

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Department of the Treasury
Internal Revenue Service

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.

2023

Open to Public
Inspection

A For the 2023 calendar year, or tax year beginning		and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization HUNGER SOLUTIONS MINNESOTA		D Employer identification number 36-3567366
	Doing business as		E Telephone number 651-486-9860
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 555 PARK STREET STE 40		
	City or town, state or province, country, and ZIP or foreign postal code ST. PAUL, MN 55103		
	F Name and address of principal officer: MARY MITCHELL SAME AS C ABOVE		G Gross receipts \$ 11,557,333.
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions	
J Website: HUNGERSOLUTIONS.ORG		H(c) Group exemption number	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1987	M State of legal domicile: MN

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	11
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 13,022,026.	Current Year 11,295,539.
	9 Program service revenue (Part VIII, line 2g)	366,319.	222,600.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	23,185.	30,142.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	19,778.	9,052.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,431,308.	11,557,333.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	11,649,204.
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)		942,873.	938,069.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25)		108,356.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		776,437.	794,263.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,368,514.	11,726,523.
19 Revenue less expenses. Subtract line 18 from line 12	62,794.	-169,190.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 2,776,980.	End of Year 2,779,826.
	21 Total liabilities (Part X, line 26)	426,837.	491,873.
	22 Net assets or fund balances. Subtract line 21 from line 20	2,350,143.	2,287,953.

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	PUBLIC DISCLOSURE COPY			
	Signature of officer MARY MITCHELL, SECRETARY		Date	
Paid Preparer Use Only	Print/Type preparer's name MATT PILLSBURY	Preparer's signature MATT PILLSBURY	Date 08/22/24	Check if self-employed <input type="checkbox"/> PTIN P01565609
	Firm's name CARPENTER, EVERT & ASSOCIATES, LTD.	Firm's EIN 41-1534805	Phone no. (952) 831-0085	
	Firm's address 7760 FRANCE AVE S, SUITE 940 BLOOMINGTON, MN 55435			

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

Part III Statement of Program Service Accomplishments

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

☒**1** Briefly describe the organization's mission:

HUNGER SOLUTIONS MINNESOTA IS A COMPREHENSIVE HUNGER RELIEF ORGANIZATION THAT WORKS TO END HUNGER IN MINNESOTA. WE TAKE ACTION TO ASSURE FOOD SECURITY FOR ALL MINNESOTANS BY SUPPORTING PROGRAMS AND AGENCIES THAT PROVIDE FOOD TO THOSE IN NEED, ADVANCING SOUND PUBLIC

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

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 11,184,109. including grants of \$ 9,994,191.) (Revenue \$)
 FOOD SHELF CAPACITY - TO END HUNGER IN MINNESOTA, WE NEED A STRONG, RESPONSIVE EMERGENCY FOOD SYSTEM. HUNGER SOLUTIONS MINNESOTA WORKS TO BUILD FOOD SHELF CAPACITY SO FOOD SHELVES IN OUR STATE ARE BEST ABLE TO MEET THE NEEDS OF THEIR LOCAL COMMUNITIES. IN 2023, HUNGER SOLUTIONS MINNESOTA, IN PARTNERSHIP WITH THE MINNESOTA DEPARTMENT OF HUMAN SERVICES, DISTRIBUTED MORE THAN \$4.25 MILLION IN GRANTS TO OVER 273 FOOD SHELVES ACROSS THE STATE. THESE GRANT ALLOWED FOOD SHELVES THE FUNDING THEY NEED TO KEEP FOOD ON THEIR SHELVES AND THE RESOURCES THEY NEED TO BE ABLE TO SERVE THEIR COMMUNITIES.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$ 192,250.)
 SNAP OUTREACH - THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) IS THE LARGEST FEDERAL NUTRITION ASSISTANCE PROGRAM, SUPPLEMENTING THE FOOD BUDGETS OF OVER 400,000 LOW-INCOME HOUSEHOLDS IN MINNESOTA. THE PROGRAM SERVES AS THE FIRST LINE OF DEFENSE AGAINST HUNGER, FOR EVERY MEAL PROVIDED BY THE NETWORK OF FOOD BANKS AND FOOD SHELVES, SNAP PROVIDES NINE MEALS. HUNGER SOLUTIONS MINNESOTA'S SNAP OUTREACH EFFORTS CONNECT PEOPLE TO THE SNAP PROGRAM AND TO LOCAL FOOD RESOURCES THROUGH THE MINNESOTA FOOD HELPLINE, MARKET BUCKS AND SNAP RX. IN 2023, THE MINNESOTA FOOD HELPLINE ANSWERED 15,456 CALLS FOR HELP.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
 ADVOCACY - SERVING AS THE ANTI-HUNGER COMMUNITY'S LEADING VOICE WITH LAW MAKERS, WE CHAMPION ENDING HUNGER THROUGH PUBLIC POLICY INTERVENTION AND SYSTEMIC CHANGE. KEY PUBLIC POLICIES THAT WERE PASSED IN 2023 INCLUDED THE PASSING OF UNIVERSAL SCHOOL MEALS IN MINNESOTA, A RAISE TO THE GROSS INCOME ELIGIBILITY LIMIT FOR SNAP, INCREASED FUNDING FOR THE EMERGENCY FOOD SYSTEM AND MORE.

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

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

4e Total program service expenses 11,184,109.Form **990** (2023)

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	6
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

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

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

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

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

Section A. Governing Body and Management

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	10			
b Enter the number of voting members included on line 1a, above, who are independent		10		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed MN

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records
RACHEL HOLMES - 6514869860
555 PARK STREET, STE 400, ST PAUL, MN 55103

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) COLLEEN MORIARTY EXECUTIVE DIRECTOR	40.00			X				159,396.	0.	20,242.
(2) RACHEL HOLMES ASSOCIATE DIRECTOR	40.00			X				105,362.	0.	8,237.
(3) LEAH GARDNER POLICY DIRECTOR	40.00			X				104,021.	0.	3,909.
(4) JULIE ROBEY PRESIDENT	1.00	X		X				0.	0.	0.
(5) LYDIA BJORGE PRESIDENT	1.00	X		X				0.	0.	0.
(6) RYAN CARRIGAN TREASURER	1.00	X		X				0.	0.	0.
(7) MARY MITCHELL SECRETARY	1.00	X		X				0.	0.	0.
(8) DR. NEIL BRATNEY DIRECTOR	1.00	X						0.	0.	0.
(9) JODIE DVORKIN DIRECTOR	1.00	X						0.	0.	0.
(10) SCOTT VAN DAELE DIRECTOR	1.00	X						0.	0.	0.
(11) LEYLA BARI DIRECTOR	1.00	X						0.	0.	0.
(12) STEVEN KRIKAVA DIRECTOR	1.00	X						0.	0.	0.
(13) JALILIA ABDUL-BROWN DIRECTOR	1.00	X						0.	0.	0.
(14) HEATHER ALDEN VICE PRESIDENT	1.00	X		X				0.	0.	0.
(15) ANDREW CHELSETH DIRECTOR	1.00	X						0.	0.	0.
(16) CARLA KOHLER DIRECTOR	1.00	X						0.	0.	0.

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	10,534,252.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	761,287.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a PROGRAM SERVICES	Business Code					
	b			222,600.	222,600.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			222,600.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			30,142.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		6a	(i) Real (ii) Personal				
b Less: rental expenses ...		6b					
c Rental income or (loss)		6c					
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		7a	(i) Securities (ii) Other				
b Less: cost or other basis and sales expenses		7b					
c Gain or (loss)		7c					
d Net gain or (loss)							
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		8a					
b Less: direct expenses		8b					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19		9a					
b Less: direct expenses		9b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances		10a					
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a OTHER REVENUE	Business Code					
	b			9,052.	9,052.		
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			9,052.			
	12 Total revenue. See instructions			11,557,333.	231,652.	0.	30,142.

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	9,994,191.	9,994,191.		
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	401,169.	277,676.	84,840.	38,653.
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	415,095.	287,316.	87,785.	39,994.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	62,429.	43,212.	13,202.	6,015.
10 Payroll taxes	59,376.	41,098.	12,557.	5,721.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	27,586.		27,586.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	411,727.	277,356.	126,444.	7,927.
12 Advertising and promotion	59,395.	55,510.	3,596.	289.
13 Office expenses	190,729.	128,147.	52,825.	9,757.
14 Information technology				
15 Royalties				
16 Occupancy	80,833.	79,603.	1,230.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	9,459.		9,459.	
23 Insurance	14,534.		14,534.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a				
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	11,726,523.	11,184,109.	434,058.	108,356.
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 SheetCheck 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	748,254.	1	276,112.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	336,142.	4	466,357.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	218.	9	3,392.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 131,433.		
	b Less: accumulated depreciation	10b 120,467.		
		5,804.	10c	10,966.
	11 Investments - publicly traded securities	1,680,833.	11	1,822,147.
	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	5,729.	15	200,852.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	2,776,980.	16	2,779,826.	
Liabilities	17 Accounts payable and accrued expenses	167,727.	17	273,265.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	259,110.	21	22,488.
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0.	25	196,120.
	26 Total liabilities. Add lines 17 through 25	426,837.	26	491,873.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	2,105,801.	27	2,070,541.
	28 Net assets with donor restrictions	244,342.	28	217,412.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	2,350,143.	32	2,287,953.
	33 Total liabilities and net assets/fund balances	2,776,980.	33	2,779,826.

