623985	501(C)(3)	0.	63,754.	FMV	FOOD	PROGRAM SUPPORT
ST. MARK THE EVANGELIST CHURCH 65 WEST 138TH STREET NEW YORK, NY 10037	13-1635304	501(C)(3)	0.	17,258.	FMV	FOOD	PROGRAM SUPPORT
ST. MARK'S CHURCH OF CHRIST 439 RALPH AVENUE BROOKLYN, NY 11233	69-0210637	501(C)(3)	0.	6,097.	FMV	FOOD	PROGRAM SUPPORT
ST. MARY STAR OF THE SEA 1920 NEW HAVEN AVENUE FAR ROCKAWAY, NY 11691	11-2202383	501(C)(3)	0.	30,378.	FMV	FOOD	PROGRAM SUPPORT
ST. MARY'S EPISCOPAL CHURCH 521 WEST 126TH STREET NEW YORK, NY 10027	13-3703707	501(C)(3)	555.	81,192.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
ST. MATTHEWS'S RC CHURCH 1342 LINCOLN PLACE BROOKLYN, NY 11213	11-1666894	501(C)(3)	0.	5,314.	FMV	FOOD	PROGRAM SUPPORT
ST. NICHOLAS OF TOLENTINE CHURCH-FP - 150-75 GOETHALS AVENUE - JAMAICA, NY 11432	11-1714878	501(C)(3)	0.	14,393.	FMV	FOOD	PROGRAM SUPPORT
ST. PAUL PENTECOSTAL KINGDOM BUILDERS FOOD PANTRY - 133 THOMAS S BOYLAND STREET - BROOKLYN, NY 11233	30-0327182	501(C)(3)	0.	25,621.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT

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ST. PAUL'S LUTHERAN CHURCH 1891 MCGRAW AVENUE BRONX, NY 10462	13-1972408	501(C)(3)	3,305.	29,658.	FMV	FOOD	PROGRAM SUPPORT
ST. PETER'S EPISCOPAL LOVE KITCHEN 2500 WESTCHESTER AVENUE BRONX, NY 10461	69-0210637	501(C)(3)	0.	11,544.	FMV	FOOD	PROGRAM SUPPORT
ST. PETER'S LOVE KITCHEN PANTRY 2500 WESTCHESTER AVENUE BRONX, NY 10461	13-5619657	501(C)(3)	0.	11,436.	FMV	FOOD	PROGRAM SUPPORT
ST. PHILIP'S CHRISTIAN CHURCH 765 LAFAYETTE AVENUE BROOKLYN, NY 11221	11-2714132	501(C)(3)	0.	45,133.	FMV	FOOD	PROGRAM SUPPORT
ST. PHILIP'S EPISCOPAL 265 DECATUR STREET BROOKLYN, NY 11233	11-1667622	501(C)(3)	0.	17,434.	FMV	FOOD	PROGRAM SUPPORT
ST. RAPHAEL RC CHURCH FOOD PANTRY 35-20 GREENPOINT AVENUE LONG ISLAND CITY, NY 11101	11-1946390	501(C)(3)	0.	36,863.	FMV	FOOD	PROGRAM SUPPORT
ST. STEPHEN OUTREACH INC. 874 MYRTLE AVENUE BROOKLYN, NY 11206	11-3116708	501(C)(3)	4,535.	60,489.	FMV	FOOD	PROGRAM SUPPORT
ST. THERESA OF AVILA COMMUNITY SERVICE - 109-26 130TH STREET - SOUTH OZONE PARK, NY 11420	11-1771931	501(C)(3)	0.	7,909.	FMV	FOOD	PROGRAM SUPPORT
STATEN ISLAND SDA CHURCH 80 UNION AVENUE STATEN ISLAND, NY 10303	13-1865286	501(C)(3)	0.	14,713.	FMV	FOOD	PROGRAM SUPPORT

