			** PUBLIC DISCLOSURE COPY Return of Organization Exempt From	** m Income Tax	OMB No. 1545-0047
For	m 9	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code		
	1000		Do not enter social security numbers on this form as it ma	ay be made public.	fins William Stars
Inter	nal Rever	f the Treasury nue Service	Go to www.irs.gov/Form990 for instructions and the lat	test information.	Open to Public Inspection
A	For the			g JUN 30, 2023	
B (Check if applicable	E Name of	organization	D Employer identific	ation number
	Addres	S Grea	t Plains Food Bank		
	Name change	Doing bu	isiness as	47-222958	39
	Initial return		and street (or P.O. box if mail is not delivered to street address) Room	/suite E Telephone number	
<u> </u>	Final return/ termin-		3rd Ave N	701-232-6	
	ated Ameno	City or to	bwn, state or province, country, and ZIP or foreign postal code 0 , ND $58102 - 4254$	G Gross receipts \$	30,085,964.
-	return Applica tion		ad address of principal officer: Melissa Sobolik	H(a) Is this a group re	
_	pendin		as C above	for subordinates? H(b) Are all subordinates ind	
11	Fax-exe	empt status:			list. See instructions
	Websit		greatplainsfoodbank.org	H(c) Group exemption	
		(T)		Year of formation: 2014 M	
Pa	_	Summary			
¢	1	Briefly describ	e the organization's mission or most significant activities: The Grea	at Plains Food	Bank is
Governance		North Da	akota's largest hunger-relief organiz	ation with a mi	ission to
srna		Check this box		more than 25% of its net ass	ets.
0V6			ing members of the governing body (Part VI, line 1a)	3	14
<u>ه</u>			ependent voting members of the governing body (Part VI, line 1b)	4	14
es			of individuals employed in calendar year 2022 (Part V, line 2a)	5	58
Activities &	6	Total number o	of volunteers (estimate if necessary)	6	3905
Acti	7 a '	Total unrelated	business revenue from Part VIII, column (C), line 12	7a	0.
-	b	Net unrelated	pusiness taxable income from Form 990-T, Part I, line 11	7b	0.
		O		Prior Year	Current Year
e			and grants (Part VIII, line 1h)	27,809,652.	27,967,328.
Revenue			e revenue (Part VIII, line 2g)	755,484.	1,283,571.
Re	10 1	nvestment inc	ome (Part VIII, column (A), lines 3, 4, and 7d)	41,494.	269,241.
			(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
			add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,606,630.	29,520,140.
			nilar amounts paid (Part IX, column (A), lines 1-3)	22,402,661.	18,305,449.
20			o or for members (Part IX, column (A), line 4)	0.	0.
enses	162	Professional fu	compensation, employee benefits (Part IX, column (A), lines 5-10)		3,430,530.
nen	b 1	Total fundraisie	ndraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) <u>1,133,949.</u>	446,538.	448,697.
Expe				4,038,697.	E 144 47E
			s (Part IX, column (A), lines 11a, 11d, 11f-24e) Add lines 13-17 (must equal Part IX, column (A), line 25)	29,891,987.	<u>5,144,475</u> 27,329,151.
				-1,285,357.	
Lo Sa		10101100 1000 0	expenses. Subtract line 18 from line 12	Beginning of Current Year	2,190,989. End of Year
Net Assets or Fund Balances	20 1	lotal assets (P	art X, line 16)	14,198,348.	16,419,620.
Ass Ba	21			768,564.	730,430.
Net	22 1		Part X, line 26) und balances. Subtract line 21 from line 20	13,429,784.	15,689,190.
	rt II	Signature	Block	1 1014011041	10,000,100.
Unde	er penal	ties of perjury. I	declare that I have examined this return, including accompanying schedules and st	atements, 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 pre	parer has any knowledge	הווס שונים שנים שנים שניים
				I I I I I I I I I I I I I I I I I I I	

Sign Here	Signature of officer Melissa Sobolik, CEO Type or print name and title	Mgi	Date 4.23.2024
	Print/Type preparer's name	Preparer's signature	Date Check PTIN
Paid	Lisa Chaffee, CPA	Lisa Chaffee, CPA	04/17/24 self-employed P00193453
Preparer	Firm's name Eide Bailly LL		Firm's EIN 45-0250958
Use Only	Firm's address 1730 Burnt Boa	t Loop, Ste. 100	
	Bismarck, ND 5	8503-0886	Phone no. 701 - 255 - 1091
May the If	RS discuss this return with the preparer show	vn above? See instructions	X Yes No
232001 12-1	3-22 LHA For Paperwork Reduction Ac	t Notice, see the separate instructions.	Form 990 (2022)

2001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. See Schedule O for Organization Mission Statement Continuation

Form	990 (2022) Great Plains Food Bank	47-2229589	Page 2				
Par	t III Statement of Program Service Accomplishments						
	Check if Schedule O contains a response or note to any line in this Part III		X				
	Briefly describe the organization's mission:	<u></u>	[==]				
1							
	End hunger through community partnerships.						
2	Did the organization undertake any significant program services during the year which were not listed on the						
-			XNo				
	If "Yes," describe these new services on Schedule O.						
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No				
	If "Yes," describe these changes on Schedule O.						
4	Describe the organization's program service accomplishments for each of its three largest program services, as i	measured by expenses.					
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expenses, ar	nd				
	revenue, if any, for each program service reported.	, , , , , , , , , , , , , , , , , , , ,					
4.0		ue\$ 1,273,	892)				
4a							
	STATEWIDE FOOD RECOVERY AND DISTRIBUTION: The Great Pla						
	(GPFB) is the only food bank serving the state of North						
	County, Minn. Our mission is to End Hunger Together. Dur.	ing FY23, th	e				
	Great Plains Food Bank provided food for 9.6 million mea	ls to 144,37	0				
	people struggling with hunger; 36% were children and 14%						
	<u>poop-o zo-aggggo-, oooa</u>						
	The GPFB partners with hundreds of FOOD DONORS (grocers,	manufacturo	ra				
	growers, retailers, and community food drive partners) w						
	for a variety of reasons (overproduction, packaging mista		ga				
	freshness date, or grown to donate). This food makes its	way to					
	neighbors living with hunger either through GPFB's DIREC						
	PROGRAMS or diverse network of PARTNER AGENCIES. The GPF						
46							
4b)				
	USDA COMMODITY DISTRIBUTION PROGRAMS: The GPFB operates						
	Commodity Programs for the state of North Dakota. These						
	include The Emergency Food Assistance Program (TEFAP), as						
	Commodity Supplemental Food Program (CSFP - Senior Food)	Pack Program).				
	TEFAP provides commodity products (fresh fruits and vege	tables, cann	ed				
	fruit, vegetables and juices, dry and shelf-stable milk,						
	meats, peanut butter or dried beans, cereal, rice, or par		u				
	qualified emergency feeding programs such as soup kitcher	ns, emergenc	<u>y</u>				
	shelters, and food pantries across the state. In FY23, the		ins				
	Food Bank distributed nearly 3.0 million meals of TEFAP						
	low-income individuals through our partner network of features and the second s	eding progra	ms.				
40	(Code:) (Expenses \$ 734.813. including grants of \$) (Revenue)	ue \$	١				
	(Code:) (Expenses \$734,813. including grants of \$) (Revenue of \$	ams aimed at)				
	eradicating childhood hunger. These programs include the	hadroak					
	eradicating childhood hunger. These programs include the	раскраск,					
	youth summer meals and school pantry programs.						
	The Great Plains Food Bank BackPack Program is the corner		e				
	GPFB's suite of programs directly targeting childhood hus	nger. Each					
	year, more than 33,000 kids qualify for and greatly rely						
	and reduced cost school lunch program. But on the weekend						
	achool lunch program is not available mere of these shi	$\frac{1}{2}$	10				
	school lunch program is not available, many of those chi						
	with inadequate food supplies. The backpack program prov		uii				
	of kid-friendly food to children for the weekend, ensuring						
_	return to school Monday morning healthy and ready to least	rn. During					
4d	Other program services (Describe on Schedule O.)						
	(Expenses \$ 1,221,925. including grants of \$) (Revenue \$	9,679.)					
مە	Total program service expenses 25,716,402.						
		CC	990 (2022)				
		FUIII	~~~(2022)				

Form 990 (2022) Great Plains Food Bank
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
~	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
10	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10	х	
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Δ	
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.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D.			
a	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X X
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		x
17	or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17	х	
18	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		- 22	
10		18		x
19	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"	- 10		<u> </u>
13		19		x
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	

Form 990 (2022)

- Form 990 (2022) Great Plains Food Bank
 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? If "Yes," complete Schedule I, Parts I and III	22	Х	
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? If "Yes," complete			
	Schedule J	23	Х	
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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	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? If "Yes," complete Schedule L, Part 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? If "Yes," complete			
	Schedule L, Part 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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Dat	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		\square
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 6	-		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	-		
<u>ر</u>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

the organization comply with backup with rules for reportable payments to vendor rs and reportable gaming (gambling) winnings to prize winners?

1c

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Par	t 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	58			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
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 a	uthority ov	er, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?		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 Ac	counts (FE	BAR).			
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 transact	tion?		5b		X
с	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	e organizat	ion solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or gifts				
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provid	ed to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		[7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa	s required				
	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as	s required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a F	orm 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.					
а	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:					
а	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:					
а	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			12a		
	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.	E				
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
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				
с	Enter the amount of reserves on hand	13c				
14a				14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		ſ	14b		
15 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
-	excess parachute payment(s) during the year?			15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?		16		Х
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act	tivities				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes." complete Form 6069.					