Form 990 (2023)

Part XI Reconciliation of Net AssetsCheck 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	11,557,333.
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,726,523.
3	Revenue less expenses. Subtract line 2 from line 1	3	-169,190.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,350,143.
5	Net unrealized gains (losses) on investments	5	107,000.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,287,953.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

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

Form 990 (2023)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

HUNGER SOLUTIONS MINNESOTA

Employer identification number

36-3567366

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

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

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

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3242716.	12977643.	4531943.	13022206.	11518139.	45292647.
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	3242716.	12977643.	4531943.	13022206.	11518139.	45292647.
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.						45292647.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	3242716.	12977643.	4531943.	13022206.	11518139.	45292647.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	24,803.	23,203.	27,074.	23,185.	30,142.	128,407.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						45421054.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	99.72	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	99.64	%
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<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"/>

Schedule A (Form 990) 2023

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2023

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

		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

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

Schedule A (Form 990) 2023

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 B
(Form 990)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

HUNGER SOLUTIONS MINNESOTA

Employer identification number

36-3567366

Organization type (check one):

Filers of:**Section:**

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.**Special Rules**☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

HUNGER SOLUTIONS MINNESOTA

36-3567366

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 336,595.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 9,653,910.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 324,050.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

36-3567366

Part II

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

Name of organization

Employer identification number

HUNGER SOLUTIONS MINNESOTA**36-3567366****Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ _____

Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

HUNGER SOLUTIONS MINNESOTA

Employer identification number

36-3567366

Part I

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

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

Part II

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

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

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

☐ Yes ☐ No

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

Part III

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

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

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

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

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

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2023

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

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

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment _____ %

b Permanent endowment _____ %

c Term endowment _____ %

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

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

(i) Unrelated organizations? ☐ Yes ☒ No

(ii) Related organizations? ☐ Yes ☒ No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☒ No

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				
c Leasehold improvements				
d Equipment		131,433.	120,467.	10,966.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				10,966.

Schedule D (Form 990) 2023

Part VII Investments - Other Securities

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

(a) Description	(b) Book value
(1) SECURITY DEPOSITS	4,445.
(2) RIGHT OF USE ASET	196,407.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	200,852.

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITY	196,120.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	196,120.

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

Schedule D (Form 990) 2023

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

HUNGER SOLUTIONS MINNESOTA

Employer identification number
36-3567366

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
360 COMMUNITIES 14521 CIMARRON AVE W ROSEMOUNT, MN 55067	41-0987708	501 (C) (3)	93,020.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
A PLACE FOR HOPE: RECOVERY AND WELLNESS CENTER - 2419 12TH AVE ST, STE 1 - MOORHEAD, MN 56560	41-1922618	501 (C) (3)	30,393.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
AGATE HOUSING AND SERVICES, INC. 714 PARK AVE MINNEAPOLIS, MN 55404	01-0639118	501 (C) (3)	5,654.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
AKELEY/NEVIS COMMUNITY FOOD SHELF PO BOX 25 AKELEY, MN 56433	27-4651169	501 (C) (3)	6,541.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
ALDEN AREA FOOD SHELF 191 WATER STREET ALDEN, MN 56009	30-0197511	501 (C) (3)	11,956.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
AMERICAN INDIAN COMMUNITY HOUSING ORGANIZATION - 202 W 2ND ST - DULUTH, MN 55802	41-1782394	501 (C) (3)	12,033.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT

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

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

Schedule I (Form 990) 2023

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANNANDALE FOOD SHELF 390 ANNANDALE BLVD ANNANDALE, MN 55302	36-3297409	501 (C) (3)	18,365.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ANOKA COUNTY BROTHERHOOD COUNCIL, INC. - 2615 9TH AVE N - ANOKA, MN 55303	51-0155191	501 (C) (3)	63,538.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
AREA FOOD SHELF OF NEW RICHLAND 101 S BROADWAY NEW RICHLAND, MN 56072	45-5632734	501 (C) (3)	14,506.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ARGYLE AREA FOOD SHELF PO BOX 18 ARGYLE, MN 56713	41-0764074	501 (C) (3)	10,670.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ARROWHEAD ECONOMIC OPPORTUNITY AGENCY - 203 S 2ND ST E - AURORA, MN 55705	41-6052144	501 (C) (3)	58,925.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
AUGSBURG UNIVERSITY 2016 S 8TH STREET MINNEAPOLIS, MN 55454	41-0694721	501 (C) (3)	9,236.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
AURORA FOOD SHELF 702 S 3RD AVE VIRGINIA, MN 55792	41-6052144	501 (C) (3)	7,349.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
AVON FOOD SHELF, INC 212 1ST STREET SW DOOR 1 AVON, MN 55454	26-2821812	501 (C) (3)	10,897.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
BARNESVILLE AREA FOOD PANTRY 106 FRONT STREET BARNESVILLE, MN 56310	26-4595572	501 (C) (3)	11,048.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BATTLE LAKE EMERGENCY FOOD SHELF 205 W. MAIN BATTLE LAKE, MN 56514	41-1706700	501 (C) (3)	5,828.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
BBE AREA FOOD SHELF 111 NORTH PLEASANT AVE BROOTEN, MN 56515	20-1537307	501 (C) (3)	12,573.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
BECKER COUNTY FOOD PANTRY 1308 ROSSMAN AVE DETROIT LAKES, MN 56501	36-3332912	501 (C) (3)	27,739.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
BELLE PLAINE FOOD SHELF 128 N MERIDIAN STREET BELLE PLAINE, MN 56011	37-1638207	501 (C) (3)	16,547.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
BEMIDJI COMMUNITY FOOD SHELF 1260 EXCHANGE AVE SE BEMIDJI, MN 56601	41-1494430	501 (C) (3)	47,161.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
BETHLEHEM COVENANT CHURCH 505 8TH ST. N HUDSON, MN 56296	41-1531811	501 (C) (3)	5,534.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND
BIG LAKE COMMUNITY FOOD SHELF 160 LAKE ST. N. BIG LAKE, MN 55309-7500	41-1820136	501 (C) (3)	49,424.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
BLESSING SHELVES OF FIRST BAPTIST CHURCH - 7398 FAIRVIEW RD N - BAXTER, MN 56425	45-5536480	501 (C) (3)	7,357.	0.			MINNESOTA FOOD SHELF PROGRAM
BOIS FORTE COMMUNITY FOOD SHELF- NETT LAKE - 12831 NETT LAKE RD - NETT LAKE, MN 55772	41-0954784	501 (C) (3)	15,398.	0.			MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOUNTIFUL BASKET FOOD SHELF 1600 BAVARIA ROAD CHASKA, MN 55318	84-2309087	501 (C) (3)	39,597.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND EMERGENCY RESPONSE FOOD SHELF GRANT
BRAHAM AREA FOOD SHELF 655 SW 8TH ST BRAHAM, MN 55006	41-1647405	501 (C) (3)	6,255.	0.			MINNESOTA FOOD SHELF PROGRAM
BRAINERD SALVATION ARMY FOOD SHELF 208 S 5TH ST. BRAINERD, MN 56401	36-2167910	501 (C) (3)	8,105.	0.			MINNESOTA FOOD SHELF PROGRAM
BRIAN COYLE COMMUNITY CENTER 420 15TH AVE S MINNEAPOLIS, MN 55454	41-0916478	501 (C) (3)	33,690.	0.			MINNESOTA FOOD SHELF PROGRAM
BRIDGEPOINTE COMMUNITY CHURCH FOOD SHELF - 121 17TH STREET ,N. - MOORHEAD, MN 56560	41-6168135	501 (C) (3)	11,513.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
BROWERVILLE AREA FOOD SHELF 701 N MAIN ST. BROWERVILLE, MN 56438	71-0982950	501 (C) (3)	5,936.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
BUFFALO FOOD SHELF 301 12TH AVENUE SOUTH BUFFALO, MN 55313	41-1888259	501 (C) (3)	13,249.	0.			MINNESOTA FOOD SHELF PROGRAM
CAER 12621 ELK LAKE RD. NW, ELK RIVER, M ELK RIVER, MN 55330	41-1415484	501 (C) (3)	55,387.	0.			MINNESOTA FOOD SHELF PROGRAM
CALVARY EVANGELICAL LUTHERAN CHURCH - 3901 CHICAGO AVE S - MINNEAPOLIS, MN 55407	41-0705762	501 (C) (3)	43,233.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMPUS CUPBOARD 2016 S 8TH STREET MINNEAPOLIS, MN 55454	41-0694721	501 (C) (3)	19,244.	0.			MINNESOTA FOOD SHELF PROGRAM
CANASTA FAMILIAR 797 E. 7TH ST. ST. PAUL, MN 55106	41-1386986	501 (C) (3)	57,299.	0.			MINNESOTA FOOD SHELF PROGRAM
CANNON FALLS FOOD SHELF 511 BELLE ST. W CANNON FALLS, MN 55009	30-0221349	501 (C) (3)	6,752.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
CANSAYAPI FOOD PANTRY 39512 RESERVATION HIGHWAY 1 CANNON FALLS, MN 56270		501 (C) (3)	16,430.	0.			MINNESOTA FOOD SHELF PROGRAM
CAP AGENCY FOOD SHELF 738 1ST AVE E SHAKOPEE, MN 55379	41-0903890	501 (C) (3)	17,838.	0.			MINNESOTA FOOD SHELF PROGRAM
CAPI USA FOOD SHELF 5930 BROOKLYN BLVD. BROOKLYN CENTER, MN 55429	41-1417198	501 (C) (3)	29,182.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
CARE AND SHARE OF CROOKSTON, INC. 220 E 3RD ST. CROOKSTON, MN 56716	41-1560222	501 (C) (3)	7,563.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
CARING HEARTS IN ACTION MINNESOTA 423 3RD ST FARMINGTON MN 55024 FARMINGTON, MN 55024	82-4150967	501 (C) (3)	14,227.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
CASS LAKE AREA FOOD SHELF 16051 65TH AVE NW CASS LAKE, MN 56633	41-1430172	501 (C) (3)	12,990.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC CHARITIES EMERGENCY SERVICES FOOD SHELF - 157 ROOSEVELT RD - ST. CLOUD, MN 56301	41-0737799	501 (C) (3)	80,217.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
CEAP 7051 BROOKLYN BOULEVARD BROOKLYN CENTER, MN 55429-1371	41-0990340	501 (C) (3)	61,878.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
CEDAR CREEK CHURCH 30 MAIN ST. HAYFIELD, MN 55940	41-1697527	501 (C) (3)	13,115.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
CENTENNIAL COMMUNITY FOOD SHELF 200 CIVIC HEIGHTS CIRCLE CIRCLE PINES, MN 55014	45-5579732	501 (C) (3)	24,804.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
CHANGE STARTS WITH COMMUNITY 1201 WEST BROADWAY STE 2 MINNEAPOLIS, MN 55411	86-3745860	501 (C) (3)	75,000.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
CHANNEL ONE FOOD SHELF 131 35TH STREET SE ROCHESTER, MN 55904	41-1379713	501 (C) (3)	183,272.	0.			MINNESOTA FOOD SHELF PROGRAM
CHATFIELD COMMUNITY FOOD SHELF 124 WINONA STREET SE CHATFIELD, MN 55923	41-1465518	501 (C) (3)	12,558.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
CHISHOLM FOOD SHELF 208 W LAKE ST. CHISHOLM, MN 55719	20-1390848	501 (C) (3)	8,396.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF - 8264 4TH ST N - OAKDALE, MN 55128	36-3298764	501 (C) (3)	75,000.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHUM 120 N. 1ST AVE W DULUTH, MN 55802	41-2008865	501 (C) (3)	12,399.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
CHURCH OF THE INCARNATION 3801 PLEASANT AVE MINNEAPOLIS, MN 55409	51-0888692	501 (C) (3)	75,000.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
CHURCHES UNITED FOR THE HOMELESS 1308 MAIN AVE MOORHEAD, MN 56560	41-1594892	501 (C) (3)	37,376.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
CLEARWATER CLEAR LAKE FOOD SHELF 1100 CNTY RD 75 CLEARWATER, MN 55320	74-3144457	501 (C) (3)	13,736.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
CLEARWATER COUNTY FOOD SHELF 114 MAIN AVE N BAGLEY, MN 56621	47-5127382	501 (C) (3)	15,892.	0.			MINNESOTA FOOD SHELF PROGRAM
CLIMAX PARISH FOOD SHELF 104 BROADWAY CLIMAX, MN 56523	41-0845736	501 (C) (3)	12,619.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
COMET'S CUPBOARD 1282 CONCORDIA AVE ST. PAUL, MN 55104	36-2167910	501 (C) (3)	5,717.	0.			MFSP - MINNESOTA FOOD SHELF PROGRAM
COMMUNITY ACTION CENTER 1651 JEFFERSON PARKWAY, HS-200 NORTHFIELD, MN 55057	41-0970984	501 (C) (3)	140,440.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
COMMUNITY BRIDGE FOOD SHELF 2400 PARK AVE S MINNEAPOLIS, MN 55404	46-2308775	501 (C) (3)	16,680.	0.			MFSP - MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY EMERGENCY SERVICE FOOD SHELF - 1900 11TH AVE S - MINNEAPOLIS, MN 55404	41-1728314	501 (C) (3)	43,497.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
COMMUNITY PATHWAYS OF STEELE COUNTY - 155 OAKDALE ST - OWATONNA, MN 55060	41-1593592	501 (C) (3)	97,913.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
COMPASSION MINISTRIES DBA THE VILLAGE IN WATERVILLE - 205 N. 1ST ST. - WATERVILLE, MN 56096	41-1457258	501 (C) (3)	10,244.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
COMUNIDADES LATINAS UNIDAS EN SERVICIO INC. - 771 MARGARET STREET - SAINT PAUL, MN 55106	41-1386986	501 (C) (3)	71,533.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
CONCORDIA UNIVERSITY ST. PAUL FOOD SHELF - 1282 CONCORDIA AVE - ST. PAUL, MN 55104	41-0696906	501 (C) (3)	6,266.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
CROSS CENTER OF BENTON COUNTY 150 4TH AVE FOLEY, MN 56329	41-1444107	501 (C) (3)	17,057.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
CROSS SERVICES 12915 WEINAND CIRCLE ROGERS, MN 55374	41-1314577	501 (C) (3)	72,320.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
CROSSLAKE FOOD SHELF 34212 COUNTY RD. 3 CROSSLAKE, MN 56442	41-1397273	501 (C) (3)	13,117.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
DEER RIVER AREA FOOD SHELF 1049 COMSTOCK DRIVE DEER RIVER, MN 56636	41-1476506	501 (C) (3)	6,289.	0.			MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEPARTMENT OF INDIAN WORK 3080 CENTERVILLE ROAD LITTLE CANADA, MN 55117	41-1517569	501 (C) (3)	15,293.	0.			MINNESOTA FOOD SHELF PROGRAM
DIVISION OF INDIAN WORK 1001 EAST LAKE STREET MINNEAPOLIS, MN 55407	81-5265328	501 (C) (3)	9,798.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
DOROTHY DAY FOOD PANTRY - MOORHEAD 1308 MAIN AVE MOORHEAD, MN 56560	41-1446978	501 (C) (3)	11,716.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
EAST GRAND FORKS FOOD SHELF 1715 3RD AVE NW EAST GRAND FORKS, MN 56721	41-1864049	501 (C) (3)	17,008.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
EAST SIDE NEIGHBORHOOD SERVICES 1801 CENTRAL AVENUE NE MINNEAPOLIS, MN 55418	41-0873798	501 (C) (3)	78,651.	0.			MINNESOTA FOOD SHELF PROGRAM
ECHO FOOD SHELF 1014 SOUTH FRONT ST MANKATO, MN 56001	41-1429214	501 (C) (3)	48,575.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ECUMENICAL FOOD PANTRY 308 WATER ST ALBERT LEA, MN 56007	41-0695512	501 (C) (3)	7,073.	0.			MINNESOTA FOOD SHELF PROGRAM
EDEN VALLEY FOOD SHELF 556 BROOKS ST. N EDEN VALLEY, MN 55329	27-3112523	501 (C) (3)	10,832.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ELIJAH'S PANTRY 501 7TH AVE TWO HARBORS, MN 55616	71-0982950	501 (C) (3)	5,339.	0.			MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ELLENDALE AREA FOOD SHELF 200 6TH ST.N. ELLENDALE, MN 56026	41-1311159	501 (C) (3)	14,604.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ELY AREA FOOD SHELF 15 W. CONAN STREET ELY, MN 55731	85-1121626	501 (C) (3)	15,362.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
EMERGENCY COMMUNITY HELP ORGANIZATION - 1014 SOUTH FRONT ST - MANKATO, MN 56001	41-1429214	501 (C) (3)	68,297.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
EMILY EMERGENCY FOOD SHELF 20948 CO RD 1 EMILY, MN 56447	45-3504397	501 (C) (3)	11,907.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
EYOTA FOOD PANTRY 111 CENTER AVENUE, SOUTH EYOTA, MN 55934	85-4288423	501 (C) (3)	8,777.	0.			MINNESOTA FOOD SHELF PROGRAM
FAMILY PATHWAYS 1575 1ST AVE E CAMBRIDGE, MN 55008	41-1332828	501 (C) (3)	127,401.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
FARIBAULT COUNTY FOODSHELF INC 411 1/2 S GROVER ST. BLUE EARTH, MN 56013	41-1647405	501 (C) (3)	6,378.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
FATHER'S HEART & HANDS 7123 HWY 6 N REMER, MN 56672		501 (C) (3)	5,526.	0.			MINNESOTA FOOD SHELF PROGRAM
FERGUS FALLS COMMUNITY FOOD SHELF 1512 FIRST AVE N FERGUS FALLS, MN 56537	41-1558108	501 (C) (3)	8,561.	0.			MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

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FIRST PRESBYTERIAN CHURCH DBA 308 WATER ST ALBERT LEA, MN 56007	41-0695512	501 (C) (3)	8,148.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
FISHES AND LOAVES FOOD SHELF 1505 BURNS AVENUE SAINT PAUL, MN 55106-6606	41-1720681	501 (C) (3)	6,749.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
FLOODWOOD AREA FOOD SHELF 601 ASH STREET FLOODWOOD, MN 55736-0347	41-1296075	501 (C) (3)	5,621.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
FREEDOMWORKS BREAD OF LIFE 2912 FREMONT AVE N MINNEAPOLIS, MN 55411	43-2048391	501 (C) (3)	18,551.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
FRIENDS FOR LIFE INC. 309 LEWIS AVE. S WATERTOWN, MN 55388	41-1645058	501 (C) (3)	6,315.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
FRIENDS IN NEED FOOD SHELF 535 4TH ST ST PAUL PARK, MN 55071	41-1794212	501 (C) (3)	40,930.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
FRONT AND CENTER, INC. 111 CENTER AVENUE, SOUTH EYOTA, MN 55934	85-4288423	501 (C) (3)	8,709.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
FRUIT OF THE VINE FOOD SHELF 1533 W ARROWHEAD RD DULUTH, MN 55811	41-1680001	501 (C) (3)	28,420.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
FRUIT OF THE VINE FOOD SHELF SAINT PAUL - 1280 ARCADE STREET - SAINT PAUL, MN 55106	46-1443346	501 (C) (3)	14,951.	0.			MINNESOTA FOOD SHELF PROGRAM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FULDA FOOD SHELF, INC. 305 SOUTH LAFAYETTE AVENUE FULDA, MN 56131	80-0277374	501 (C) (3)	11,102.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
GARRISON AREA CAREGIVERS, INC 9541 MADISON ST GARRISON, MN 56450	20-2899659	501 (C) (3)	13,732.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
GLYNDON COMMUNITY FOOD PANTRY 414 PARKE AV S GLYNDON, MN 56547	92-0936065	501 (C) (3)	10,580.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
GOOD IN THE HOOD 8600 BLOOMINGTON AVE S BLOOMINGTON, MN 55425	01-0768296	501 (C) (3)	160,525.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
GOOD WORKS FOOD SHELF 697 13TH AVE NE MINNEAPOLIS, MN 55413	41-1311159	501 (C) (3)	17,809.	0.			MINNESOTA FOOD SHELF PROGRAM
GRACE COMMUNITY FOOD SHELF 8600 BLOOMINGTON AVE S BLOOMINGTON, MN 55425	01-0768296	501 (C) (3)	5,284.	0.			MINNESOTA FOOD SHELF PROGRAM
GRACE LUTHERAN CHURCH 1500 6TH ST NE MINNEAPOLIS, MN 55413	20-8796060	501 (C) (3)	25,782.	0.			MINNESOTA FOOD SHELF PROGRAM
GRACE MINISTRIES 8600 BLOOMINGTON AVE S BLOOMINGTON, MN 55425	01-0768296	501 (C) (3)	5,005.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
GRAND MEADOW FAITH COMMUNITY FOOD SHELF - 209 2ND AVE NE - GRAND MEADOW, MN 55936	71-0986682	501 (C) (3)	11,459.	0.			MINNESOTA FOOD SHELF PROGRAM