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STUYVESANT HEIGHTS CHRISTIAN CHURCH - 69 MACDONOUGH STREET - BROOKLYN, NY 11216	11-2194085	501(C)(3)	0.	12,358.	FMV	FOOD	PROGRAM SUPPORT
TEEN CHALLENGE 444 CLINTON AVENUE BROOKLYN, NY 11238	11-2510315	501(C)(3)	0.	15,085.	FMV	FOOD	PROGRAM SUPPORT
TEMPLE BETH-EL COMMUNITY FOOD PANTRY - 3482 PARK AVENUE - BRONX, NY 10456	13-3852124	501(C)(3)	0.	14,487.	FMV	FOOD	PROGRAM SUPPORT
TEMPLE SHARAAY TEFILA 250 EAST 79TH STREET NEW YORK, NY 10075	13-1656613	501(C)(3)	0.	13,528.	FMV	FOOD	PROGRAM SUPPORT
THE CHURCH OF THE VILLAGE - HOPE FOR OUR NEIGHBORS - 201 WEST 13TH STREET - NEW YORK, NY 10011	13-5562281	501(C)(3)	0.	15,415.	FMV	FOOD	PROGRAM SUPPORT
THE HARDING FORD VISION, INC. 157-22 TUSKEGEE AIRMEN WAY JAMAICA, NY 11433	47-1252584	501(C)(3)	0.	6,800.	FMV	FOOD	PROGRAM SUPPORT
THE HOUSE OF DAVID CHURCH 747-749 HENDRIX STREET BROOKLYN, NY 11207	11-2518722	501(C)(3)	0.	24,115.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
THE LEGACY CENTER COMMUNITY DEVELOPMENT CORP. - 71-02 CYPRESS HILLS STREET - GLENDALE, NY 11385	69-0210637	501(C)(3)	0.	11,302.	FMV	FOOD	PROGRAM SUPPORT
THE LEHMAN COLLEGE ASSOCIATION, HERBERT H. LEHMAN - 250 BEDFORD PARK BLVD WEST - BRONX, NY 10468	13-3150922	501(C)(3)	0.	49,864.	FMV	FOOD	PROGRAM SUPPORT

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THE RIVER FUND NEW YORK 89-11 LEFFERTS BLVD RICHMOND HILL, NY 11418	11-3450363	501(C)(3)	0.	61,675.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
THE RIVERSIDE CHURCH FP 91 CLAREMONT AVENUE NEW YORK, NY 10027	13-1624157	501(C)(3)	0.	28,449.	FMV	FOOD	PROGRAM SUPPORT
THE ROSE KITCHEN 104-19 165TH STREET JAMAICA, NY 11433	06-1328313	501(C)(3)	0.	17,735.	FMV	FOOD	PROGRAM SUPPORT
THE SALVATION ARMY ASTORIA CORPS 45-18 BROADWAY ASTORIA, NY 11103	13-1740429	501(C)(3)	0.	7,414.	FMV	FOOD	PROGRAM SUPPORT
THE SALVATION ARMY BRONX CITADEL 425 EAST 159TH STREET BRONX, NY 10451	13-5562351	501(C)(3)	0.	31,716.	FMV	FOOD	PROGRAM SUPPORT
THE SALVATION ARMY JAMAICA CITADEL 90-23 161ST STREET JAMAICA, NY 11432	13-5562351	501(C)(3)	0.	42,043.	FMV	FOOD	PROGRAM SUPPORT
THE SALVATION ARMY MANHATTAN CITADEL - 145 EAST 125TH STREET - NEW YORK, NY 10035	13-1740429	501(C)(3)	0.	17,083.	FMV	FOOD	PROGRAM SUPPORT
THE SALVATION ARMY STAPLETON 15 BROAD STREET STATEN ISLAND, NY 10304	13-5562351	501(C)(3)	0.	27,445.	FMV	FOOD	PROGRAM SUPPORT
THE SALVATION ARMY SUNSET PARK CORPS - 520 50TH STREET - BROOKLYN, NY 11220	13-5562351	501(C)(3)	0.	5,197.	FMV	FOOD	PROGRAM SUPPORT