Form	990	(2022)

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

 Form 990 (2022)
 Great Plains Food Bank
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 Page

 Part VI
 Governance, Management, and Disclosure.
 For each "Yes" response to lines 2 through 7b below, and for a "No" response
 Page

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1	4		
	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.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 1	4		
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:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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
Sec	tion 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	Х	
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	_	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	_	
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?			
а	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			37
	taxable entity during the year?	<u>16a</u>		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			
<u> </u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed <u>MN</u>			L. I
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	js only	availa	BIG
	for public inspection. Indicate how you made these available. Check all that apply.			
40	X Own website Another's website X Upon request Other (explain on Schedule O)	al en	alal	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	ia finar	icial	
~~	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 Melissa Sobolik - 701-232-6219			
	1720 3rd Ave N, Fargo, ND 58102-4254			

Form 990 (2022) Great Plains Food Bank	47-2229589	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	ompensated	
Employees, and Independent Contractors		
Check if Schedule O contains a response or note to any line in this Part VII		
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending List all of the organization's current officers, directors, trustees (whether individuals or organizations), re- 	•	•

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)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos	ition	l than c	ne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	s both	an	compensation	compensation	amount of
	week		cer an	id a d	irecto	r/trust	ee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee	upens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		nploy	st con yee	L	1033-1120)		organizations
	line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Melissa Sobolik	40.00		_							
CEO				x				145,854.	Ο.	15,348.
(2) Kate Molbert	40.00									
Chief Operating Officer						х		116,948.	Ο.	14,268.
(3) Marcia Paulson	40.00									
Chief Development Officer						Х		106,025.	0.	17,454.
(4) David Stachon	40.00									
CFO				Х				96,885.	0.	6,624.
(5) Pat Gulbranson	3.00									
Chair		Х		Х				0.	0.	0.
(6) Kathy Schneider	3.00									
Chair Elect		Х		х				0.	0.	0.
(7) Jasper Schneider	3.00									
Secretary		Х		х				0.	0.	0.
(8) Stacey Ackerman	3.00									
Treasurer		Х						0.	0.	0.
(9) Zack Dawson	3.00									
Past Chair		Х						0.	0.	0.
(10) Nancy Johnson	3.00									
Director		Х						0.	0.	0.
(11) Levi Bachmeier	3.00									
Director		Х						0.	0.	0.
(12) Aaron Becher	3.00								•	•
Director		Х						0.	0.	0.
(13) Ruth Buffalo	3.00								•	•
Director	2.00	Х						0.	0.	0.
(14) Stacie Loegering	3.00							•	0	0
Director	2 00	X						0.	0.	0.
(15) Emma McIntyre	3.00	х						0.	0.	0
Director (16) David Maring	3.00	A						0.	0.	0.
(16) David Maring Director	3.00	х						0.	0.	0.
(17) Jim Herrington	3.00	~						0.	U •	<u> </u>
Director (as of Aug 22)	5.00	х						0.	0.	0.
	1	Λ						0.	0.	0

Form 990 (2022) Great Pla									47-22	295	89 F	age 8
Part VII Section A. Officers, Directors, Trus		oloye	ees,			ghes	t C		, ,			
(A)	(B)			(C Pos				(D)	(E)		(F)	
Name and title	Average		not c	heck	more	than c		Reportable	Reportable		Estimat	
	hours per week					s both pr/trust		compensation	compensation		amount	
	(list any	or					,	from the	from related organizations		other compens	
	hours for	direct				_		organization	(W-2/1099-MISC		from th	
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	<i>'</i>	organiza	
	organizations	trust	ial tru		yee	ompe		1099-NEC)	,		and rela	
	below	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	ner				organizat	ions
	line)	Indi	Insti	Officer	Key	High emp	Former					
(18) Jennifer Weisgram	3.00	37										0
Director (as of Aug 22)	2 00	Х						0.).		0.
(19) Terry Rockstad Director (until April 23)	3.00	х						0.		b .		0.
Director (until April 23)		Δ						0.		J.		0.
										_		
1b Subtotal								465,712.		<u>).</u>	53,6	
c Total from continuation sheets to Part VI								0.).).	F2 C	0.
d Total (add lines 1b and 1c)								465,712.		J•	53,6	94.
2 Total number of individuals (including but n compensation from the organization		ose	iiste	u al	JOve) wii	Jie	eceived more than \$100,	000 of reportable			3
											Yes	
3 Did the organization list any former officer,	director, truste	ee, k	key e	empl	oye	e, or	hig	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for s	ich individual		•								3	X
4 For any individual listed on line 1a, is the su										. –		
and related organizations greater than \$150	-		-					-	-		4 X	
5 Did any person listed on line 1a receive or a	,		•									
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or sı	ıch i	oers	on .					5	X
Section B. Independent Contractors												
1 Complete this table for your five highest con	•	•							•	nsatio	n from	
the organization. Report compensation for t	ne calendar ye	ear e	enair	ig w		or wi	<u>nin</u>	(B)	ear.		(C)	
א) Name and business	address							Description of s	ervices	Cor	npensatio	n
Brad Cecil & Associates,	2155 Ar	1i:	ng	to	n			Direct Respon	nse;			
Downs Road, Arlington, TX	76011							Fundraising			424,2	94.
							_					
							+					
2 Total number of independent contractors (ir		+ 11	nite -	1+-	the				are then			
 Total number of independent contractors (ir \$100,000 of compensation from the organiz 	•		met	. 10	1 nos		eu					

Check if Schedule O contains a response or note to any line in this Part VII (A) (B) (C) (C) 1 1 Federated campaigns 1 158,234, 100 Pediated or exempt function revenue	orm 990 (2 Part VIII				s	Food Bank	-		47-2229	5 89 Pa
Image: state of the second state of the sec					160	or note to any line	in this Part VIII			
b Membership dues Ib Ib G Fundraising events Ib Ic <			0111		130		(A)	Related or exempt	Unrelated	(D) Revenue excl from tax un sections 512
Both Comparison of the second secon	<u>ı</u> 9 1.a	Federated campaigns		1a		158,254.				
Business Code Multiple	b nu									
Business Code Multiple	ς Υμο	Fundraising events		1c						
Business Code Multiple	p ar	Related organizations		1d						
Business Code Multiple	imi e	Government grants (conti	ributi	ons) 1e		5,418,311.				
Business Code Multiple	S f	All other contributions, gifts,	grant	s, and						
Business Code Multiple	Othe	similar amounts not included	d abov							
Business Code Multiple	g g		lines 1	a-1f 1g \$		19,254,494.	07 067 000			
2 a Program Service Revenue 900099 1,283,094.	<u>ā</u> h	Total. Add lines 1a-1f				Desta de de	27,967,328.			
b -		Program Corvico Pou	00110				1 283 094	1 283 094		
a Total Add lines 2a/f 1,283,571. 3 threatment income (including dividends, interest, and other similar amounts) 97,257. 4 income from investment of tax-exempt bond proceeds 97,257. 5 Royalties 0) Real 6 a Gross rents 6a 6 a Gross rents 6a 7 a Gross mount from sales of assets other than inventory 6b 7 a Gross amount from sales of assets other than inventory 10 Securities 7 a Gross income from investments 7a 6 a Gross income from investments 7a 6 a Gross income from investments 7a 7 a Gross amount from sales of assets other than inventory 7a 8 d Gross income from fundralising events (not including \$	2 a					900099	1,203,094.	1,203,094.		
a Total Add lines 2a/f 1,283,571. 3 threatment income (including dividends, interest, and other similar amounts) 97,257. 4 income from investment of tax-exempt bond proceeds 97,257. 5 Royalties 0) Real 6 a Gross rents 6a 6 a Gross rents 6a 7 a Gross mount from sales of assets other than inventory 6b 7 a Gross amount from sales of assets other than inventory 10 Securities 7 a Gross income from investments 7a 6 a Gross income from investments 7a 6 a Gross income from investments 7a 7 a Gross amount from sales of assets other than inventory 7a 8 d Gross income from fundralising events (not including \$	an									
a Total Add lines 2a?t 1,283,571. 3 threatment income (including dividends, interest, and other similar amounts) 97,257. 4 income from investment of tax-exempt bond proceeds 97,257. 5 Royalties 0) Real 6 a Gross rents 6a 9 a Gross rents 6a 9 a Gross amount from sales of assets other than inventory 0 9 a Gross amount from sales of assets other than inventory 111 a 9 a Gross income from investments 7a 9 a Gross income from fundralsing events (not including \$\frac{1}{To}\$ of conthibutions reported on line 1c). See Part IV, line 18 9a 9 a Gross sales of inventory, less returns and allowances 9b 9b 9 a Gross income from gaming activities. See Part IV, line 19 9a 9 a Gross sales of inventory, less returns and allowances 9b 9 a Gross income or (loss) from gaming activities 9b 10 a Gross sales of inventory, less returns and allowances 9b 11 a 11a 11 a 11a	b ken									
a Total Add lines 2a.21 1,283,571. 3 Investment income (including dividends, interest, and other similar amounts) 97,257. 4 Income from investment of tax-exempt bond proceeds 97,257. 5 Royalties 0) Real 6 a Gross rents 6a 6 a Gross rents 6a 7 a Gross mount from sales of assets other than inventory 6b 7 a Gross amount from sales of assets other than inventory 0) Securities 7 a Gross income from investment of tax-exempt bond proceeds 00 Hot entral income or (loss) 7 a Gross amount from sales of assets other than inventory 0) Securities 9 b Less: cost or other basis 111,734. 7 a Gross income from investments 7a 8 a Gross income from fundraling events (not including \$	P Re									
g Total. Add lines 2a-2f 1, 283, 571. 1 3 Investment income (including dividends, interest, and other similar amounts) 97, 257. 9 4 income from investment of tax-exempt bond proceeds 7 9 6 Gross rents 6 6 1 6 Gross rents 6 6 1 1 7 a Gross rents income or (loss) 6 6 1 <td>f</td> <td>All other program service</td> <td>reve</td> <td>nue</td> <td></td> <td>900099</td> <td>477.</td> <td>477.</td> <td></td> <td></td>	f	All other program service	reve	nue		900099	477.	477.		
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6 a Gross rents 6 a (i) Real (ii) Personal b Less: rental expenses 6 b (iii) Personal (iiii) Personal c Rental income or (loss) 6 c (iii) Other (iii) Personal (iii) Personal a Gross amount from sales of assets other than inventory iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	4									
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b Less: rental expenses 6b 6c 6c c Rental income or (loss) 6c 6c 6c 7 Gross amount from sales of assets other than inventory 7a 626,074. 111,734. b Less: cost or other basis and sales expenses 7b 565,824. 0. c Gain or (loss) 7c 60,250. 111,734. d Net gain or (loss) fd 7a 626,074. 171,984. 177 8 a Gross income from fundraising events (not including \$				(i) Real		(ii) Personal				
c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See 9 a Gross income from gaming activities. See 9 a Gross also of (loss) from sales of inventory ites. See 9 a Gross alse of inventory, less returns and allowances 10 a Gross sales of inventory, less returns and allowances 11 a Gross from sales of inventory ites. See 9 Less: cost of goods sold 11	6 a	Gross rents	6a							
d Net rental income or (loss)	b	Less: rental expenses \dots	6b							
7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses										
assets other than inventory 7a 626,074. 111,734. b Less: cost or other basis and sales expenses 7b 565,824. 0. c Gain or (loss) 7c 60,250. 111,734. d Net gain or (loss) 7c 60,250. 111,734. assets other than inventory 7c 60,250. 111,734. d Net gain or (loss) 7c 60,250. 111,734. as Gross income from fundraising events (not including \$ of contributions reported on line 1c). See 8a 8a 8a Part IV, line 18 8a 8a 8a 8a 8a gross income from gaming activities. See 9a 9a 9a 9b 9b <td< td=""><td></td><td></td><td></td><td></td><td></td><td>(1) (1)</td><td></td><td></td><td></td><td></td></td<>						(1) (1)				
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d Net gain or (loss) 171,984. 17 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a 17 b Less: direct expenses 8b 10 10 c Net income or (loss) from fundraising events 9a 17 b Less: direct expenses 9b 17 c Net income or (loss) from fundraising events 9a 17 g Gross income from gaming activities. See Part IV, line 19 9a 17 b Less: direct expenses 9b 10 10 d Gross sales of inventory, less returns and allowances 10a 10b 10b c Net income or (loss) from sales of inventory 10a 10b 10b 10b c Met income or (loss) from sales of inventory 10a 10b 10b 10b 10b c Met income or (loss) from sales of inventory 10a 10b <				· · · ·						
contributions reported on line 1c). See Ba Part IV, line 18 Ba b Less: direct expenses c Net income or (loss) from fundraising events 9 Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9 Gross income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold 10b C c It in a b Less: cost of goods sold 10b Business Code 11 a Business Code c All other revenue e Total. Add lines 11a-11d				,		· · · · ·	171 984			171,
contributions reported on line 1c). See Ba Part IV, line 18 Ba b Less: direct expenses c Net income or (loss) from fundraising events 9 Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9 Gross income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold 10b C c It in a b Less: cost of goods sold 10b Business Code 11 a Business Code c All other revenue e Total. Add lines 11a-11d					·····					±,±,
contributions reported on line 1c). See Ba Part IV, line 18 Ba b Less: direct expenses c Net income or (loss) from fundraising events 9 Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9 b Less: direct expenses 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 Cost c Business Code Cost d All other revenue Cost Cost e Total. Add lines 11a-11d Cost Cost	Ĕ		-	-						
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b Less: direct expenses Bb Image: Constraint of the second		-		-	8a					
c Net income or (loss) from fundraising events Image: constraint of the second se										
9 a Gross income from gaming activities. See Part IV, line 19 9a 9b 9a 9b 9a 9b 9a					ts					
Part IV, line 19 9a b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold c Methods b Business Code c Methods d All other revenue e Total. Add lines 11a-11d										
c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory c Net income or (loss) from sales of inventory and allowances IDa b Business Code c Image: Context or Co		Part IV, line 19			9a					
10 a Gross sales of inventory, less returns and allowances 10a Image: state of inventory in the state of inventory inventory in the state of inventory inventory in the state of inventory in	b	Less: direct expenses			9b					
and allowances 10a b Less: cost of goods sold c Net income or (loss) from sales of inventory and allowances Business Code b	с	Net income or (loss) from	gam	ing activities	<u></u>					
b Less: cost of goods sold 10b C Net income or (loss) from sales of inventory Business Code C C All other revenue C Total. Add lines 11a-11d C C C C C C C C C C C C C C C C C C										
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Business Code Image: Code						9				
11 a	c	Net income or (loss) from	sales	s of inventor	y	Durlage C. J.				
e Total. Add lines 11a-11d						Business Code				
e Total. Add lines 11a-11d										
e Total. Add lines 11a-11d	ven									
e Total. Add lines 11a-11d	Be									
12 Total revenue. See instructions 29,520,140. 1,283,571. 0. 26							29,520,140.	1,283,571.	0.	269,