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GRANT COUNTY EMERGENCY FOODSHELF 1311 STATE HWY 79E ELBOW LAKE, MN 56531	41-0705855	501 (C) (3)	5,823.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
GREAT IS THY FAITHFULNESS 1115 N. 30TH AVE MINNEAPOLIS, MN 55411	45-2566276	501 (C) (3)	7,061.	0.			MINNESOTA FOOD SHELF PROGRAM
GREAT IS THY FAITHFULNESS COGIC 1115 N. 30TH AVE MINNEAPOLIS, MN 55411	45-3328914	501 (C) (3)	6,381.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
GREATER MOUNT VERNON FOOD BANK 1800 DUPONT AVENUE N MINNEAPOLIS, MN 55411	41-1462077	501 (C) (3)	16,271.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
GROVELAND EMERGENCY FOOD SHELF 1900 NICOLLET AVE MINNEAPOLIS, MN 55403	41-1933266	501 (C) (3)	73,987.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
GRYGLA-GATZKE FOOD SHELF 231 EAST STATE STREET GRYGLA, MN 56727	41-1363952	501 (C) (3)	10,345.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
HALLIE Q. BROWN BASIC NEEDS PROGRAM - 270 N KENT ST - SAINT PAUL, MN 55102	41-0693846	501 (C) (3)	35,479.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
HANNAHRAYS PANTRY LAKE BRONSON 106 MAIN ST. LAKE BRONSON, MN 56734	03-0406197	501 (C) (3)	5,194.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
HARVEST FROM THE HEART 3817 PLEASANT MINNEAPOLIS, MN 55409	37-1638207	501 (C) (3)	79,415.	0.			MINNESOTA FOOD SHELF PROGRAM

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HASTINGS FAMILY SERVICE 301 2ND ST E HASTINGS, MN 55033	23-7083534	501 (C) (3)	20,803.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
HAYFIELD COMMUNITY FOOD PANTRY 30 EAST MAIN STREET HAYFIELD, MN 55940	41-1921523	501 (C) (3)	9,947.	0.			MINNESOTA FOOD SHELF PROGRAM
HEARTS AND HANDS POPE COUNTY FOOD SHELF - 206 6TH AVENUE NW - GLENWOOD, MN 56334	80-0277374	501 (C) (3)	5,736.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
HEAVEN'S TABLE FOOD SHELF 909 WINNEBAGO AVENUE FAIRMONT, MN 56031	45-3075078	501 (C) (3)	21,565.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
HENNING COMMUNITY FOOD SHELF INC 604 2ND ST HENNING, MN 56551	45-5536480	501 (C) (3)	11,572.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
HIBBING SALVATION ARMY 107 W. HOWARD ST. HIBBING, MN 55746	20-8796060	501 (C) (3)	18,294.	0.			MINNESOTA FOOD SHELF PROGRAM
HILL CITY AREA FOOD SHELF 113 IONE AVENUE HILL CITY, MN 55748-4622		501 (C) (3)	5,881.	0.			MINNESOTA FOOD SHELF PROGRAM
HOFFMAN KENSINGTON AREA FOODSHELF 100 3RD ST. S HOFFMAN, MN 56339	41-1597102	501 (C) (3)	5,063.	0.			MINNESOTA FOOD SHELF PROGRAM
HOKAH AREA FOOD SHELF 57 MAIN ST. #6500 HOKAH, MN 55941	26-4595572	501 (C) (3)	5,276.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT

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HOMETOWN RESOURCE CENTER 1244 WHITEWATER AVE ST. CHARLES, MN 55972	41-1603419	501 (C) (3)	13,529.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
HOPE FOR THE COMMUNITY 1264 109TH AVENUE NE BLAINE, MN 55434	46-3680832	501 (C) (3)	200,000.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
HOPE LUTHERAN CHURCH 16898 MICHAEL AVE HASTINGS, MN 55033	47-2608718	501 (C) (3)	6,710.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
HORIZONS UNLIMITED FOOD SHELF 1001 EAST LAKE STREET HASTINGS, MN 55407	81-4574956	501 (C) (3)	7,906.	0.			MINNESOTA FOOD SHELF PROGRAM
HOSANNA'S PANTRY 2815 57TH ST NW ROCHESTER, MN 55901	41-1620929	501 (C) (3)	11,687.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
HOUSTON COMMUNITY FOOD SHELF 118 S. LINCOLN ST. HOUSTON, MN 55943	41-1282914	501 (C) (3)	7,027.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
HUGO GOOD NEIGHBORS FOOD SHELF 15106 FRANCESCA AVE N HUGO, MN 55038	26-4627293	501 (C) (3)	14,568.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ICA FOOD SHELF 11588 K-TEL DRIVE MINNETONKA, MN 55343		501 (C) (3)	73,217.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ICM FOOD SHELF FACILITY 1401 GARDENA AVE NE FRIDLEY, MN 55432	41-6104145	501 (C) (3)	5,465.	0.			MINNESOTA FOOD SHELF PROGRAM

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INTER COUNTY COMMUNITY COUNCIL 207 NORTH MAIN STREET OKLEE, MN 56742	82-2913068	501 (C) (3)	5,513.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
INTER-COUNTY COMMUNITY COUNCIL FOOD SHELF - 207 NORTH MAIN STREET - OKLEE, MN 56742	20-2665775	501 (C) (3)	5,359.	0.			MINNESOTA FOOD SHELF PROGRAM
INTERFAITH ACTION OF GREATER SAINT PAUL - 3080 CENTERVILLE ROAD - LITTLE CANADA, MN 55117	41-1260868	501 (C) (3)	17,158.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
INTERFAITH OUTREACH & COMMUNITY PARTNERS - 1605 COUNTY ROAD 101 N - PLYMOUTH, MN 55447	36-3482724	501 (C) (3)	30,830.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ISLAMIC CENTER OF MINNESOTA 1401 GARDENA AVE NE FRIDLEY, MN 55432	41-6104145	501 (C) (3)	5,541.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
JACKSON FOOD SHELF, INC 1229 N HIGHWAY JACKSON, MN 56143	82-3776868	501 (C) (3)	17,872.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
JACOBSON FOOD SHELF 19942 650 LANE JACOBSON, NM 55752	27-3374802	501 (C) (3)	5,285.	0.			MINNESOTA FOOD SHELF PROGRAM
JANESVILLE COMMUNITY FOOD SHELF 412 N. MAIN ST. JANESVILLE, MN 56048	41-0705855	501 (C) (3)	5,728.	0.			MINNESOTA FOOD SHELF PROGRAM
JERICHO ROAD MINISTRIES 1628 EAST 33RD STREET MINNEAPOLIS, MN 55407	03-0406197	501 (C) (3)	91,689.	0.			MINNESOTA FOOD SHELF PROGRAM

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JORDAN AREA FOOD SHELF 312 WATER STREET JORDAN, MN 55352	27-0950386	501 (C) (3)	13,204.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
JOYCE UPTOWN FOODSHELF 3041 FREMONT AVE S MINNEAPOLIS, MN 55408	46-3081535	501 (C) (3)	49,857.	0.			MINNESOTA FOOD SHELF PROGRAM
KEYSTONE COMMUNITY SERVICES 1916 UNIVERSITY AVE W ST. PAUL, MN 55104	41-0693924	501 (C) (3)	141,258.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
KOOCHICHING COUNTY FOOD ACCESS 1525 2ND AVENUE WEST INTERNATIONAL FALLS, MN 56649	36-3602229	501 (C) (3)	27,125.	0.			MINNESOTA FOOD SHELF PROGRAM
LA CRESCENT FOOD SHELF 436 S. 6TH ST. LA CRESCENT, MN 55947	20-2665775	501 (C) (3)	17,593.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
LAC QUI PARLE COUNTY COMMUNITY 308 6TH AVE MADISON, MN 56256		501 (C) (3)	5,685.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
LAKE CITY FOOD BANK 600 S 8TH STREET LAKE CITY, MN 55041	41-1430175	501 (C) (3)	7,234.	0.			MINNESOTA FOOD SHELF PROGRAM
LAKE OF THE WOODS FOOD SHELF 106 2ND ST NE BAUDETTE, MN 56623	46-1363977	501 (C) (3)	6,065.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
LAKEFIELD FOOD SHELF INC 410 BROADWAY LAKEFIELD, MN 56150	83-3235228	501 (C) (3)	5,741.	0.			MINNESOTA FOOD SHELF PROGRAM