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THE SALVATION ARMY TREMONT CORPS 2121 WASHINGTON AVENUE BRONX, NY 10457	13-5562351	501(C)(3)	0.	8,217.	FMV	FOOD	PROGRAM SUPPORT
THE VOICES OF HAGAR 95-18 NORTHERN BLVD JACKSON HEIGHTS, NY 11372	53-0204696	501(C)(3)	0.	8,347.	FMV	FOOD	PROGRAM SUPPORT
THORPE FAMILY RESIDENCE 406 E 184TH STREET BRONX, NY 10458	13-3276556	501(C)(3)	0.	17,413.	FMV	FOOD	PROGRAM SUPPORT
THURSTON MEMORIAL OUREACH MINISTRIES - 1243 BUSHWICK AVENUE - BROOKLYN, NY 11221	14-1949690	501(C)(3)	0.	19,715.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
TOLENTINE ZEISER COMMUNITY LIFE CENTER - 2345 UNIVERSITY AVENUE - BRONX, NY 10468	13-1331888	501(C)(3)	0.	41,143.	FMV	FOOD	PROGRAM SUPPORT
TOMCHE SHABBOS OF BORO PARK 6225 NEW UTRECHT AVENUE BROOKLYN, NY 11219	11-3518348	501(C)(3)	0.	44,224.	FMV	FOOD	PROGRAM SUPPORT
TRINITY HUMAN SERVICE CORP. 153 A JOHNSON AVENUE BROOKLYN, NY 11206	13-3171439	501(C)(3)	0.	7,652.	FMV	FOOD	PROGRAM SUPPORT
TRINITY'S SERVICES AND FOOD FOR THE HOMELESS INC. - 602 EAST 9TH STREET - NEW YORK, NY 10009	13-3401340	501(C)(3)	0.	30,658.	FMV	FOOD	PROGRAM SUPPORT
TRIUMPHANT FULL GOSPEL ASSEMBLY 889 RUTLAND ROAD BROOKLYN, NY 11203	11-2522268	501(C)(3)	0.	11,030.	FMV	FOOD	PROGRAM SUPPORT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUTH CENTER FOR HIGHER CONSCIOUSNESS - 4622 FARRAGUT ROAD - BROOKLYN, NY 11203	13-6400434	501(C)(3)	0.	12,708.	FMV	FOOD	PROGRAM SUPPORT
TURNING POINT HOUSING 968 THIRD AVENUE BROOKLYN, NY 11232	11-2837985	501(C)(3)	0.	12,103.	FMV	FOOD	PROGRAM SUPPORT
UJC OF THE EAST SIDE 15-17 BIALYSTOKER PLACE NEW YORK, NY 10002	13-2735379	501(C)(3)	0.	35,911.	FMV	FOOD	PROGRAM SUPPORT
UNION GROVE MISSIONARY BAPTIST CHURCH - 1488 HOE AVENUE - BRONX, NY 10460	69-0210637	501(C)(3)	0.	13,935.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
UNIQUE PEOPLE SERVICES-AIDS PROGRAMS, INC. - 3510 BAINBRIDGE AVENUE - BRONX, NY 10467	13-3636555	501(C)(3)	0.	15,526.	FMV	FOOD	PROGRAM SUPPORT
UNITARIAN CHURCH OF ALL SOULS 1157 LEXINGTON AVENUE NEW YORK, NY 10021	13-1782493	501(C)(3)	0.	33,850.	FMV	FOOD	PROGRAM SUPPORT
UNITED BRONX PARENTS, INC. 603 PROSPECT AVENUE BRONX, NY 10455	13-6203312	501(C)(3)	0.	46,414.	FMV	FOOD	PROGRAM SUPPORT
UNITED CHURCH OF FAITH 643 EAST 88TH STREET BROOKLYN, NY 11236	20-8941563	501(C)(3)	0.	20,003.	FMV	FOOD	PROGRAM SUPPORT
UNITED CHURCH OF PRAISE HEALTHY HEART - 32 SANDS STREET - STATEN ISLAND, NY 10304	32-0284111	501(C)(3)	0.	16,068.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED GRAND CHAPTER OF EASTERN STAR - 441 WILLOUGHBY AVENUE - BROOKLYN, NY 11206	13-3912500	501(C)(3)	0.	14,350.	FMV	FOOD	PROGRAM SUPPORT
UNITED YES WE CAN, UNIDOS SE SE PUEDE, INC. - 2383 2ND AVE, 5TH FLOOR - NEW YORK, NY 10035	45-3703838	501(C)(3)	0.	16,434.	FMV	FOOD	PROGRAM SUPPORT