Form 990 (2022) Great Plains Food Bank 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 i	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising					
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21 \dots	16,819,703.	16,819,703.							
2	Grants and other assistance to domestic									
	individuals. See Part IV, line 22	1,485,746.	1,485,746.							
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,		22.054	000 000	22.054					
	trustees, and key employees	298,877.	33,974.	230,929.	33,974.					
6	Compensation not included above to disqualified									
	persons (as defined under section $4958(f)(1)$) and									
	persons described in section 4958(c)(3)(B)	0 474 040	1 000 200	104 400						
7	Other salaries and wages	2,474,243.	1,992,302.	124,402.	357,539.					
8	Pension plan accruals and contributions (include	126 210	101 500	1 001	10 650					
~	section 401(k) and 403(b) employer contributions)	126,219. 268,958.		<u>4,984</u> . 30,272.	<u> 19,652.</u> 40,206.					
9	Other employee benefits		198,480.							
10	Payroll taxes	262,233.	192,806.	31,758.	37,669.					
11	Fees for services (nonemployees):									
a	Management									
b		29,025.	18,400.	10,625.						
	Accounting	<u> </u>	10,400.	10,023.						
d	Lobbying Professional fundraising services. See Part IV, line 17	448,697.			448,697.					
e f	Investment management fees	440,007.			440,007.					
ı g	Other. (If line 11g amount exceeds 10% of line 25,									
y	column (A), amount, list line 11g expenses on Sch O.)	167,275.	139,772.		27,503.					
12	Advertising and promotion	15,624.	5,697.		9,927.					
13	Office expenses	574,394.	463,973.	17,715.	92,706.					
14	Information technology	193,325.	149,314.	13,495.	30,516.					
15	Royalties									
16	Occupancy	238,221.	225,514.	5,066.	7,641.					
17	Travel	367,895.	362,673.	143.	5,079.					
18	Payments of travel or entertainment expenses	, ,								
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	96,268.	81,459.	2,039.	12,770.					
20	Interest	10,026.			· · ·					
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	352,065.	342,521.	4,109.	5,435.					
23	Insurance	47,537.	47,537.							
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 0.)									
а	Purchased food	2,370,107.								
b	Food Spoilage	411,020.	411,020.							
с										
d										
е	All other expenses	271,693.	263,795.	3,263.	4,635.					
25	Total functional expenses. Add lines 1 through 24e	27,329,151.	25,716,402.	478,800.	1,133,949.					
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 if following SOP 98-2 (ASC 958-720)				000					
232010) 12-13-22				Form 990 (2022)					

Great Plains Food Bank	2
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47-2229589 Page 11

		Dalalice Sheet					
		Check if Schedule O contains a response or note	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1			
	2	Savings and temporary cash investments	6,176,945.	2	7,826,553.		
	3	Pledges and grants receivable, net	259,601.	3	237,441.		
	4	Accounts receivable, net	215,065.	4	215,545.		
	5	Loans and other receivables from any current or			· ·		· · ·
	-	trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes		5			
	6	Loans and other receivables from other disqualif					
		under section 4958(f)(1)), and persons described	-			6	
	7	Notes and loans receivable, net		F		7	
Assets	8	Inventories for sale or use			1,713,774.	8	2,080,091.
Ass	9				113,851.	9	122,782.
		Land, buildings, and equipment: cost or other			110,0010	3	100,1001
	IUa	basis. Complete Part VI of Schedule D	102	5,811,966.			
	h			1,520,005.	4,328,500.	10c	4,291,961.
		• • • • • • • • • • • • • • • • • • • •			1,390,612.	11	1,645,247.
	11	Investments - publicly traded securities			1,550,012.		1,045,247.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			11 100 210	15	16 410 620
	16	Total assets. Add lines 1 through 15 (must equa	<u>14,198,348.</u> 467,446.	16	<u>16,419,620.</u> 397,881.		
	17	Accounts payable and accrued expenses			40/,440.	17	397,001.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F		21			
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, substa					
iab.		controlled entity or family member of any of thes	-	F		22	
	23	Secured mortgages and notes payable to unrelate		Г		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	Complete Part X	201 110		222 542	
		of Schedule D			301,118.		332,549.
	26	Total liabilities. Add lines 17 through 25			768,564.	26	730,430.
		Organizations that follow FASB ASC 958, chee	ck here	X			
čě		and complete lines 27, 28, 32, and 33.					4.4. 4.4.4. 4.5.4
lan	27	Net assets without donor restrictions			12,316,146.	27	<u>14,082,359.</u> <u>1,606,831.</u>
Ba	28	Net assets with donor restrictions			1,113,638.	28	1,606,831.
pur		Organizations that do not follow FASB ASC 95	58, cheo	ck here			
ц		and complete lines 29 through 33.					
S S	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or eq	uipmen	t fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc	ome, o	r other funds		31	
Net	32	Total net assets or fund balances			13,429,784.	32	15,689,190.
	33				14,198,348.	33	16,419,620.

Form **990** (2022)

Form 990 (2022) Part X Balance Sheet

Form	000	10000
FOUL	990	(2022

	<u>1990 (2022)</u> Great Plains Food Bank	47-:	<u>22295</u>	589	Pa	_{ge} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>, 52</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>, 32</u>		
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>,19</u>		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	13			84.
5	Net unrealized gains (losses) on investments	5		6	<u>8,4</u>	<u>17.</u>
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	15	<u>,68</u>	9,1	<u>90.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
с	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?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				_
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	Х	

Form 990 (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

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
2022
Open to Public

Inspection	
 identification numb	

Name of the organization

Name	lame of the organization Employer identification number									
	Great Plains Food Bank							4	7-2229589	
Part	Int I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.							S.		
The or	he organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)									
1 [A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)								
3 🗌		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4 [A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
		city, and state:								
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in								
		section 170(b)(1)(A)(iv). (Complete Part II.)								
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7	X	An organization that normal	lly receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	ie general p	oublic described in	
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Part	: II.)					
9		An agricultural research org	anization described	in section 170(b)(1)(A)(i	x) operate	ed in conju	inction with a	land-grant	college	
		or university or a non-land-g	rant college of agricu	ulture (see instructions).	Enter the r	name, city	, and state of	the college	or	
_		university:								
10 🗌		An organization that normal	lly receives (1) more t	than 33 1/3% of its supp	ort from co	ontributior	ns, membersh	ip fees, and	d gross receipts from	
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	ınd (2) no ı	more than	33 1/3% of its	s support f	rom gross investment	
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.	
_		See section 509(a)(2). (Cor	mplete Part III.)							
11		An organization organized a	and operated exclusi	vely to test for public saf	ety. See	section 50)9(a)(4).			
12 🗌		An organization organized a	and operated exclusi	vely for the benefit of, to	perform th	he functio	ns of, or to ca	rry out the	purposes of one or	
		more publicly supported org	ganizations describe	d in section 509(a)(1) o	r section {	509(a)(2).	See section &	509(a)(3). (Check the box on	
		lines 12a through 12d that o	describes the type of	supporting organization	and com	plete lines	12e, 12f, and	12g.		
а		Type I. A supporting orga	inization operated, si	upervised, or controlled l	oy its supp	ported org	anization(s), ty	pically by	giving	
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustee	es of the su	upporting	
		organization. You must c	complete Part IV, Se	ctions A and B.						
b		Type II. A supporting orga	anization supervised	or controlled in connect	ion with its	s supporte	d organizatio	n(s), by hav	ving	
		control or management of			ime persoi	ns that co	ntrol or manag	ge the supp	ported	
		organization(s). You mus	-							
с		Type III functionally inte						ly integrate	ed with,	
		its supported organization		-						
d		Type III non-functionally						-		
		that is not functionally int			•		-	an attentiv	/eness	
		requirement (see instructi	,	•						
е		Check this box if the orga					Type I, Type I	II, Type III		
		functionally integrated, or		nally integrated supportir	ng organiza	ation.			[]	
		r the number of supported o	•							
g ı		ide the following informatior) Name of supported	i about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga		(v) Amount of	monetary	(vi) Amount of other	
	· ·	organization	(.,	(described on lines 1-10	in your governi Yes	ng document? No	support (see in		support (see instructions)	
		-		above (see instructions))	163					
Total										

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.)