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LAKES AREA FOOD SHELF 29316 PATRIOT AVE PEQUOT LAKES, MN 56472	41-0694721	501 (C) (3)	11,508.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
LAPORTE COMMUNITY FOOD SHELF 150 2ND STREET NE LAPORTE, MN 56461	41-0956396	501 (C) (3)	5,440.	0.			MINNESOTA FOOD SHELF PROGRAM
LE CENTER FOOD SHELF 15 S PARK AVENUE LE CENTER, MN 56057	20-4334307	501 (C) (3)	12,129.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
LE ROY AREA FOOD SHELF 350 W MAIN ST. SUITE 3 LE ROY, MN 55951	30-0698730	501 (C) (3)	11,356.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
LE SUEUR FOOD SHELF 427 S 5TH ST. LE SUEUR, MN 56058	41-1687554	501 (C) (3)	6,581.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
LEECH LAKE BAND OF OJIBWE 190 SAILSTAR DR. NE NW CASS LAKE, MN 56633	41-0760822	501 (C) (3)	5,005.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
LIFEGATE SERVICES 1300 10TH AVE NE ROCHESTER, MN 55906	47-1965877	501 (C) (3)	14,040.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
LINWOOD COVENANT CHURCH 6565 VIKINIG BOULVEARD NE WYOMING, MN 55092		501 (C) (3)	8,810.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
LITTLE KITCHEN FOOD SHELF 1500 6TH ST NE MINNEAPOLIS, MN 55413		501 (C) (3)	7,506.	0.			MINNESOTA FOOD SHELF PROGRAM

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LIVING WATERS FOOD SHELF 332 N 40TH AVE W DULUTH, MN 55807		501 (C) (3)	6,984.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
LIVING WATERS LUTHERAN CHURCH 1911 4TH AVE N SAUK RAPIDS, MN 56379	41-1779811	501 (C) (3)	6,415.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
LOAVES AND FISHES FOOD SHELF FOSSTON - 203 JOHNSON AVENUE SOUTH - FOSSTON, MN 56542	41-0764073	501 (C) (3)	6,131.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
LONG PRAIRIE EMERGENCY FOOD PANTRY 127 CENTRAL AVE LONG PRAIRIE, MN 56347	41-1279766	501 (C) (3)	8,337.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
LONGVILLE AREA FOOD SHELF 5070 STATE HWY 84 NE LONGVILLE, MN 56655	46-3478081	501 (C) (3)	14,484.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
LONSDALE AREA FOOD SHELF 7525 GARFIELD AVE LONSDALE, MN 55046	45-3328914	501 (C) (3)	11,775.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
LOWER SIOUX INDIAN COMMUNITY 39512 RESERVATION HIGHWAY 1 MORTON, MN 56270		501 (C) (3)	22,045.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
LQP COMMUNITY FOOD SHELF 308 6TH AVE MADISON, MN 56256		501 (C) (3)	5,438.	0.			MINNESOTA FOOD SHELF PROGRAM
LUTHERAN CAMPUS MINISTRY - CROSSROADS - 331 DILLON AVE - MANKATO, MN 56001	41-1896237	501 (C) (3)	10,378.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT

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MABEL AREA FOOD SHELF 202 N OAK ST MABEL, MN 55954	45-2566276	501 (C) (3)	10,782.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
MAHTOMEDI AREA FOOD SHELF 700 MAHTOMEDI AVE MAHTOMEDI, MN 55115	41-0764101	501 (C) (3)	5,954.	0.			MINNESOTA FOOD SHELF PROGRAM
MANNA MARKET - LINWOOD COVENANT CHURCH - 6565 VIKINIG BOULVEARD NE - WYOMING, MN 55092		501 (C) (3)	7,426.	0.			MINNESOTA FOOD SHELF PROGRAM
MANNA MARKET SUBSTANCE 8299 CENTRAL AVE. NE SPRING LAK, MN 55432	23-7083534	501 (C) (3)	125,000.	0.			MINNESOTA FOOD SHELF PROGRAM
MAPLE RIVER LOAVES AND FISHES FOOD SHELF - 104 N. CENTRAL AVE - MAPLETON, MN 56065	45-5336214	501 (C) (3)	20,423.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
MARKETPLACE FOOD SHEL 1220 ZANE AVE N GOLDEN VAL, MN 55422	36-3602229	501 (C) (3)	36,195.	0.			MINNESOTA FOOD SHELF PROGRAM
MAZEPPA AREA FOOD SHELF 329 1ST AVE N MAZEPPA, MN 55956	41-0693924	501 (C) (3)	10,331.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
MAZEPPA AREA FOOD SHELF 92 NORTH MADDY STREET MCGREGOR, MN 55760	41-1749827	501 (C) (3)	6,106.	0.			MINNESOTA FOOD SHELF PROGRAM
MCLEOD EMERGENCY FOOD SHELF 719 13TH ST E SUITE A MCGREGOR, MN 55336	41-1470696	501 (C) (3)	55,790.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

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MEEKER COUNTY EMERGENCY FOOD SHELF BDA MEEKER AREA FOOD SHELF - 118 N. SIBLEY AVE. - LITCHFIELD, MN 55355	41-1459645	501 (C) (3)	19,984.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
MELROSE AREA FOOD SHELF 255 COUNTRY CLUB RD SW MELROSE, MN 56352	41-1957479	501 (C) (3)	6,899.	0.			MINNESOTA FOOD SHELF PROGRAM
MENAHGA AREA FOOD SHELF 120 1ST ST NE MENAHGA, MN 56464	11-7534855	501 (C) (3)	11,109.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
MERRICK COMMUNITY SERVICES 1669 ARCADE ST. STE 4 ST. PAUL, MN 55106	41-1589398	501 (C) (3)	21,243.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
MI CASA 1053 JEFFERSON ST. S SHAKOPEE, MN 55379	41-1716149	501 (C) (3)	5,005.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
MILACA AREA PANTRY 120 2ND AVE SW MILACA, MN 56353	41-1628297	501 (C) (3)	8,956.	0.			MINNESOTA FOOD SHELF PROGRAM
MINNEAPOLIS CENTRAL CHURCH OF CHRIST FOOD SHELF - 1922 4TH AVE N - MINNEAPOLIS, MN 55405	41-1615128	501 (C) (3)	55,085.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
MINNEHAHA FOOD SHELF 3701 EAST 50TH STREET MINNEAPOLIS, MN 55417	41-0789393	501 (C) (3)	40,196.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
MONTICELLO HELP CENTER 224 WEST 3RD STREET MONTICELLO, MN 55362	41-1668149	501 (C) (3)	32,020.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

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SIBLEY COUNTY FOODSHARE 308 ELM AVENUE GAYLORD, MN 55334	41-1442943	501 (C) (3)	8,408.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
MOOSE LAKE AREA FOOD SHELF 214 NW RAILROAD AVE MOOSE LAKE, MN 55767	80-0642004	501 (C) (3)	15,198.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
MORA FOOD PANTRY 214 NW RAILROAD AVE MORA, MN 55051	41-1457824	501 (C) (3)	18,909.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
MORRISON COUNTY FOOD SHELF 912 1ST AVE SW LITTLE FALLS, MN 56466	41-1678333	501 (C) (3)	20,256.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
MOTLEY AREA FOOD SHELF, INC. 697 3RD STREET SOUTH MOTLEY, MN 56466		501 (C) (3)	13,466.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
MOUNTAIN LAKE COMMUNITY FOOD SHELF 2989 MAPLE ROAD MOUNTAIN LAKE, MN 56159	41-1861037	501 (C) (3)	14,571.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
MURRAY COUNTY FOOD SHELF 2989 MAPLE ROAD SLAYTON, MN 56187	38-3714513	501 (C) (3)	12,762.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
NCBC FOOD SHELF 1414 EAST 48TH STREET MINNEAPOLIS, MN 55417-1132	41-2018782	501 (C) (3)	15,736.	0.			MINNESOTA FOOD SHELF PROGRAM
NEIGHBORHOOD HOUSE 179 ROBIE STREET EAST SAINT PAUL, MN 55107	41-0693916	501 (C) (3)	57,338.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEIGHBORS FOOD SHELF 222 GRAND AVENUE W SOUTH ST. PAUL, MN 55075	41-1360294	501 (C) (3)	25,800.	0.			MINNESOTA FOOD SHELF PROGRAM
NEIGHBORS HELPING NEIGHBORS FOOD SHELF - 301 CENTRAL AVENUE - NASHWAUK, MN 55769	27-1685000	501 (C) (3)	5,727.	0.			MINNESOTA FOOD SHELF PROGRAM
NEIGHBORS INC. 222 GRAND AVENUE W SOUTH ST. PAUL, MN 55075	41-1360294	501 (C) (3)	24,410.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
NEIGHBORS UNITED FOOD SHELF 841 2ND STREET GRANITE FALLS, MN 56241	41-1637586	501 (C) (3)	6,588.	0.			MINNESOTA FOOD SHELF PROGRAM
NEW CREATION BAPTIST CHURCH 1414 EAST 48TH STREET MINNEAPOLIS, MN 55417-1132	41-2018782	501 (C) (3)	23,406.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
NEW CREATIONS MINISTRIES COGIC 5144 13TH AVE S MINNEAPOLIS, MN 55417	42-1637667	501 (C) (3)	29,111.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
NEW ULM AREA EMERGENCY FOOD SHELF 1305 S VALLEY ST NEW ULM, MN 56073	41-1431867	501 (C) (3)	13,236.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
NEW YORK MILLS AREA FOOD SHELF, INC - 400 S WALKER AVE - NEW YORK MILLS, MN 56567	41-1718771	501 (C) (3)	11,042.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
NORTH ANOKA COUNTY EMERGENCY FOOD SHELF (NACE) - 18511 HIGHWAY 65 NE - EAST BETHEL, MN, MN 55011		501 (C) (3)	49,986.	0.			MINNESOTA FOOD SHELF PROGRAM