UNITY FAITH OUTREACH 179 RALPH AVENUE BROOKLYN, NY 11233	11-3232484	501(C)(3)	0.	40,384.	FMV	FOOD	PROGRAM SUPPORT
URBAN STRATEGIES INC 61-71 RIVERDALE AVENUE BROOKLYN, NY 11212	11-2484364	501(C)(3)	0.	31,445.	FMV	FOOD	PROGRAM SUPPORT
URBAN WOMEN'S RETREAT 539 WEST 152ND STREET NEW YORK, NY 10031	11-2561648	501(C)(3)	0.	18,261.	FMV	FOOD	PROGRAM SUPPORT
VAAD HAKOL CROWN HEIGHTS 1276 PRESIDENT STREET BROOKLYN, NY 11213	13-3793553	501(C)(3)	0.	342,552.	FMV	FOOD	PROGRAM SUPPORT
VETS INC 111-16 173RD STREET JAMAICA, NY 11434	27-2280570	501(C)(3)	0.	17,533.	FMV	FOOD	PROGRAM SUPPORT
VINEYARD FOOD PANTRY 1140 TELLER AVENUE BRONX, NY 10456	13-4014172	501(C)(3)	0.	66,751.	FMV	FOOD	PROGRAM SUPPORT
VISION URBANA, INC. 66 ESSEX ST. NEW YORK, NY 10002	13-3848575	501(C)(3)	2,117.	134,010.	FMV	FOOD	PROGRAM SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST HARLEM GROUP ASSISTANCE 625 LENOX AVENUE NEW YORK, NY 10030	23-7169558	501(C)(3)	0.	22,089.	FMV	FOOD	PROGRAM SUPPORT
WEST SIDE CAMPAIGN AGAINST HUNGER 263 WEST 86TH STREET NEW YORK, NY 10024	13-1635259	501(C)(3)	0.	44,852.	FMV	FOOD	PROGRAM SUPPORT
WEST SIDE CAMPAIGN AGAINST HUNGER 309 DRAKE STREET BRONX, NY 10474	71-0908184	501(C)(3)	0.	5,997.	FMV	FOOD	PROGRAM SUPPORT
WESTSIDE FEDERATION FOR SENIORS AND SUPPORTIVE HOU - 2345 BROADWAY - NEW YORK, NY 10024	13-2926433	501(C)(3)	0.	29,644.	FMV	FOOD	PROGRAM SUPPORT
WINNER'S CHAPEL INC. 153-56 ROCKAWAY BLVD JAMAICA, NY 11434	69-0210637	501(C)(3)	0.	6,589.	FMV	FOOD	PROGRAM SUPPORT
WOMEN'S SAFE START 157 EDGEcombe AVENUE NEW YORK, NY 10030	11-2415837	501(C)(3)	0.	15,371.	FMV	FOOD	PROGRAM SUPPORT
WOODYCREST UNITED METHODIST CHURCH 89 WEST 166TH STREET BRONX, NY 10452		501(C)(3)	0.	26,083.	FMV	FOOD	PROGRAM SUPPORT
WORD OF LIFE CHRISTIAN FELLOWSHIP INTERNATIONAL FP - 830 UNION AVE - BRONX, NY 10455	52-2153552	501(C)(3)	0.	15,827.	FMV	FOOD AND EQUIPMENT	PROGRAM SUPPORT
WORLDWIDE EVANGELICAL OUTREACH 3102 CLARENDON ROAD BROOKLYN, NY 11226	11-3316225	501(C)(3)	0.	18,250.	FMV	FOOD	PROGRAM SUPPORT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLDWIDE MISSIONARY MOVEMENT 148 POST AVENUE NEW YORK, NY 10034	52-1405479	501(C)(3)	0.	24,404.	FMV	FOOD	PROGRAM SUPPORT
WORLDWIDE MOVEMENT FATHER SON AND THE HOLY SPIRIT - 625 EAST 180TH STREET - BRONX, NY 10457	55-0821485	501(C)(3)	0.	11,739.	FMV	FOOD	PROGRAM SUPPORT
WOSSEM CHARITIES 108-02 SUTPHIN BLVD JAMAICA, NY 11435	11-3260747	501(C)(3)	0.	14,438.	FMV	FOOD	PROGRAM SUPPORT
XAVIER MISSION, INC. 46 WEST 16TH STREET NEW YORK, NY 10011	13-6104552	501(C)(3)	0.	21,723.	FMV	FOOD	PROGRAM SUPPORT
ZICHRON ACHEINU LEVY MENACHEM TZION - 928 44TH STREET - BROOKLYN, NY 11219	11-3157815	501(C)(3)	0.	36,061.	FMV	FOOD	PROGRAM SUPPORT
ZION TABERNACLE FBH CHURCH 105-01 107TH AVENUE OZONE PARK, NY 11417	80-0192226	501(C)(3)	0.	7,589.	FMV	FOOD	PROGRAM SUPPORT