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	29251494.	34592446.	43724199.	27809652.	<u>27967328.</u>	<u>163345119</u>		
2	Tax revenues levied for the organ-								
	ization'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	29251494.	34592446.	43724199.	27809652.	27967328.	163345119		
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)						27414246.		
6	Public support. Subtract line 5 from line 4.						135930873		
	ction B. Total Support								
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
		29251494.							
	Gross income from interest,								
•	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	13,923.	13,051.	3,981.	4,562.	97 257.	132,774.		
9	Net income from unrelated business	1079201	10,0010	575010	1/5021	5772571			
3	activities, whether or not the								
40	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)						163477893		
	Total support. Add lines 7 through 10						,379,510.		
	Gross receipts from related activities,		,			· · · · · · · · · · · · · · · · · · ·	, 579, 510.		
13	First 5 years. If the Form 990 is for the								
800	organization, check this box and stor ction C. Computation of Public								
				(0)			83.15 %		
	Public support percentage for 2022 (I		•			14			
	Public support percentage from 2021					15			
16a	33 1/3% support test - 2022. If the						V		
_	stop here. The organization qualifies		-						
b	33 1/3% support test - 2021. If the								
	and stop here. The organization qual								
17a	10% -facts-and-circumstances test	-							
	and if the organization meets the fact			-	-	VI how the organiz	ation		
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	iblicly supported o	rganization				
b	10% -facts-and-circumstances test	t - 2021. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or		
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the								
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization								
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a				
						Cohodulo A	(Earm 000) 2022		

Schedule A (Form 990) 2022

	Schedule A	Form 990) 202
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Schedule A (Form 990) 2022 Great Plains Food Bank 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.)

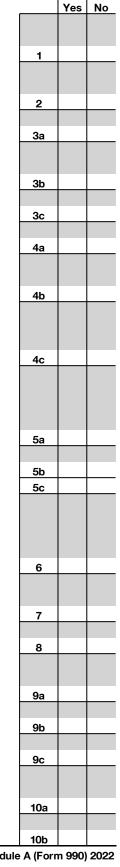
Sec	LION A. Public Support		-					
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e)	2022	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
-	ization'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							
	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							
~	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
	tion B. Total Support							
	ndar year (or fiscal year beginning in)	(2) 2018	(b) 2019	(a) 2020	(d) 2021	(0)	2022	(f) Total
		(a) 2018	(b) 2019	(c) 2020	(0) 2021	(e)	2022	(f) Total
	Amounts from line 6 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							
с	Add lines 10a and 10b							
	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.)							
	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second. third.	fourth, or fifth tax	year as a section !	501(c)(3)	organizatio	on,
				-	-		5	, L
Sec	tion C. Computation of Publi							
	Public support percentage for 2022 (I			column (f))		15		%
	Public support percentage from 2021			.,,		16		
	tion D. Computation of Inves							%
	•					47		0/
	Investment income percentage for 20	-				17		%
18	Investment income percentage from					18	:	%
19a	33 1/3% support tests - 2022. If the						and line 17	7 is not
	more than 33 1/3%, check this box an							
b	33 1/3% support tests - 2021. If the	organization did n	ot check a box or	line 14 or line 19a	a, and line 16 is m	ore than	33 1/3%, a	nd
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	as a publicly supp	orted org	anization	
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	his box and see ins	struction	s	

(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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- 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)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- 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?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 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))? If "Yes," provide detail in Part VI.
- 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? If "Yes." provide detail in Part VI.
- c Did a disgualified 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? If "Yes." provide detail in Part VI.
- 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)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990) 2022



	(Form 990) 2022		Plains	Food
Part IV	Supporting Organ	izations (co	ontinued)	

1

2

No

V. N

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		
с	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		
Sec	tion 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			

Bank

	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.
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.	
Section C. Type II Supporting Organizations	

Yes 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 1 the supported organization(s).

Section D. All Type III Supporting Organizations	

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

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method t	hat the organization used to satisf	v the Integral Part Test durin	a the year (see instructions).
•		nal line organization used to satisi	, וווכ ווווכקומו ז מונ ז ככו טעוווי	

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h

с		The organization supported a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instruction <u>s).</u>
---	--	---	-------------------------	-----------------	---------------------	-----------------------------

- 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.
- 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.
- 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.
- 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.

•		ig adde on n		
	All other Type III non-functionally integrated supporting organizations mus	t complete S	Sections A through E.	
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount				Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

emergency temporary reduction (see instructions).

7 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) 2022

Schedule A	(Form 990)	2022 (

Great Plains Food Bank

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. 1

Sche	edule A (Form 990) 2022 Great Plai	ns	Food Bank		4	7-2229589 Pag
Pa	rt V Type III Non-Functionally Integrated	1 509	(a)(3) Supporting Orga	nizations (continu	ied)	
Sect	tion D - Distributions					Current Year
1	Amounts paid to supported organizations to accompli	sh exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers	exemp	t purposes of supported			
	organizations, in excess of income from activity				2	
3	Administrative expenses paid to accomplish exempt p	urpose	es of supported organization	S	3	
4					4	
5	Qualified set-aside amounts (prior IRS approval require	ed - pr	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instruction	ons.			6	
7	Total annual distributions. Add lines 1 through 6.				7	
8	Distributions to attentive supported organizations to v	hich th	ne organization is responsive	1		
	(provide details in Part VI). See instructions.				8	
9	Distributable amount for 2022 from Section C, line 6				9	
10	Line 8 amount divided by line 9 amount		1	1	10	
Sect	tion E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistribution Pre-2022	าร	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022 (reas	on-				
	able cause required - explain in Part VI). See instruction	ons.				
3	Excess distributions carryover, if any, to 2022					
а	From 2017					
b	From 2018					
с	From 2019					
d	From 2020					
е	From 2021					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2022 distributable amount					
i	Carryover from 2017 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from Section D,					
	line 7: \$					
а	Applied to underdistributions of prior years					
	Applied to 2022 distributable amount					
	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2022,	f				
	any. Subtract lines 3g and 4a from line 2. For result gr					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2022. Subtract lines	3h				

and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	Great	Plains	Food	Bank		47-2229589 F	- age 8
Part VI	Supplemental Inform Part IV. Section A. lines 1	lines 2 and 3	; Part IV, Secti	on E, lines	- 1c, 2a, 2b, 3a, a	and 3b; Part V, line 1; Pa	a or 17b; Part III, line 12; es 1 and 2; Part IV, Section C art V, Section B, line 1e; Part litional information.	;, V,

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

Name of the organization	
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Schedule B

Department of the Treasury Internal Revenue Service

(Form 990)

Great	Plains	Food	Bank
Organization type (check one):			

47-2229589

Filers of:	Section:
Form 990 or 990-EZ	\boxed{X} 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X 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 for an *exclusively* set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in t

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).

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

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

47-2229589

Great Plains Food Bank

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 1</u>		\$3,827,964.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$2,852,004.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>1,806,952</u> .	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>4</u>		\$ <u>1,395,464.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>1,334,056.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$1,303,415.	Person Payroll Noncash X (Complete Part II for noncash contributions.)

223452 11-15-22

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Name of organization

Employer identification number

47-2229589

Great Plains Food Bank

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	Il space is needed.	
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions \$ 1,057,820.	Type of contribution Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
<u>No.</u>	Name, address, and ZIP + 4	\$764,726.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$745,599.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$695,891.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

223452 11-15-22

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	Food		
		\$3,827,964.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	Food		
		\$1,942,136.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	Food		
		\$1,806,952.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	Food		
4		\$ 1,395,464.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	Food		
		\$1,334,056.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	Food		
		\$ 1,303,415.	
223453 11-1	15-22		Schedule B (Form 990) (2022)

Great Plains Food Bank

Schedule B (Form 990) (2022) Name of organization

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

Employer identification number

47-2229589

Name of organization

Employer identification number

47-2229589

Great Plains Food Bank

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

7 Peed (a) (b) (c) (c) (d) (d) Date received 8 Peod (a) (b) (c) (c) (d) Date received (d) 8 Peod (c) (c) (c) (d) Date received (d) 8 Peod (c) (c) (c) (d) Date received (d) 9 Peod (c) (c) (c) ((a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Image: construction of noncesh property given Image: construction		Food		
No. from Part1 (c) Description of noncash property given (d) FMV (or estimate) (See instructions.) (d) Date received 8 Pod (e) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part1 Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received 9 Pod (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part1 Pood (c) FMV (or estimate) (See instructions.) (d) Date received 10 (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part1 Description of noncash property given s 695, 891. (c) from part (c) FMV (or estimate) (See instructions.) (d) Date received (e) from part1 (b) Description of noncash property given s (d) FMV (or estimate) (See instructions.) (e) from part1 (c) FMV (or estimate) (See instructions.) (d) Date received (b) No. from part1 (c) FMV (or estimate) (See instructions.) (d) Date received			\$1,057,820.	
8	No. from		FMV (or estimate)	
(a) (b) (c) (d) Mo. (b) Description of noncash property given (c) FMV (or estimate) (B) (C) FMV (or estimate) (d) (B) (C) (C) (C) (A) (D) (D) (C) (B) (C) (C) (C) (A) (D) (D) (C) (A) (D) (D) (C) (B) (C) (C) (C) (C) (C) (C) (C) (B) (D) (C) (C) (B) (D) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) (D) (C) (C) (C) (C) (C) (C) (A) (D) (D) (C) (B) (D) (D) <td></td> <td>Food</td> <td></td> <td></td>		Food		
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10	No. from		FMV (or estimate)	
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No. (b) (c) (d) from Description of noncash property given FMV (or estimate) Date received Part I			\$	
	No. from		FMV (or estimate)	
s				
			\$	