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NORTH CENTRAL FOOD BANK 2222 CROMELL DRIVE GRAND RAPIDS, MN 55744	41-1782776	501 (C) (3)	26,932.	0.			MINNESOTA FOOD SHELF PROGRAM
NORTH HENNEPIN COMMUNITY COLLEGE FOOD CUPBOARD - 7411 85TH AVENUE N - BROOKLYN PARK, MN 55445	41-1687554	501 (C) (3)	40,162.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
NORTH ITASCA EMERGECEY FOOD SHELF 200 MAIN AVE BIGFORK, MN 56628	36-3512185	501 (C) (3)	5,656.	0.			MINNESOTA FOOD SHELF PROGRAM
NORTH ST PAUL AREA FOOD SHELF 2266 2ND ST N NORTH ST PAUL, MN 55109	36-3617858	501 (C) (3)	10,302.	0.			MINNESOTA FOOD SHELF PROGRAM
NORTHHOME COMMUNITY FOOD SHELF 12059 MAIN STREET NORTHHOME, MN 56661	27-3585068	501 (C) (3)	5,190.	0.			MINNESOTA FOOD SHELF PROGRAM
NORTHPOINT HEALTH & WELLNESS CENTER - 2220 PLYMOUTH AVE N - MINNEAPOLIS, MN 55411	20-0898277	501 (C) (3)	54,742.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
NORTH-SUBURBAN EMERGENCY ASSISTANCE RESPONSE INC. (NEAR FOOD SHELF) - 5209 WEST BROADWAY AVE - CRYSTAL, MN 55429	41-1279766	501 (C) (3)	13,472.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
NOURISH (MOUNT OLIVET LAB SCHOOL) 451 CENTRAL AVE. W. SAINT PAUL, MN 55103	20-3320762	501 (C) (3)	11,167.	0.			MINNESOTA FOOD SHELF PROGRAM
NUWAY MBC 1530 RUSSELL AVE. N. MINNEAPOLIS, MN 55411	42-1584070	501 (C) (3)	12,459.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

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OASIS CHURCH 3819 18TH AVE. NW ROCHESTER, MN 55901	41-6032807	501 (C) (3)	5,678.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
OGILVIE FOOD SHELF 225 E GEORGE ST OGILVIE, MN 56358	41-1937148	501 (C) (3)	11,774.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
OPEN CUPBOARD 8264 4TH ST N OAKDALE, MN 55128	36-3298764	501 (C) (3)	125,000.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
OPEN HANDS MIDWAY, INC. 436 N. ROY ST. ST. PAUL, MN 55104	26-4618393	501 (C) (3)	5,416.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
ORONOCO FOOD SHELF 20 3RD ST. SW ORONOCO, MN 55960	82-2913068	501 (C) (3)	12,486.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
OUR LADY OF THE LAKE CATHOLIC CHURCH - 2385 COMMERCE BLVD - MOUND, MN 55364	41-0718339	501 (C) (3)	35,922.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
OUR SAVIORS LUTHERAN CHURCH 1909 ST. PAUL ROAD OWATONNA, MN 55060	41-0943393	501 (C) (3)	12,920.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
OUR SAVIOUR'S COMMUNITY SERVICES 2301 CHICAGO AVE MINNEAPOLIS, MN 55404	20-0810105	501 (C) (3)	10,528.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
OUTREACH FOOD SHELF 1205 LAKE STREET ALEXANDRIA, MN 56308	20-2556435	501 (C) (3)	24,394.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

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

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PALISADE ASSEMBLY OF GOD 209 3RD AVE. N. PALISADE, MN 56469	41-1484301	501 (C) (3)	11,260.	0.			MINNESOTA FOOD SHELF PROGRAM
PAYNESVILLE COMMUNITY SERVICE CENTER - PO BOX 194 - PAYNESVILLE, MN 56362		501 (C) (3)	8,790.	0.			EMERGENCY RESPONSE FOOD SHELF GRAN
PEACE CENTER FOOD SHELF 313 COLUMBUS AVE N NEW PRAGUE, MN 56071	41-1456579	501 (C) (3)	16,330.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
PELICAN RAPIDS FOOD SHELF 28 WEST MILL AVE PELICAN RAPIDS, MN 56572	41-1591403	501 (C) (3)	15,225.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
PEOPLE REACHING OUT TO OTHER PEOPLE, INC. (PROP) - 14700 MARTIN DR - EDEN PRAIRIE, MN 55344	41-1430172	501 (C) (3)	17,479.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
PIERZ AREA FOOD SHELF 220 MAIN ST #5 PIERZ, MN 56364		501 (C) (3)	12,893.	0.			MINNESOTA FOOD SHELF PROGRAM
PILLAGER AREA FOOD SHELF 305 FIR AVENUE W PILLAGER, MN 56473	41-1811057	501 (C) (3)	12,468.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
PILLSBURY UNITED COMMUNITIES 420 15TH AVE S MINNEAPOLIS, MN 55454	41-0916478	501 (C) (3)	24,840.	0.			MINNESOTA FOOD SHELF PROGRAM
PINE ISLAND SHARING SHELVES 611 NORTH MAIN STREET PINE ISLAND, MN 55963	41-1697527	501 (C) (3)	14,661.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

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PINE RIVER AREA FOOD SHELF 245 BARCLAY AVENUE PINE RIVER, MN 56474	41-1851010	501 (C) (3)	6,888.	0.			MINNESOTA FOOD SHELF PROGRAM
PIPESTONE COUNTY FOOD SHELF, INC. 223 2ND STREET N W PIPESTONE, MN 56164	55-0888466	501 (C) (3)	20,900.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
PLAINVIEW ELGIN AREA FOOD SHELF 25 MAIN STREET EAST ELGIN, MN 55932	42-1654116	501 (C) (3)	15,745.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
POPE COUNTY HEARTS AND HANDS 206 6TH AVENUE NW GLENWOOD, MN 56334	41-1826857	501 (C) (3)	6,157.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
PRAIRIE FIVE 106 ST OLAF AVE N CANBY, MN 56220	41-0904802	501 (C) (3)	53,240.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
PRINCETON PANTRY 104 6TH AVE SOUTH PRINCETON, MN 55371	41-1589398	501 (C) (3)	51,964.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
PRISM 1220 ZANE AVE N GOLDEN VALLEY, MN 55422	41-1442049	501 (C) (3)	49,023.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
PROCTOR FOOD SHELF 100 PIONK DRIVE PROCTOR, MN 55810	41-6052144	501 (C) (3)	5,867.	0.			MINNESOTA FOOD SHELF PROGRAM
PROP FOOD SHELF 14700 MARTIN DR EDEN PRAIRIE, MN 55344	41-1430172	501 (C) (3)	13,466.	0.			MINNESOTA FOOD SHELF PROGRAM

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QUAD CITY FOOD SHELF 8367 ENTERPRISE DR. N MOUNTAIN IRON, MN 55768	41-6052144	501 (C) (3)	16,275.	0.			MINNESOTA FOOD SHELF PROGRAM
RACINE UNITED METHODIST CHURCH FOOD SHELF - 401 EAST MAIN STREET - RACINE, MN 55967		501 (C) (3)	5,332.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
RALPH REEDER FOOD SHELF 2544 MOUNDS VIEW BLVD. MOUNDS VIEW, MN 55112	41-6008084	501 (C) (3)	20,411.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
REACH 421 5TH STREET HAWLEY, MN 56549	41-1716149	501 (C) (3)	21,389.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
RED LAKE FALLS FOOD SHELF 105 INTERNATIONAL DRIVE RED LAKE FALLS, MN 56750	41-0695521	501 (C) (3)	11,473.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
RED WING AREA FOOD SHELF 1755 OLD WEST MAIN ST. RED WING, MN 55066	41-1415594	501 (C) (3)	26,684.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
REDWOOD AREA FOOD SHELF INC 231 E 2ND ST #4 REDWOOD FALLS, MN 56283	41-1991695	501 (C) (3)	13,779.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
RENVILLE COUNTY FOOD SHELF 108 9TH ST S OLIVIA, MN 56277		501 (C) (3)	9,580.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
RESCUE NOW SERVICES INC. 697 13TH AVE NE MINNEAPOLIS, MN 55413	34-1983933	501 (C) (3)	26,893.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT

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RIVERSIDE CHURCH 3401 BOARDMAN ST. MINNEAPOLIS, MN 55417		501 (C) (3)	5,089.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
RIVERWORKS FOOD SHELF 8230 CEDAR STREET ROCKFORD, MN 55373	26-4143579	501 (C) (3)	8,853.	0.			MINNESOTA FOOD SHELF PROGRAM
ROCHESTER COMMUNITY CHURCH 971 16TH ST SE ROCHESTER, MN 55904	41-6189914	501 (C) (3)	11,092.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ROCK COUNTY FOOD SHELF 208 W MAPLE LUVERNE, MN 56156		501 (C) (3)	7,171.	0.			MINNESOTA FOOD SHELF PROGRAM
ROCORI AREA FOOD SHELF 208 W MAPLE LUVERNE, MN 56156		501 (C) (3)	13,189.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ROSEAU AREA FOOD SHELF INC. 108 3RD AVE SW ROSEAU, MN 56751	20-1390848	501 (C) (3)	12,949.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
RUSH CITY FOOD SHELF, INC. PO BOX 178 RUSH CITY, MN 55069	27-3199815	501 (C) (3)	6,179.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
SABATHANI COMMUNITY CENTER 310 E 38TH ST. MINNEAPOLIS, MN 55109	41-0984859	501 (C) (3)	28,515.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
SALVATION ARMY 2445 PRIOR AVE N ROSEVILLE, MN 55113	41-0698597	501 (C) (3)	53,047.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT

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SCOTT CARVER DAKOTA CAP AGENCY, INC. - 738 1ST AVE EAST - SHAKOPEE, MN 55379	41-0903890	501 (C) (3)	24,891.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
SECOND HARVEST NORTH CENTRAL FOOD BANK - 2222 CROMELL DRIVE - GRAND RAPIDS, MN 55744-3281	41-1782776	501 (C) (3)	73,574.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
SANNEH FOUNDATION 1276 UNIVERSITY AVE W ST. PAUL, MN 55104	56-2332269	501 (C) (3)	69,488.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
SECOND HARVEST NORTHERN LAKES FOOD BANK - 4503 AIRPORT BLVD - DULUTH, MN 55881	36-3479964	501 (C) (3)	65,433.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
SEMCAC 138 E. MAIN ST CALEDONIA, MN 55921	41-0907135	501 (C) (3)	57,226.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
SHELF OF HOPE 714 PARK AVE. MINNEAPOLIS, MN 55415		501 (C) (3)	5,697.	0.			MINNESOTA FOOD SHELF PROGRAM
SHILOH CARES FOOD SHELF 1201 W. BROADWAY MINNEAPOLIS, MN 55415	41-1557928	501 (C) (3)	50,877.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
SIBLEY COUNTY FOODSHARE 111 INDUSTRIAL AVE. GAYLORD, MN 55334	41-1442943	501 (C) (3)	7,405.	0.			MINNESOTA FOOD SHELF PROGRAM
SILVER BAY FOOD SHELF 99 EDISON BLVD SILVER BAY, MN 56085	41-6052144	501 (C) (3)	5,410.	0.			MINNESOTA FOOD SHELF PROGRAM

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SIMPSON FOOD PANTRY UMC 2609 STEVENS AVENUE SOUTH MINNEAPOLIS, MN 55409	36-2167731	501 (C) (3)	21,468.	0.			MINNESOTA FOOD SHELF PROGRAM
SLEEPY EYE AREA FOOD SHELF, INC. 115 SECOND AVE NE SLEEPY EYE, MN 56085	41-2008865	501 (C) (3)	11,252.	0.			MINNESOTA FOOD SHELF PROGRAM
SOCIETY ST. VINCENT DE PAUL-FARIBAULT - 617 3RD AVE NW - FARIBAULT, MN 55021	32-0310950	501 (C) (3)	21,324.	0.			MINNESOTA FOOD SHELF PROGRAM
SOURCE MN INC 2609 STEVENS AVENUE SOUTH MINNEAPOLIS, MN 55408	41-1588666	501 (C) (3)	106,684.	0.			MINNESOTA FOOD SHELF PROGRAM
SOUTH KOOCHICHING RAINY RIVER SCHOOL DISTRICT ISD 363 - 8560 HIGHWAY 11 - BIRCHDALE, MN 56629		501 (C) (3)	5,312.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
SOUTH TROY WESLEYAN CHURCH 56817 US-63 ZUMBRO FALLS, MN 55991		501 (C) (3)	6,493.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
SOUTHAND FAITH COMMUNITY FOOD SHELF - 308 NW LEWISON STREET - ADAMS, MN 55909	41-0694743	501 (C) (3)	5,482.	0.			MINNESOTA FOOD SHELF PROGRAM
SOUTHERN ANOKA COMMUNITY ASSISTANCE - 627 38TH AVE NE - COLUMBIA HEIGHTS, MN 55421	41-1272131	501 (C) (3)	68,252.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND
SOUTHWEST CARVER COUNTY FOOD SHELF 10 FIRST AVE NE NORWOOD YOUNG AMERICA, MN 55397	41-1913960	501 (C) (3)	12,756.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

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SPRINGFIELD AREA FOOD SHELF 625 NORTH JACKSON SUITE F SPRINGFIELD, MN 56087-2607	47-2905876	501 (C) (3)	12,389.	0.			MINNESOTA FOOD SHELF PROGRAM
ST JOHNS FOOD SHELF 241 LINE ST. S P.O. 128 WYKOFF, MN 55990	81-3085119	501 (C) (3)	5,435.	0.			MINNESOTA FOOD SHELF PROGRAM
ST JUDE OF THE LAKE- MAHTOMEDI AREA FOOD SHELF - 700 MAHTOMEDI AVE - MAHTOMEDI, MN 55115	41-0764101	501 (C) (3)	6,192.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
ST. JOHN FOOD SHELF 241 LINE ST. S P.O. 128 WYKOFF, MN 55990	81-3085119	501 (C) (3)	5,864.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
ST. OLAF LUTHERAN CHURCH 2901 EMERSON AVENUE NORTH MINNEAPOLIS, MN 55411	41-0760822	501 (C) (3)	53,341.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
ST. PETER AREA FOOD SHELF 201B S 3RD STREET ST. PETER, MN 56082	41-1761515	501 (C) (3)	16,429.	0.			MINNESOTA FOOD SHELF PROGRAM
ST. VINCENT DE PAUL FARIBAULT 617 3RD AVE NW FARIBAULT, MN 55021	32-0310950	501 (C) (3)	16,905.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
STAPLES AREA FOOD SHELF 402 WISCONSIN AVE SE STAPLES, MN 56479		501 (C) (3)	11,969.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
STEP - ST. LOUIS PARK EMERGENCY PROGRAM - 6812 WEST LAKE STREET - ST. LOUIS PARK, MN 55426	51-0188692	501 (C) (3)	21,148.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STEVENS COUNTY FOOD SHELF 701 IOWA AVE MORRIS, MN 56267	41-1829830	501 (C) (3)	17,693.	0.			MINNESOTA FOOD SHELF PROGRAM
STRANDQUIST FOOD SHELF 204 MAIN STRANDQUIST, MN 56758	41-1737565	501 (C) (3)	11,027.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
SUPERMARKET SATURDAY 3819 18TH AVE. NW ROCHESTER, MN 55901	41-6032807	501 (C) (3)	5,422.	0.			MINNESOTA FOOD SHELF PROGRAM
TASKFORCE INC 5901 BROOKLYN BLVD BROOKLYN CENTER, MN 55429		501 (C) (3)	7,955.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
TEAMSTERS SERVING TEAMSTERS FOOD SHELF - 3001 UNIVERSITY AVE S.E. - MINNEAPOLIS, MN 55414	41-1447807	501 (C) (3)	13,250.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
THE ALIVENESS PROJECT 3808 NICOLLET AVE MINNEAPOLIS, MN 55409	41-1593900	501 (C) (3)	16,048.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
THE BRIDGE COMMUNITY PANTRY 501 4TH AVE NW PERHAM, MN 56573	41-1647960	501 (C) (3)	20,933.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
THE BUFFALO FOOD SHELF COUNCIL 301 12TH AVENUE SOUTH BUFFALO, MN 55313	41-1888259	501 (C) (3)	16,361.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
THE CAMDEN COLLECTIVE 4150 DUPONT AVE N MINNEAPOLIS, MN 55412	85-3008271	501 (C) (3)	32,711.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CAMDEN PROMISE 4656 COLFAX AVE N MINNEAPOLIS, MN 55412	36-4685968	501 (C) (3)	98,592.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
THE CORNER SHELF 1740 VAN DYKE STREET ST. PAUL, MN 55109	41-1731974	501 (C) (3)	20,185.	0.			MINNESOTA FOOD SHELF PROGRAM
THE CORNERSTONE FOOD PANTRY 321 S BIRCH HALLOCK, MN 56728	41-0797351	501 (C) (3)	5,865.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
THE LINK OF NORTHERN KANDIYOHI COUNTY - 20 CENTRAL AVE E - NEW LONDON, MN 56273	82-1911575	501 (C) (3)	13,011.	0.			MINNESOTA FOOD SHELF PROGRAM
THE OPEN DOOR 3000 AMES CROSSING RD. SUITE 100 EAGAN, MN 55121	27-0415900	501 (C) (3)	142,589.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
THE SALVATION ARMY 1604 E LAKE ST MINNEAPOLIS, MN 55407	35-2167910	501 (C) (3)	75,000.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
THE SALVATION ARMY 2024 LYNDAL AVE. N MINNEAPOLIS, MN 55411	41-0698597	501 (C) (3)	317,968.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
THE SANNEH FOUNDATION 2090 CONWAY ST. SAINT PAUL, MN 55119	56-2332269	501 (C) (3)	75,000.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
THE VILLAGE IN WATERVILLE 205 N. 1ST ST. WATERVILLE, MN 56096	47-5568065	501 (C) (3)	9,090.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE WINDOM AREA SHARING CENTER INC 1156 4TH AVE WINDOM, MN 56101	45-5086257	501 (C) (3)	15,289.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
THIEF RIVER FALLS AREA FOOD SHELF 16330 150TH STREET NE THIEF RI, MN 56701	41-1744242	501 (C) (3)	19,233.	0.			MINNESOTA FOOD SHELF PROGRAM
TOWER FOOD SHELF 419 MAIN ST. TOWER, MN 55790	41-6052144	501 (C) (3)	5,556.	0.			MINNESOTA FOOD SHELF PROGRAM
TRAVERSE COUNTY FOOD SHELF 15 10TH ST S WHEATON, MN 56296	41-1531811	501 (C) (3)	5,372.	0.			MINNESOTA FOOD SHELF PROGRAM
WHITE EARTH NATION 1730 CLIFTON PL MINNEAPOLIS, MN 55403		501 (C) (3)	11,855.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
TRI-COMMUNITY FOOD SHELF 5597 STATE HIGHWAY 210 CROMWELL, MN 55726	26-4571237	501 (C) (3)	11,594.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
TRINITY LUTHERAN CHURCH 150 2ND STREET NE LAPORTE, MN 56461	41-1466412	501 (C) (3)	12,435.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
TRINITY LUTHERAN CHURCH AND SCHOOL 3812 229TH AVE. NW ST. FRANCIS, MN 55070	41-1260868	501 (C) (3)	26,603.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
TRINITY LUTHERAN CHURCH OF LAPORTE FOOD SHELF - 150 2ND STREET NE - LAPORTE, MN 56461	41-1466412	501 (C) (3)	5,765.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TYLER AREA FOOD SHELF 308 MARSH ST TYLER, MN 56178	27-1661298	501 (C) (3)	6,573.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
TUSEN TACK PO BOX 214 BRAHAM, MN 55006	41-1647405	501 (C) (3)	6,886.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
TWO HARBORS AREA FOOD SHELF 2124 10TH ST. TWO HARBORS, MN 55616	47-1321541	501 (C) (3)	16,480.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
UCAP 1400 S. SARATOGA ST. MARSHALL, MN 56258	41-0904860	501 (C) (3)	52,494.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
UNITED METHODIST CHURCH OF RACINE FOOD SHELF - 401 EAST MAIN STREET - RACINE, MN 55967	41-1282914	501 (C) (3)	5,569.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
UNITED WAY OF FREEBORN COUNTY, INC 314 S. BROADWAY AVE ALBERT LEA, MN 56007	41-0956396	501 (C) (3)	7,780.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
URBAN VENTURES 2840 5TH AVE. SO. MINNEAPOLIS, MN 55408	36-3558710	501 (C) (3)	16,140.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
VADNAIS HEIGHT LIONS CLUB FOUNDATION - 655 EAST COUNTY ROAD F - VADNAIS HEIGHTS, MN 55127	41-1600563	501 (C) (3)	12,084.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
VEAP FOOD SHELF 9600 ALDRICH AVE. S. BLOOMINGTON, MN 55420	41-6175999	501 (C) (3)	142,523.	0.			501 (C) (3)