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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:

FOOD BANK MONITORS THE USE OF GRANTS BY FIRST PROVIDING AN AWARD LETTER TO THE GRANTEE ALONG WITH A GRANT AGREEMENT. GRANTEES ARE REQUIRED TO RESPOND TO ALL REFERRALS VIA FOOD BANK'S REFERRAL TRACKING SYSTEM AND ARE REQUIRED TO PROVIDE A MONTHLY REPORT WHICH FOOD BANK MONITORS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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.

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization: **FOOD BANK FOR NEW YORK CITY**
 Employer identification number: **13-3179546**

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2018

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC 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) LISA HINES-JOHNSON COO	(i)	252,807.	0.	15,972.	13,675.	20,267.	302,721.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARGARETTE PURVIS PRESIDENT & CEO (THRU 02/2020)	(i)	478,286.	131,250.	18,915.	13,750.	15,107.	657,308.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) VERONICA JARRETT CFO	(i)	192,051.	0.	552.	10,000.	28,717.	231,320.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) FRANCISCO TEZEN VP OF FUNDRAISING	(i)	158,559.	0.	230.	1,663.	25,862.	186,314.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ANTONIO PERALTA DIRECTOR OF IT	(i)	122,102.	0.	166.	6,392.	26,512.	155,172.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CAMESHA GRANT VP OF COMMUNITY CONNECTION	(i)	160,244.	0.	357.	6,500.	18,420.	185,521.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) TAMI WILSON VP OPERATIONS/ADMIN SERVI	(i)	149,905.	0.	224.	0.	26,785.	176,914.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 7:

THE BOARD APPROVED THE BONUS FOR THE PRESIDENT & CEO.

PART II, COLUMN B (III):

AMOUNTS IN THIS COLUMN FOR CERTAIN INDIVIDUALS REPRESENTS CONTRIBUTIONS
TO 457(B) RETIREMENT PLAN.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization: **FOOD BANK FOR NEW YORK CITY** Employer identification number: **13-3179546**

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	7,178,146	13,192,271.	AVERAGE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

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

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? **X**
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **X**
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **X**
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a		X

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

Schedule M (Form 990) 2018

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

FOOD BANK FOR NEW YORK CITY

Employer identification number

13-3179546

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

SUPPORT FOR COMMUNITY SURVIVAL AND DIGNITY.