Name of o	rganization			Employer identification number		
Great	Plains Food Bank			47-2229589		
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) th completing Part III, enter the total of exclusively religious, cha Use duplicate copies of Part III if additional sp	hrough (e) and the following line en aritable, etc., contributions of \$1,000 or	try. For organizations	hat total more than \$1,000 for the year		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Dese	cription of how gift is held		
-	Transferee's name, address, and	(e) Transfer of gi d ZIP + 4		nsferor to transferee		
(a) No.						
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Deso	cription of how gift is held		
-	(e) Transfer of gift					
-	Transferee's name, address, and	d ZIP + 4	Relationship of tra	Insferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Dese	cription of how gift is held		
		(e) Transfer of gi	 ft			
-	Transferee's name, address, and	d ZIP + 4	Relationship of tra	Insferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
-	Transferee's name, address, and	(e) Transfer of gi d ZIP + 4		insferor to transferee		

SC	HEDULE D	Supplementa				OMB No. 1545-0047
(Forn	n 990)	Complete if the orga Part IV, line 6, 7, 8, 9, 10				
	ment of the Treasury	A	ttach to Form 990.			Open to Public Inspection
	ernal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.					
Nam	e of the organization	Great Plains Food 1	Bank		Emp	ployer identification number 47-2229589
Par	t I Organiza	ations Maintaining Donor Advise		Similar Funds or A	ccour	
	organizatio	n answered "Yes" on Form 990, Part IV, lin	e 6.			•
			(a) Donor adv	ised funds	(b) Fun	ids and other accounts
1	Total number at er	nd of year				
2		f contributions to (during year)				
3		f grants from (during year)				
4		t end of year				
5	-	on inform all donors and donor advisors in v	-			
•		on's property, subject to the organization's				Yes No
6	•	on inform all grantees, donors, and donor a	•	•		
	impermissible priva	ooses and not for the benefit of the donor o ate benefit?			•	Yes No
Par		ation Easements. Complete if the org	nanization answered "	Yes" on Form 990. Part IV	line 7	
1		servation easements held by the organization			,	
		n of land for public use (for example, recrea	· · · · ·	Preservation of a hist	orically	important land area
	Protection o	of natural habitat	, [Preservation of a cer	-	
	Preservation	n of open space				
2	Complete lines 2a	through 2d if the organization held a qualif	ied conservation cont	ribution in the form of a co	onserva	tion easement on the last
	day of the tax year	r.				Held at the End of the Tax Year
а	Total number of co	onservation easements			2a	
b	•				2b	
		vation easements on a certified historic stru			2c	
d		vation easements included in (c) acquired a				
•		isted in the National Register			_ 2d	
3		vation easements modified, transferred, rel	eased, extinguished, c	or terminated by the organ	lization	during the tax
4	year	where property subject to conservation eas	ement is located			
5		tion have a written policy regarding the per		ection handling of		
Ŭ		orcement of the conservation easements it				Yes No
6	,	r hours devoted to monitoring, inspecting,				
			.	C C		
7	Amount of expens	ses incurred in monitoring, inspecting, hanc	lling of violations, and	enforcing conservation ea	asemen	ts during the year
8		vation easement reported on line 2(d) abov	e satisfy the requireme	ents of section 170(h)(4)(E	5)(i)	
	and section 170(h)					
9		be how the organization reports conservation		-		
		d include, if applicable, the text of the footr	iote to the organization	n's financial statements th	nat desc	cribes the
Par	t III Organization's acc	ounting for conservation easements. ations Maintaining Collections of	Art. Historical T	reasures, or Other S	Simila	r Assets.
		f the organization answered "Yes" on Form				
1 a		elected, as permitted under FASB ASC 95		evenue statement and ba	lance sł	neet works
	•	easures, or other similar assets held for put	•			
		Part XIII the text of the footnote to its finar				
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its rever	nue statement and balanc	e sheet	works of
	art, historical treas	sures, or other similar assets held for public	exhibition, education,	or research in furtheranc	e of pul	blic service,
	provide the followi	ing amounts relating to these items:				
	(i) Revenue inclu	ded on Form 990, Part VIII, line 1				\$
	.,					\$
2		received or held works of art, historical tre			provide	9
	-	unts required to be reported under FASB A	-			•
а	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) 2022

\$

232051 09-01-22

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization accussion, and other records, check any of the following that make significant use of its collection time (check all that appy): a a Proble oblightion d Lean or exchange program b Scholarly research e Other c Provide a decipition of the organization solucitons and explain how they further the organization's occurs, or other similar assets to be addit cone built on the organization soluciton? Yes No. Part IIII Escrow and Custodial Arrangements. Complete the organization soluciton? Yes No. Part IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Sche		lains Food					47-22			age 2
collection terms (check all that apply): Collection terms (check all that apply): Collection terms (check all that apply): Collection terms (check all that apply): b Scholarly research Collection that construction's collections and explain how they further the organization's exempt purpose in Part XIII. c Provide description of the organization's collections? Yes No Part V Escore and Custodial Arrangements. Complete if the organization's collection? Yes No b if "Yes," explain the arrangement in Part XIII and complete the following table: Construction and the organization and the organizatian and the organization and the organizatian and the	Par	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, or	Other	[.] Simila	r Assets	contii	nued)	
a Public exhibition d Clan or exchange program b Scholary research e Other	3	Using the organization's acquisition, accessio	n, and other records	, check any of the f	ollowing that	make sig	gnificant ι	use of its			
b Schotary research e Other c Provide a description of the organization is 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 solid the organization alcolection? Yes No Part W Escrow and Custocidial Arrangements. Complete if the organization collection? Yes No Part W Escrow and Custocidial Arrangement to iter memory the organization answered 'Yes' on Form 980, Part X, Iine 21. Is to organization an agent, trustee, custocian or other intermediary for contributions or other assets not included on Form 980, Part X, Iine 21. Ite is a form of the year intermediary for contributions or other assets not included on Form 980, Part X, Iine 21. Ite is a form of the year intermediary for contributions or other assets not included on Form 980, Part X, Iine 21. Ite is a form of the year intermediary for contributions or other assets not included on Form 980, Part X, Iine 21. Ite is a form of the year intermediary for contributions or other assets not include an amount on Form 980, Part X, Iine 21. Ite is a form of the year is a form of the part is a form of the year is a form of the part is a form of the par		collection items (check all that apply):									
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they three the organization's exempt purpose in Part XIII. 5 During the year, did the organization's collection? Yes No. PartIVI Exerction of Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part K, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization agent, trustee, custodial or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a is the organization agent, trustee, custodial or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a is the organization include an amount on Form 990, Part X, line 21. 1a is the organization include an amount on Form 990, Part X, line 21. 1a is the organization include an amount on Form 990, Part X, line 21. 1a is the organization include an amount on Form 990, Part X, line 21. 1a is the organization include an amount on Form 990, Part X, line 21. 1a is the organization include an amount on Form 990, Part X, line 21. 1a is the organization include an amount on Form 990, Part X, line 21. 1b is the organization include an amount on Form 990, Part X, line 21. 1a is the organization include an amount on Form 990, Part X, line 10. 1a is the organization include an amount on Form 990, Part X, line 10. 1a is the organization include an amount on Form 990, Part X, line 10. 1a is the organization include an amount on Form 990, Part X, line 10. 1a is the organization include an amount on For	а	Public exhibition	d	Loan or exc	hange progra	m					
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The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iiii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organization as were "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Equipment (0.0000									
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (ii) Related organizations (ii) Related organizations (iii) Cost or other framework (c) Accumulated (depreciation (iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (ii) Cost or other basis (other) (ii) Accumulated depreciation (iii) Related organization (iii) Related organization (iii) Related organization (iii) R		The percentages on lines 2a, 2b, and 2c shou	ld equal 100%.								
organization by: Yes No (i) Unrelated organizations 3a(i) X (ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 3b 3b 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. (d) Book value 1a Land 226, 215. 226, 215. b Buildings 3, 349, 686. 528, 550. 2, 821, 136. c Leasehold improvements 2 2 1, 140, 066. e Other 104, 544. 104, 544. 104, 544.	3a			ion that are held ar	d administere	ed for the	е				
(ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 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. (d) Book value Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land 226, 215. 226, 215. b Buildings 3, 349, 686. 528, 550. 2, 821, 136. c Leasehold improvements 2, 131, 521. 991, 455. 1, 140, 066. e Other 104, 544. 104, 544. 104, 544.		organization by:								Yes	No
(ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 226, 215. 226, 215. 226, 215. b Buildings 3, 349, 686. 528, 550. 2, 821, 136. c Leasehold improvements 2, 131, 521. 991, 455. 1, 140, 066. e Other 104, 544. 104, 544. 104, 544.		(i) Unrelated organizations							3a(i)		Х
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 1a Land 226,215. 226,215. 226,215. b Buildings 3,349,686. 528,550. 2,821,136. c Leasehold improvements 2,131,521. 991,455. 1,140,066. e Other 104,544. 104,544. 104,544.									3a(ii)		Х
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 1a Land 226,215. 226,215. 226,215. b Buildings 3,349,686. 528,550. 2,821,136. c Leasehold improvements 2,131,521. 991,455. 1,140,066. e Other 104,544. 104,544. 104,544.	b	If "Yes" on line 3a(ii), are the related organizat	ions listed as require	d on Schedule R?					3b		
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 value1a Land226,215.226,215.226,215.b Buildings3,349,686.528,550.2,821,136.c Leasehold improvements2,131,521.991,455.1,140,066.e Other104,544.104,544.104,544.	4			/ment funds.							
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land226,215.226,215.226,215.b Buildings3,349,686.528,550.2,821,136.c Leasehold improvements2,131,521.991,455.1,140,066.e Other104,544.104,544.104,544.	Par										
basis (investment) basis (other) depreciation 1a Land 226,215. 226,215. b Buildings 3,349,686. 528,550. 2,821,136. c Leasehold improvements 2 104,521. 991,455. 1,140,066. e Other 104,544. 104,544. 104,544.		Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11a. S	ee Form 990,	Part X,	line 10.				
b Buildings 3,349,686. 528,550. 2,821,136. c Leasehold improvements 2,131,521. 991,455. 1,140,066. e Other 104,544. 104,544.		Description of property		()		• •		ed	(d) Boo	k value	е
b Buildings 3,349,686. 528,550. 2,821,136. c Leasehold improvements 2,131,521. 991,455. 1,140,066. e Other 104,544. 104,544.	1a	Land							22	6 <mark>,</mark> 21	15.
c Leasehold improvements 2,131,521. 991,455. 1,140,066. e Other 104,544. 104,544.				3,34	9,686.	5	528,5	50.	2,82	1,1:	36.
d Equipment 2,131,521. 991,455. 1,140,066. e Other 104,544. 104,544.											
	d	Equipment				9	991,4	55.			
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)										-	
	Tota	. Add lines 1a through 1e. (Column (d) must eq	gual Form 990, Part X	<u>(, column (B), line 1</u>	0c.)				4,29	1,90	61.