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VERNDALE FAMILY LIFE EMERGENCY FOOD SHELF - 402 NE CLARK DR - VERNDALE, MN 56481	42-1696989	501 (C) (3)	6,560.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
VINEYARD COMMUNITY SERVICES 1280 ARCADE STREET SAINT PAUL, MN 55106	46-1443346	501 (C) (3)	19,681.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
VALLEY OUTREACH 1911 CURVE CREST BLVD W STILLWATER, MN 55082	41-1452973	501 (C) (3)	111,869.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WABASHA AREA FOOD SHARE 142 2ND STREET W WABASHA, MN 55981	41-1543085	501 (C) (3)	18,807.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WABASSO AREA FOOD EMERGENCY RESERVE (WAFER) - 742 MAIN ST - WABASSO, MN 56293	41-1538914	501 (C) (3)	11,671.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WACONIA UNITED FOOD SHELF 11 SOUTH ELM ST. WACONIA, MN 55387	47-1667774	501 (C) (3)	25,354.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WALKER AREA FOOD SHELF 8243 INDUSTRIAL PARK RD NW WALKER, MN 56484	41-1517569	501 (C) (3)	17,876.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WARREN EMERGENCY FOOD SHELF 109 S MINNESOTA ST WARREN, MN 56762	41-1640373	501 (C) (3)	5,631.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WARROAD FOOD PANTRY 111 LAKE ST. NE WARROAD, MN 56763	26-3593613	501 (C) (3)	11,186.	0.			MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASECA FOOD SHELF 203 3RD AVE NW WASECA, MN 56093-2411	41-1452216	501 (C) (3)	16,427.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WATERTOWN FOOD SHELF 309 LEWIS AVE. S WATERTOWN, MN 55388	41-1645058	501 (C) (3)	5,904.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WATONWAN COUNTY FOOD SHELF 113 7TH ST. S ST. JAMES, MN 56081 ST. JAMES, MN 56081	41-1446978	501 (C) (3)	22,390.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WCCA FOOD SHELF 411 ELM AVE WAVERLY, MN 55390	41-0904809	501 (C) (3)	7,497.	0.			MINNESOTA FOOD SHELF PROGRAM
WE CARE PROJECT 206 FERGUS AVE MORGAN, MN 56266	27-3214113	501 (C) (3)	14,544.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WELLS AREA FOOD SHELF 10 1ST AVE. SW WELLS, MN 56097	41-1783467	501 (C) (3)	13,135.	0.			501 (C) (3)
WEST AFRICAN FAMILY & COMMUNITY SERVICES - FOOD SHELF - 7200 BROOKLYN BLVD - BROOKLYN CENTER, MN 55429	82-2337036	501 (C) (3)	49,663.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WESTERN COMMUNITIES ACTION NETWORK (WECAN) - 5213 SHORELINE DRIVE - MOUND, MN 55364	41-1466409	501 (C) (3)	17,655.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WESTONKA FOOD SHELF 2443 COMMERCE BLVD MOUND, MN 55364	41-0718339	501 (C) (3)	26,132.	0.			MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHITE BEAR AREA FOOD SHELF 1884 WHITAKER STREET WHITE BEAR LAKE, MN 55110	41-1459604	501 (C) (3)	110,631.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WHITE EARTH FEEDING OUR FAMILIES 2531 310TH AVENUE NAYTAHWAUSH, MN 56566		501 (C) (3)	10,485.	0.			MINNESOTA FOOD SHELF PROGRAM
WILLMAR AREA FOOD SHELF DBA KANDIYOHI COUNTY FOOD SHELF - 624 PACIFIC AVE SW - WILLMAR, MN 56201	41-1432367	501 (C) (3)	34,964.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WINONA VOLUNTEER SERVICES 402 EAST 2ND STREET WINONA, MN 55987	23-7376207	501 (C) (3)	32,636.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WOODLAND HILLS CHURCH 1740 VAN DYKE STREET MAPLEWOOD, MN 55109	41-1731974	501 (C) (3)	11,975.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
WORTHINGTON CHRISTIAN CHURCH 1501 N. DOUGLAS WORTHINGTON, MN 561 WORTHINGTON, MN 56187	41-1310362	501 (C) (3)	15,479.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM
WRIGHT COUNTY COMMUNITY ACTION, INC. - 411 ELM AVE - WAVERLY, MN 55390	41-0904809	501 (C) (3)	8,763.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
YELLOW MEDICINE NEIGHBORS UNITED 930 4TH ST. GRANITE FALLS, MN 56241	41-4637586	501 (C) (3)	7,363.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT
YOUTHLINK 41 N 12TH STREET MINNEAPOLIS, MN 55403	41-1341773	501 (C) (3)	11,404.	0.			EMERGENCY RESPONSE FOOD SHELF GRANT AND MINNESOTA FOOD SHELF PROGRAM

Schedule I (Form 990)

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.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

HUNGER SOLUTIONS MINNESOTA

Employer identification number

36-3567366

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

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

b Participate in or receive payment from a supplemental nonqualified retirement plan?

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

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

Only section 501(c)(3), 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?

b Any related organization?

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?

b Any related organization?

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		

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

Schedule J (Form 990) 2023

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.

[illegible]

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.

[illegible]

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

HUNGER SOLUTIONS MINNESOTA

Employer identification number
36-3567366

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

HUNGER SOLUTIONS MINNESOTA IS A COMPREHENSIVE HUNGER RELIEF
ORGANIZATION THAT WORKS TO END HUNGER IN MINNESOTA. WE TAKE ACTION TO
ASSURE FOOD SECURITY FOR ALL MINNESOTANS BY SUPPORTING PROGRAMS AND
AGENCIES THAT PROVIDE FOOD TO THOSE IN NEED, ADVANCING SOUND PUBLIC
POLICY, BUILDING GRASSROOTS ADVOCACY, AND INFORMING AND EDUCATING
CRITICAL STAKEHOLDERS ABOUT THE STATUS OF HUNGER IN MINNESOTA.

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

POLICY, BUILDING GRASSROOTS ADVOCACY, AND INFORMING AND EDUCATING
CRITICAL STAKEHOLDERS ABOUT THE STATUS OF HUNGER IN MINNESOTA.

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

THE ORGANIZATION'S FINANCE COMMITTEE APPROVES A DRAFT OF THE FORM 990
BEFORE IT IS FORWARDED TO THE ORGANIZATION'S BOARD MEMBERS FOR THEIR
REVIEW AND APPROVAL.

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

ANNUALLY, BOARD MEMBERS, OFFICERS AND KEY EMPLOYEES DISCLOSE IN WRITING
POTENTIAL CONFLICTS OF INTEREST TO THE BOARD OF DIRECTORS.

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

THE BOARD OF DIRECTORS HAS APPOINTED AN EXECUTIVE COMMITTEE TO ANNUALLY
REVIEW THE ORGANIZATION'S TOP MANAGEMENT AND KEY EMPLOYEES COMPENSATION
BASED ON ESTIMATES OF COMPENSATION OF COMPARABLE DUTIES AT SIMILAR
ORGANIZATIONS.

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization

HUNGER SOLUTIONS MINNESOTA

Employer identification number

36-3567366

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

THE AUDITED FINANCIAL STATEMENTS ARE POSTED TO THE ORGANIZATION'S WEBSITE.

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND ANY OTHER DOCUMENTS

ARE AVAILABLE TO THE PUBLIC UPON REQUEST AT THE ORGANIZATION'S MAIN OFFICE.