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

THAT PROVIDES MEALS AND BUILDS CAPACITY IN THE NEEDIEST COMMUNITIES,
WHILE RAISING AWARENESS AND ENGAGEMENT AMONG ALL NEW YORKERS. THROUGH
ITS NETWORK OF MORE THAN 1,000 CHARITIES AND SCHOOLS CITYWIDE, FOOD
BANK PROVIDES FOOD FOR MORE THAN 64 MILLION FREE MEALS FOR NEW YORKERS
IN NEED. FOOD BANK FOR NYC INCOME SUPPORT SERVICES, INCLUDING FOOD
STAMPS (ALSO KNOWN AS SNAP) AND FREE TAX ASSISTANCE FOR THE WORKING
POOR, PUT MORE THAN \$129 MILLION EACH YEAR INTO THE POCKETS OF NEW
YORKERS, HELPING THEM TO AFFORD FOOD AND ACHIEVE GREATER DIGNITY AND
INDEPENDENCE. IN ADDITION, FOOD BANK'S NUTRITION EDUCATION PROGRAMS AND
SERVICES EMPOWER MORE THAN 50,000 CHILDREN, TEENS AND ADULTS TO SUSTAIN
A HEALTH DIET ON A LOW BUDGET.

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

CENTERS, SCHOOLS, AFTER-SCHOOL PROGRAMS, AND DAYCARE CENTERS AMONG
OTHERS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

COMMUNITY KITCHEN AND FOOD PANTRY OF WEST HARLEM ("KITCHEN" AND
"PANTRY")
AS FOOD BANK'S DIRECT SERVICE OPERATION, THE COMMUNITY KITCHEN AND FOOD
PANTRY SERVED MORE THAN 1.5 MILLION FREE MEALS TO NEW YORKERS IN NEED.

THE KITCHEN AND PANTRY SERVES NUTRITIONAL MEALS IN A DIGNIFIED SETTING

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

Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

Name of the organization FOOD BANK FOR NEW YORK CITY	Employer identification number 13-3179546
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FOR HUNDREDS OF STRUGGLING NEW YORKERS WEEKDAYS, INCLUDING THROUGH ITS SENIOR CENTER WHICH PROVIDES HOT BREAKFAST AND SUPPER, ALONG WITH EXERCISE, NUTRITIONAL WORKSHOPS, SOCIAL EVENTS AND OUTINGS. THE PANTRY UTILIZES A CLIENT-CHOICE MODEL WHERE ELIGIBLE HOUSEHOLDS SELECT FRESH PRODUCE, GRAINS, MEATS, DAIRY, AND CANNED GOODS TO COMPLETE THREE MEALS FOR THREE DAYS, FOR EACH MEMBER OF THEIR FAMILY. THE COMMUNITY KITCHEN AND FOOD PANTRY SERVE AS MODELS OPERATIONS WHERE SERVICE DELIVERY INNOVATIONS ARE TESTED AND REFINED, THEN DEPLOYED THROUGHOUT THE NETWORK TO FURTHER ENHANCE AGENCY CAPACITY AND SERVICE IMPACT.

THE COMMUNITY KITCHEN ALSO SERVES AS HEADQUARTERS FOR FOOD BANK'S BENEFITS ACCESS TEAM THAT WORKS YEAR-ROUND TO CONNECT ELIGIBLE, NEW YORKERS WITH FEDERAL CREDITS AND BENEFITS FOR WHICH THEY QUALIFY. THE TEAM SERVES RESIDENTS WHO TRAVEL FROM ALL FIVE BOROUGHES, AS WELL AS TRAVELS TO TRAIN AND PROVIDE TECHNICAL ASSISTANCE TO MEMBER AGENCIES CITYWIDE. BEST PRACTICES AND INNOVATIONS EMPLOYED AT THE KITCHEN AND PANTRY CONNECT GREATER NUMBERS OF LOW-INCOME NEW YORKERS TO SNAP, FREE TAX-RETURN PREPARATION, EITC, AND EMERGENCY HOUSING, RENT, AND UTILITIES ASSISTANCE. THESE AND OTHER SERVICE, ARE TRANSFERRED TO MEMBERS AGENCIES THROUGH THE TEAM'S ANNUAL SCHEDULE OF WORKSHOPS AND TRAININGS.