Schedule D (Form 990) 2022

Complete il trie organization answered res	on Form 990, Part IV, line	TTD. See FOITT 990, Part A, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	L		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		
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) Capital Lease Obligation			332,54
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	o 25)		332,54
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 20.)		552,53

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X 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

332,549.

Great Plains Food Bank Schedule D (Form 990) 2022

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

	edule D (Form 990) 2022 Great Plains Food Bank				2229589 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial State	ments With I	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total revenue, gains, and other support per audited financial statements			1	29,591,748.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	68,417.		
b	Donated services and use of facilities	2b	17,379.		
с	Recoveries of prior year grants	2c			
d			-14,188.		
е	Add lines 2a through 2d			2e	71,608.
3	Subtract line 2e from line 1			3	29,520,140.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
h	Other (Describe in Part XIII.)	4b			
				4c	0.
c	Add lines 4a and 4b			40	U
с 5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>)			5	29,520,140.
с 5				5	
с 5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>)	ements With		5	n.
с 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	ements With	Expenses per F	5	
с 5 Ра	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	ements With	Expenses per F	5 Retur	n.
с 5 Ра 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ements With 12a.	Expenses per P	5 Retur	n.
c 5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2012 2013 2013 2013 2013 2013 2013 2013	Expenses per F	5 Retur	n.
c 5 Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2a 2a 2b	Expenses per F	5 Retur	n.
c 5 Pa 1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2a 2a 2b 2c	Expenses per F	5 Retur	n.
c 5 Pa 1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2a 2b 2c 2c 2d	Expenses per F	5 Retur	n. 27,332,342. 17,379.
c Fa 1 2 b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 12a. 2a 2b 2c 2d	Expenses per F	5 letur	n. 27,332,342.
c 5 Pa 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 12a. 2a 2b 2c 2d	Expenses per F	5 letur 1 2e	n. 27,332,342. 17,379.
c 5 Pa 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 12a. 2b 2b 2c 2d	Expenses per F	5 letur 1 2e	n. 27,332,342. 17,379.
c 5 Pa 1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 12a. 2a 2b 2c 2d 2d	Expenses per F	5 letur 1 2e	n. 27,332,342. 17,379.
c 5 Pa 1 2 a b c d e 3 4 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 12a. 2b 2b 2c 2d 2d 4a 4b	Expenses per F	5 letur 1 2e	n. <u>27,332,342.</u> <u>17,379.</u> <u>27,314,963.</u> 14,188.
c 5 Pa 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 12a. 2a 2b 2c 2d 2d 4a 4b	Expenses per F	5 letur 1 2e 3	n. 27,332,342. 17,379. 27,314,963.

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

Part V, line 4:

Per the organization's endowment policy, the Endowment Fund provides

financial support in furtherance of the expressed charitable purposes and

mission of the GPFB and of the donor's specifically directed purposes in

support of the GPFB.

Part X, Line 2:

The Organization believes that it has appropriate support for any tax

positions taken affecting its annual filing requirements, and as such,

does not have any uncertain tax positions that are material to the

financial statements. The entities would recognize future accrued interest

and penalties related to unrecognized tax benefits and liabilities in

0000500

	(Form 990) 2022		Plains	Food	Bank
Part XIII	Supplemental	Information (co	ontinued)		

Part XIII Supplemental Information (continued)	
income tax expense if such interest and penalties are incurre	d
Part XI, Line 2d - Other Adjustments:	
Bank fees included in revenues in financial statements	-14,188.
Part XII, Line 4b - Other Adjustments:	
Bank fees included in revenues in financial statements	14,188.

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ing or Gaming A	ctivities	s (DMB No. 1545-0047			
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r 19, or if	the	2022			
Department of the Treasury		Attach to Form 990	or Forr	n 990	-EZ.			Open to Public			
Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.										
Name of the organization		ntification number									
		lains Food Bank					-2229				
	complete this par	Complete if the organization answert.	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Fo	rm 990-EZ	filers are not			
 a X Mail solicitat b X Internet and c X Phone solici d X In-person so 2 a Did the organization key employees list 	tions email solicitations tations dicitations on have a written o red in Form 990, P highest paid indiv	f X Solicita g X Specia or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	ation of ation of I fundra (incluc professi	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		X Yes ser is to be				
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundr have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	to (or ret fund	unt paid ained by) raiser n col. (i)	(vi) Amount paid to (or retained by) organization			
Brad Cecil & Assoc:	iates -		Yes	No							
2115 Arlington Down	ns Road,	Direct Marketing		X	1,760,145.	4	424,294.	1,335,851.			
Gateway Communicat:	ions -										
16808 NE Mason Cour	rt,	Telemarketing		x	47,083.		24,403.	22,680.			
or licensing.	 ich the organizatio	n is registered or licensed to solicit	contrib	utions	1,807,228. or has been notified		148 , 697 . .pt from re	1,358,531. gistration			
MN,ND											

990 1 Gross receipts (event type) (total number) col. (c) 1 Gross receipts (event type) (total number) col. (c) 2 Less: Contributions (event type) (total number) col. (c) 3 Gross income (line 1 minus line 2) (col. (c) (col. (c)) 4 Cash prizes (col. (c)) (col. (c)) 5 Noncash prizes (col. (c)) (col. (c)) 6 Rent/facility costs (col. (c)) (col. (c)) 7 Food and beverages (col. (c)) (col. (c)) 8 Entertainment (col. (c)) (col. (c)) 9 Other direct expenses (col. (c)) (col. (c)) 10 Direct expenses summary. Subtract line 10 from line 3, column (d) (col. (co		Schedule G (Form 990) 2022 Great Plains Food Bank 47-2229589 Page 2										
george (a) Event #1 (b) Event #2 (c) Other events (add cot. (a) through cot. (a) through cot. (b) 1 Gross receipts	Pa											
generation (event type) (total number) 1 Gross receipts							(d) Total events (add col. (a) through					
2 Less: Contributions	e			(event type)	(event type)	(total number)	col. (c))					
3 Gross income (line 1 minus line 2)	Revenu	1	Gross receipts									
4 Cash prizes		2	Less: Contributions									
5 Noncash prizes		3	Gross income (line 1 minus line 2)									
6 Rent/facility costs		4	Cash prizes									
8 Entertainment	s	5	Noncash prizes									
8 Entertainment	xpense	6	Rent/facility costs									
8 Entertainment	Direct E	7	Food and beverages									
10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. 90 (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming (d) Total gaming (add col. (a) through col. (c) 1 Gross revenue (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming (d) Total gaming (add col. (a) through col. (c) 1 Gross revenue (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming (d) Total gaming (add col. (a) through col. (c) 2 Cash prizes (a) Bingo (b) Pull tabs/instant (c) Other gaming (c) (a) through col. (c) 3 Noncash prizes (a) A reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (c) Other gaming (c) (a) through col. (c) 4 Rent/facility costs (a) A reported more tabor (b) Pull tabs/instant (c) Other direct expenses (c) Pull tabs/instant 5 Other direct expenses (c) Pull tabs/instant (c) Pull tabs/instant (c) Pull tabs/instant (c) Pull tabs/instant		8										
11 Net income summary. Subtract line 10 from line 3, column (d)		-										
Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming (d) Total gaming (add col. (a) through col. (c) (a) through col. (c) (b) Pull tabs/instant bingo/progressive bingo 1 Gross revenue 1 Gross revenue 1 (c) Other gaming (d) Total gaming (add col. (a) through col. (c) (a) through col. (c) (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming (d) Total gaming (add col. (a) through col. (c) (b) Pull tabs/instant bingo/progressive bingo 2 Cash prizes -				()								
\$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Pull tabs/instant bingo/progressive bingo (c) Other gaming (d) Total gaming (add col. (a) through col. (c) 1 Gross revenue	Pa											
Image: Construction of the system of the				answered res on on	1990, 1 alt IV, inte 19, 01	reported more than						
I Gross revenue I Gross revenue I Gross revenue I I </td <td>enue</td> <td></td> <td></td> <td>(a) Bingo</td> <td></td> <td>(c) Other gaming</td> <td>(d) Total gaming (add col. (a) through col. (c))</td>	enue			(a) Bingo		(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))					
3 Noncash prizes	Reve	1	Gross revenue									
3 Noncash prizes	es	2	Cash prizes									
5 Other direct expenses Image: Constraint of the system of the syst	Expense	3	Noncash prizes									
6 Volunteer labor Yes% Yes% Yes% 7 Direct expense summary. Add lines 2 through 5 in column (d)	Direct	4	Rent/facility costs									
6 Volunteer labor Yes% Yes% Yes% 7 Direct expense summary. Add lines 2 through 5 in column (d)		5	Other direct expenses									
		6										
8 Net gaming income summary. Subtract line 7 from line 1, column (d)		7	Direct expense summary. Add lines 2 through	5 in column (d)								
		8	Net gaming income summary. Subtract line 7	from line 1, column (d)								

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

a Is the organization licensed to conduct gaming activities in each of these states?	 Yes	
b If "No," explain:		

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes **b** If "Yes," explain: ____

232082 10-27-22

No

No

Sch	edule G (Form 990) 2022	Great	Plains	Food	Bank	47-2229	589	Page 3
11	Does the organization conduct ga	ming activitie	es with nonme	mbers?			Yes	No
12					nber of a partnership or other entity formed			
	to administer charitable gaming?						Yes	No
13	Indicate the percentage of gaming							
a	The organization's facility					13a		%
								%
14	Enter the name and address of the	e person who	prepares the	organizat	tion's gaming/special events books and record	ds:		
	Name							
	Address							
15a	Does the organization have a cont	tract with a th	nird party from	n whom th	ne organization receives gaming revenue?		Yes	No No
k	If "Yes," enter the amount of gam	ing revenue r	eceived by the	e organiza	ation \$ and the am	nount		
	of gaming revenue retained by the							
c	If "Yes," enter name and address							
	Name							
	Address							
16	Gaming manager information:							
	Name							
	Gaming manager compensation	\$						
	Description of services provided							
	Director/officer	Employ	/ee	🗌 In	dependent contractor			
47	Manalatan distributionar							
	Mandatory distributions:	atata law ta	maka abaritab	la diatribu	utions from the coming proceeds to			
č					utions from the gaming proceeds to		Vas	No
ŀ					autod to other exampt organizations or sport		162	
Ľ					outed to other exempt organizations or spent	in the		
Pa	organization's own exempt activitient IV Supplemental Information			\$ lanations	required by Part I, line 2b, columns (iii) and (v)	and Part III li	1es 9 (9h 10h
					anal information. See instructions.	, and r art m, m	103 0, 1	
a -	hadala G Daat T	T 0	Ъ <u>т</u> ¦ " ь		ne Hickey Deid Derder			
SC	nedule G, Part 1,	Line 2	D, LIST	. OI 'I	<u> Ten Highest Paid Fundra:</u>	Lsers:		
(i) Name of Fundrais	ser: Br	ad Ceci	.1 & <i>P</i>	Associates			
<u>(i</u>) Address of Fund	caiser:	2115 A	rling	gton Downs Road, Arling	con, TX	76	011
<u>(i</u>) Name of Fundrais	ser: Ga	teway C	ommur	nications			
(i) Address of Fund	aiser:	16808	NE Ma	ason Court, Portland, OI	R 97230	1	

SCHEDULE I (Form 990)	Go	irants and Oth vernments, ar ete if the organizatio	nd Individual	ls in the Ŭn	ited States		OMB No. 1545-0047
Department of the Treasury			Attach to Forn	n 990.			Open to Public
Internal Revenue Service		Go to www.irs	s.gov/Form990 for	the latest inform	ation.		Inspection
Name of the organization Great Pla	ins Food I	Bank					Employer identification number 47-2229589
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	y for the grants or assi	istance, and the selecti	
criteria used to award the grants or assis	stance?						X Yes 🗌 No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to					anization answered "	Yes" on Form 990, Parl	t IV, line 21, for any
recipient that received more than s	5,000. Part II can				(f) Method of		
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	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Emergency Food Pantry					960483 pounds		To provide food pantries
1101 4th Ave N					of food at		with food to distribute
Fargo ND 58102	51-0138107	501(c)(3)	0.	1 844 127.	\$1.92/pound	Food	to individuals
				, , ,			
Dream Center Bismarck					779224 pounds		To provide food pantries
1805 Park Avenue					of food at		with food to distribute
Bismarck, ND 58504	85-0943567	501(c)(3)	0.	1,496,110.	\$1.92/pound	Food	to individuals
Dorothy Day West					511925 pounds		To provide food pantries
45 21st Ave E					of food at		with food to distribute
West Fargo, ND 58078	41-1594892	501(c)(3)	0.	982,896.	\$1.92/pound	Food	to individuals
Spirit of Life Catholic Church					349783 pounds		To provide food pantries
801 1st St SE					of food at		with food to distribute
Mandan, ND 58554	53-0196617	501(c)(3)	0.	671,583.	\$1.92/pound	Food	to individuals
Dorothy Day Food Pantry					329363.75		To provide food pantries
1308 Main Ave					pounds of food		with food to distribute
Moorhead, MN 56560	41-1594892	501(c)(3)	0.	632,378.	at \$1.92/pound	Food	to individuals
A Place For Hope					275896 pounds		To provide food pantries
2419 12th Ave S.					of food at	L.	with food to distribute
Moorhead, MN 56560	41-1922618		0.	529,720.	\$1.92/pound	Food	to individuals
2 Enter total number of section 501(c)(3) a	. .		e line 1 table				<u> </u>
3 Enter total number of other organization:	s listed in the line 1	lable					U•

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

Schedule I (Form 990) 2022

(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
Northlands Rescue Mission					244779 pounds		To provide food pantries
420 Division Ave					of food at		with food to distribute
	45-0251562	F(1/a)/2)	0.	160 076	\$1.92/pound	Food	to individuals
Grand Forks, ND 58201	45-0251502	501(C)(3)	0.	409,970.	\$1.92/pound	Food	
The Lord's Cupboard					201072 pounds		To provide food pantries
1901 South Broadway					of food at		with food to distribute
Minot, ND 58701	45-4134644	501(c)(3)	0.	386 058	\$1.92/pound	Food	to individuals
	15 1151011	501(0)(5)			\$1.527pound	1000	
Turtle Mountain Chippewa Food					178939 pounds		To provide food pantries
Pantry - 1023 Chief Little Shell					of food at		with food to distribute
St. NE - Belcourt, ND 58316	53-0196617	501(c)(3)	0.	343,563.	\$1.92/pound	Food	to individuals
				,	-		
HC Community Care Center & Food					174939 pounds		To provide food pantries
Pantry - 1726 S Washington St.					of food at		with food to distribute
Suite 11 - Grand Forks, ND 58201	36-2167730	501(c)(3)	0.	335,883.	\$1.92/pound	Food	to individuals
				,	-		
Ministry on the Margins					167186 pounds		To provide food pantries
201 N 24th St.					of food at		with food to distribute
Bismarck, ND 58501	81-3452507	501(c)(3)	0.	320,997.	\$1.92/pound	Food	to individuals
				,			
Freedom Church Cares					139483 pounds		To provide food pantries
6 N 3rd St.					of food at		with food to distribute
Grand Forks, ND 58203	44-0577787	501(c)(3)	0.	267,807.	\$1.92/pound	Food	to individuals
Community Action Program Region					137265 pounds		To provide food pantries
VII - 2105 Lee Ave - Bismarck, ND					of food at		with food to distribute
58504	45-0333816	501(c)(3)	0.	263,549.	\$1.92/pound	Food	to individuals
St. Joseph's Social Care					134194 pounds		To provide food pantries
620 8th Ave. S					of food at		with food to distribute
Grand Forks, ND 58201	45-0457605	501(c)(3)	٥.	257,652.	\$1.92/pound	Food	to individuals
Faith Food Pantry					130735 pounds		To provide food pantries
909 19th Ave N					of food at		with food to distribute
Fargo, ND 58102	31-1813333	501(c)(3)	0.	251,011.	\$1.92/pound	Food	to individuals

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					104001		m
YWCA Cass Clay					124291 pounds		To provide food pantries
3000 University Dr. S	45 0006425	E01(-)(2)		228 620	of food at	Read	with food to distribute
Fargo, ND 58103	45-0226435	501(C)(3)	0.	238,639.	\$1.92/pound	Food	to individuals
Salvation Army Bismarck/Mandan					123294 pounds		To provide food pantries
601 S Washington St.					of food at		with food to distribute
Bismarck, ND 58504	13-5562351	501(a)(3)	0.	236 724	\$1.92/pound	Food	to individuals
BISMALCK, ND 56504	13-5562551	501(0)(3)	0.	230,724.	\$1.92/pound	rood	
Hope Center					122282 pounds		To provide food pantries
313 3rd St NE					of food at		with food to distribute
Devils Lake ND 58301	46-3530897	501(c)(3)	0.	234 781	\$1.92/pound	Food	to individuals
	10 000000,	561(6)(5)			\$1.527 pound	1000	
West Fargo Eats					115760 pounds		To provide food pantries
1402 16th St. E					of food at		with food to distribute
West Fargo, ND 58078	41-1568278	501(c)(3)	0.	222 259	\$1.92/pound	Food	to individuals
	11 10001/0				¥1.>1, pound		
Salvation Army Williston					114992 pounds		To provide food pantries
15 Main Street					of food at		with food to distribute
Williston, ND 58801	13-5562351	501(c)(3)	0.	220 785	\$1.92/pound	Food	to individuals
	10 0001001				41.91, pound		
Bismarck Emergency Food Pantry					110631 pounds		To provide food pantries
1012 S 12th St.					of food at		with food to distribute
Bismarck, ND 58504	45-0353275	501(c)(3)	0.	212,412.	\$1.92/pound	Food	to individuals
				, -	_		
Soup Cafe Heaven's Helpers					105540 pounds		To provide food pantries
220 N 23rd St.					of food at		with food to distribute
Bismarck, ND 58501	26-4411573	501(c)(3)	0.	202,637.	\$1.92/pound	Food	to individuals
,				,			
Community Action Region VI					92977 pounds		To provide food pantries
1108 5th Ave NE					of food at		with food to distribute
Jamestown, ND 58402	45-0333497	501(c)(3)	0.	178,516.	\$1.92/pound	Food	to individuals
Micah's Mission					85034 pounds		To provide food pantries
1901 1st Ave N					of food at		with food to distribute
Moorhead, MN 56560	41-1594892	501(c)(3)	0.	163 265	\$1.92/pound	Food	to individuals

(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
own Lody of Groce Read Dankers					82680 mounda		To provide food portains
Our Lady of Grace Food Pantry					83689 pounds		To provide food pantries
707 16th Ave SW	E2 0106617	$E_{01}(z)(z)$	0.	160 693	of food at	Food	with food to distribute
Minot, ND 58701	53-0196617	501(C)(3)	0.	160,683.	\$1.92/pound	FOOD	to individuals
Abundance of Grace Food Pantry					82752 pounds		To provide food pantries
4209 Old Red Trail Rd					of food at		with food to distribute
Mandan, ND 58554	44-0552034	501(c)(3)	0.	158 884	\$1.92/pound	Food	to individuals
Manadan, ND 50554	11 0552051	501(0)(3)		150,004.	91.927 pound	1000	
Richland Wilkin Emergency Food					81807 pounds		To provide food pantries
Pantry - 699 8th Ave S - Wahpeton					of food at		with food to distribute
ND 58075	36-3964398	501(c)(3)	0.	157,069.	\$1.92/pound	Food	to individuals
				, -			
AMEN Food Pantry					81239 pounds		To provide food pantries
30 7th St. W - N Side on 8th Street					of food at		with food to distribute
Dickinson, ND 58601	36-3566120	501(c)(3)	0.	155,979.	\$1.92/pound	Food	to individuals
Progress Community Center					77617 pounds		To provide food pantries
428 2nd St SW					of food at		with food to distribute
Jamestown, ND 58401	51-0176508	501(c)(3)	0.	149,025.	\$1.92/pound	Food	to individuals
The Banquet					76979 pounds		To provide food pantries
502 N 4th St					of food at		with food to distribute
Bismarck, ND 58501	84-3284530	501(c)(3)	0.	147,800.	\$1.92/pound	Food	to individuals
New Life Center					73247 pounds		To provide food pantries
1902 3rd Ave N					of food at		with food to distribute
Fargo, ND 58102	45-0228056	501(c)(3)	0.	140,634.	\$1.92/pound	Food	to individuals
AID Inc.					73074 pounds		To provide food pantries
314 W Main St					of food at		with food to distribute
Mandan, ND 58554	45-0373866	501(c)(3)	0.	140,302.	\$1.92/pound	Food	to individuals
Nouth Deliche Milela e m					70024 7		
North Dakota Adult & Teen					70934 pounds		To provide food pantries
Challenge - 1406 2nd St NW -					of food at	L .	with food to distribute
Mandan, ND 58554	45-0460831	501(c)(3)	0.	136,193.	\$1.92/pound	Food	to individuals