EXPENSES \$ 2,122,679. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

VOLUNTEER ENGAGEMENT

FOOD BANK'S ROBUST VOLUNTEER RECRUITMENT EFFORTS SUCCESSFULLY ENGAGE MORE THAN 18,000 VOLUNTEERS EACH YEAR, INCLUDING INDIVIDUALS, CIVIC ORGANIZATIONS, SCHOOLS, AND CORPORATE GROUPS. ENGAGEMENT EFFORTS INCLUDE DEDICATED RECRUITMENT SOFTWARE, A WEALTH OF FLEXIBLE TIME

Name of the organization FOOD BANK FOR NEW YORK CITY	Employer identification number 13-3179546
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SLOTS, AND A YEAR-ROUND CALENDAR FEATURING A WIDE RANGE OF OPTIONS FROM SPECIAL EVENT PREPARATION, TO FOOD PANTRY DISTRIBUTION, BULK FOOD RE-PACKS, AND FOOD DRIVE COORDINATION, THAT PERMIT VOLUNTEERS TO SCHEDULE OPPORTUNITIES THAT ADDRESS PREFERENCES. OFFERINGS OF FLEXIBLE VOLUNTEER SHIFTS OF LIMITED DURATION AS WELL AS MULTI-EVENT OPTIONS, ACCOMMODATE DIVERSE SCHEDULES, SUPPORT THE ENGAGEMENT OF GROUPS WITH SPECIAL NEEDS, AND PROMPT INDIVIDUALS TO RETURN AND VOLUNTEERS YEAR-AFTER YEAR.

RESEARCH AND POLICY

AT THE FOUNDATION OF FOOD BANK'S ADVOCACY IS ORIGINAL RESEARCH THAT GUIDES FOOD BANK'S WORK AND INFORMS PUBLIC POLICY. NOTABLY, FOOD BANK IDENTIFIES HIGH NEED COMMUNITIES BY THEIR "MEAL GAP", A METRIC DEVELOPED BY FEEDING AMERICA THAT REPRESENTS MEALS MISSING FROM THE HOMES OF THOSE LACKING RESOURCES TO AFFORD FOOD. FOOD BANK RESEARCH AIDES THE ORGANIZATION IN EDUCATING THE GOVERNMENT OFFICIALS AT ALL LEVELS AS WELL AS HELPS ENLISTS THE PUBLIC'S SUPPORT IN COMBATING FOOD INSECURITY. FOOD BANK'S RESEARCH INCLUDES THE CREATION OF THE MEAL GAP MAP THAT SHOWS THE CHRONIC VOID AND SPECIFIC LEVELS FOR IMPACTED COMMUNITIES ACROSS THE FIVE BOROUGHES. AS A RESULT OF FOOD BANK'S ADVOCACY, THE MEAL GAP HAS BEEN ADOPTED BY NEW YORK CITY AND NEW YORK STATE AS THE OFFICIAL MEASURE OF FOOD INSECURITY AND TOOL FOR ALLOCATING FOOD AND ANTI-POVERTY SERVICES CITY- AND STATEWIDE. ACCESSIBLE THROUGH FOOD BANK'S WEBSITE ARE THE POPULAR: MEAL GAP MAP TRENDS, NYC HUNGER SAFETY NET REPORTS, AND POLICY PAPERS AND RESEARCH BRIEFS, AMONG OTHER FOOD BANK RESEARCH DOCUMENTS.

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

THE BOARD REVIEWS THE DRAFT FORM 990 AS PREPARED BY OUR INDEPENDENT

Name of the organization FOOD BANK FOR NEW YORK CITY	Employer identification number 13-3179546
---	--

ACCOUNTANTS AND COMMENTS ON IT PRIOR TO SUBMISSION OF THE FILING.

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

FOOD BANK REQUIRES EACH BOARD MEMBER TO REVIEW AND SIGN ITS CONFLICT OF INTEREST POLICY ANNUALLY WHICH REQUIRES BOARD MEMBERS TO DISCLOSE ANY CONFLICT OF INTEREST AND RECUSE THEMSELVES OF VOTING IN THOSE SITUATIONS.

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

THE BOARD OF DIRECTORS IS THE COMPENSATION SETTING BODY AND IS COMPOSED OF ALL MEMBERS OF THE BOARD OF DIRECTORS THAT HAVE NO PERSONAL INTEREST IN THE COMPENSATION ARRANGEMENT. THE COMPARABILITY DATA IS BASED ON INDUSTRY KNOWLEDGE. THE COMPENSATION IS PREPARED, APPROVED AND SIGNED BY THE CHAIRMAN OF THE BOARD AND SUBMITTED TO HUMAN RESOURCES.

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

FOOD BANK FOR NYC MAKES ITS GOVERNING DOCUMENTS, FORM 990 AND AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization **FOOD BANK FOR NEW YORK CITY** Employer identification number **13-3179546**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
COMMUNITY FOOD RESOURCES CENTER PROPERTY - 13-4120983, 355 FOOD BANK DRIVE, BRONX, NY 10474	HOLD TITLE TO PROPERTY	NEW YORK	501(C)(2)		FOOD BANK OF NEW YORK CITY	X	

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

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

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

2018

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury Internal Revenue Service

Open to Public Inspection for 501(c)(3) Organizations Only

Part I: Name of organization (FOOD BANK FOR NEW YORK CITY), Employer identification number (13-3179546), and address (39 BROADWAY, NO. 10, NEW YORK, NY 10006).

Part II: Book value of all assets at end of year (19,624,022) and Group exemption number.

Part III: Enter the number of the organization's unrelated trades or businesses and describe the only (or first) unrelated trade or business here.

Part IV: During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?

Part V: The books are in care of (VERONICA JARRETT, CFO) and Telephone number (212-566-7855).

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Cost of goods sold, Capital gain net income, etc.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees, Salaries and wages, Repairs and maintenance, etc.

Part III Total Unrelated Business Taxable Income	
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 0.
34	Amounts paid for disallowed fringes
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions) 1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36

Part IV Tax Computation	
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21) 0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)
41	Proxy tax. See instructions
42	Alternative minimum tax (trusts only)
43	Tax on Noncompliant Facility Income. See instructions
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies

Part V Tax and Payments	
45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a
b	Other credits (see instructions) 45b
c	General business credit. Attach Form 3800 45c
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 45d
e	Total credits. Add lines 45a through 45d 45e
46	Subtract line 45e from line 44 46 0.
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule) 47
48	Total tax. Add lines 46 and 47 (see instructions) 48 0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2 49 0.
50a	Payments: A 2017 overpayment credited to 2018 50a 210.
b	2018 estimated tax payments 50b 17,530.
c	Tax deposited with Form 8868 50c
d	Foreign organizations: Tax paid or withheld at source (see instructions) 50d
e	Backup withholding (see instructions) 50e
f	Credit for small employer health insurance premiums (attach Form 8941) 50f
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total ▶ 50g
51	Total payments. Add lines 50a through 50g 51 17,740.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> 52
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed 53
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid 54 17,740.
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax ▶ Refunded ▶ 55 17,740.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)		
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here ▶	Yes No
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.	Yes No
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$	Yes No

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

Sign Here Signature: COPY Date: _____ Title: PRESIDENT & CEO

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

Paid Preparer Use Only	Print/Type preparer's name MAGDALENA CZERNIAWSKI	Preparer's signature MAGDALENA CZERNIAWSKI	Date 07/13/20	Check <input type="checkbox"/> if self-employed	PTIN P00535099
	Firm's name ▶ MARKS PANETH LLP			Firm's EIN ▶ 11-3518842	
	Firm's address ▶ 685 THIRD AVENUE NEW YORK, NY 10017			Phone no. 212-503-8800	

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

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

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

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

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. FOOD BANK FOR NEW YORK CITY	Employer identification number (EIN) or 13-3179546
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 39 BROADWAY, NO. 10	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10006	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

VERONICA JARRETT, CFO

- The books are in the care of ▶ **39 BROADWAY FLOOR 10, - NEW YORK, NY 10006**
Telephone No. ▶ **212-566-7855** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **JUL 1, 2018**, and ending **JUN 30, 2019**.

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

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

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