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Salvation Army Grand Forks					70045 pounds		To provide food pantries
1600 University Ave					of food at		with food to distribute
Grand Forks, ND 58203	13-5562351	501(a)(3)	0.	131 196	\$1.92/pound	Food	to individuals
Grand Forks, ND 36203	13-3302351	501(0)(3)		134,400.	\$1.92/pound	rood	
The Arbors at McCormick Park					69345 pounds		To provide food pantries
618 23rd St. S					of food at		with food to distribute
Fargo, ND 58102	91-2193633	501(c)(3)	0.	133 142	\$1.92/pound	Food	to individuals
	51 2150000	501(0)(0)		100,112.	çı., yı, pound		
River of Hope					60179 pounds		To provide food pantries
1996 43rd Ave N					of food at		with food to distribute
Bismarck, ND 58503	30-0113128	501(c)(3)	0.	115,544.	\$1.92/pound	Food	to individuals
				,			
Belfield Medora Food Pantry					59649 pounds		To provide food pantries
506 2nd Avenue NE					of food at		with food to distribute
Belfield, ND 58622	41-1568278	501(c)(3)	0.	114,526.	\$1.92/pound	Food	to individuals
· · · · ·				, i			
Bridgepointe Community Food Pantry					53298.5 pounds		To provide food pantries
121 17th St N					of food at		with food to distribute
Moorhead, MN 56560	44-0552034	501(c)(3)	0.	102,333.	\$1.92/pound	Food	to individuals
· · · · ·							
Graver Food Pantry					53056 pounds		To provide food pantries
123 Roberts St.					of food at		with food to distribute
Fargo, ND 58102	45-0453966	501(c)(3)	0.	101,868.	\$1.92/pound	Food	to individuals
Tri-City Haitian Ministry					52507 pounds		To provide food pantries
1419 17th St. S					of food at		with food to distribute
Fargo, ND 58103	62-0484177	501(c)(3)	0.	100,813.	\$1.92/pound	Food	to individuals
Garrison Area Resource Center &					50181 pounds		To provide food pantries
Food Pantry - 71 S Main St., Ste B					of food at		with food to distribute
- Garrison, ND 58540	84-1826161	501(c)(3)	0.	96,348.	\$1.92/pound	Food	to individuals
McMerty Food Pantry					49044 pounds		To provide food pantries
630 7th St. N					of food at		with food to distribute
Fargo, ND 58102	53-0196617	501(c)(3)	0.	94,164.	\$1.92/pound	Food	to individuals

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Second Harvest Heartland					47744 mounds		To provide feed pertuine
7101 Winnetka Ave N					47744 pounds of food at		To provide food pantries with food to distribute
Brooklyn Park, MN 55428	23-7417654	501(a)(2)	0.	01 669	\$1.92/pound	Food	to individuals
BIOOKIYII PAIK, MN 55426	23-7417034	501(0)(3)	· · ·	91,000.		rood	
McHenry County Food Pantry					45740 pounds		To provide food pantries
118 Main Street South					of food at		with food to distribute
Granville, ND 58741	41-1568278	501(c)(3)	0.	87 821	\$1.92/pound	Food	to individuals
McKenzie County Food Pantry					44803 pounds		To provide food pantries
212 2nd Street NW					of food at		with food to distribute
Watford City, ND 58854	41-1568278	501(c)(3)	0.	86,022.	\$1.92/pound	Food	to individuals
· · · · ·							
Gackle Area Food Pantry					43838 pounds		To provide food pantries
111 Cedar Street - Fire Hall					of food at		with food to distribute
Gackle, ND 58442	45-0334283	501(c)(3)	0.	84,169.	\$1.92/pound	Food	to individuals
Bottineau Food Pantry					43005 pounds		To provide food pantries
122 5th Street W					of food at		with food to distribute
Bottineau, ND 58318-8039	45-0426982	501(c)(3)	0.	82,570.	\$1.92/pound	Food	to individuals
Houge Estates					40729 pounds		To provide food pantries
510 Center Ave E					of food at		with food to distribute
Dilworth, MN 56529	41-1384343	501(c)(3)	0.	78,200.	\$1.92/pound	Food	to individuals
Mountrail Community Food Pantry					39361 pounds		To provide food pantries
8131 Hwy 2	41 15 60 270	F01/-\/2\		75 572	of food at	n	with food to distribute
Stanley, ND 58784	41-1568278	501(C)(3)	0.	75,573.	\$1.92/pound	Food	to individuals
Stopping Stopp Beggings Conter					34631 pounds		To provide food pantries
Stepping Stone Resource Center					of food at		with food to distribute
711 S University Dr	45-0226418	501(a)(3)	0.	66 400	61 1000 at \$1.92/pound	Food	to individuals
Fargo, ND 58103	45-0220418	201(6)(2)		00,492.	br.27/bonno	roou	
Dacotah Recovery Center					32631 pounds		To provide food pantries
522 W Arbor Ave					of food at		with food to distribute
Bismarck, ND 58504	23-7115398	501(c)(3)	0.	62 652	\$1.92/pound	Food	to individuals

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Mercer County WARC					31846 pounds		To provide food pantries
1500 7th St. NE					of food at		with food to distribute
Beulah, ND 58523	45-0363760	501(a)(3)	0.	61 144	\$1.92/pound	Food	to individuals
Beulan, ND 50525	43-0303700	501(0/(5/	0.	01,144.	\$1.927 <u>p</u> ound	rood	
Our Saviors Lord's Food Pantry					31697 pounds		To provide food pantries
215 Main Street (City Hall)					of food at		with food to distribute
Max, ND 58759	41-1568278	501(c)(3)	0.	60 858	\$1.92/pound	Food	to individuals
	11 10001/0				, , , , , , , , , , , , , , , , , , , 		
Red River Valley Community Action					30586 pounds		To provide food pantries
1017 N 5th Street					of food at		with food to distribute
Grand Forks, ND 58203	45-0333456	501(c)(3)	0.	58,725.	\$1.92/pound	Food	to individuals
Walsh County Emergency Food Pantry					30177 pounds		To provide food pantries
344 W 15th Street					of food at		with food to distribute
Grafton, ND 58237	53-0196617	501(c)(3)	0.	57,940.	\$1.92/pound	Food	to individuals
Centre Inc Grand Forks					29847 pounds		To provide food pantries
201 4th St S					of food at		with food to distribute
Grand Forks, ND 58201	45-0338735	501(c)(3)	٥.	57,306.	\$1.92/pound	Food	to individuals
Welcome House					29462 pounds		To provide food pantries
617 N. 7th St					of food at		with food to distribute
Bismarck, ND 58501	42-1633755	501(c)(3)	0.	56,567.	\$1.92/pound	Food	to individuals
Pright Clay Anostropta					27990 pounds		To provide feed pertuing
Bright Sky Apartments 3305 3rd Ave. N					of food at		To provide food pantries with food to distribute
Moorhead, MN 56560	41-1594892	501(c)(3)	0.	53 7 <i>1</i> 1	\$1.92/pound	Food	to individuals
Moornead, MN 30300	41-1394092	501(0)(5)	0.	55,741.	\$1.92/pound	rood	
Abused Adult Resource Center -					25954 pounds		To provide food pantries
Pam's House - 912 North 4th Street					of food at		with food to distribute
- Bismarck, ND 58501	45-0363127	501(c)(3)	0.	49 832	\$1.92/pound	Food	to individuals
	10 0000127		· · ·	15,002.			
Tipi Wakan Baptist Church					25676 pounds		To provide food pantries
7149 S Big Lake Road					of food at		with food to distribute
Cannon Ball, ND 58528	62-0535346	501(c)(3)	0.	49 298	\$1.92/pound	Food	to individuals

(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
Gladys Ray Shelter					25160 pounds		To provide food pantries
1519 1st Ave. S.					of food at		with food to distribute
Fargo, ND 58103	41-2198589	501(a)(3)	0.	18 307	\$1.92/pound	Food	to individuals
raigo, no seres	41-2190509	501(0)(3)	· · ·	40,307.	\$1.927 <u>p</u> ound	rood	
Country Community Cupboard					22700 pounds		To provide food pantries
119 S Main St. (back alley)					of food at		with food to distribute
Elgin, ND 58533	83-1362016	501(c)(3)	0.	43 584	\$1.92/pound	Food	to individuals
	03 1302010	501(0)(5)		43,304.	91.927pouna	1000	
Bdecan Food Pantry					22293 pounds		To provide food pantries
8194 34th St NE					of food at		with food to distribute
Tokio, ND 58379	23-6393377	501(c)(3)	0.	42,803.	\$1.92/pound	Food	to individuals
,				,	-		
Myrt Armstrong Recovery Center-					21582 pounds		To provide food pantries
MHAND - 1419 1st Ave S - Fargo, ND					of food at		with food to distribute
58103	45-0276836	501(c)(3)	0.	41,437.	\$1.92/pound	Food	to individuals
				<i>,</i>			
Lincoln Community Cupboard					21132 pounds		To provide food pantries
3310 66th St SE					of food at		with food to distribute
Lincoln, ND 58504	45-0382227	501(c)(3)	0.	40,573.	\$1.92/pound	Food	to individuals
				<i>,</i>			
House of Judah Ministry					20668 pounds		To provide food pantries
International - 307 Main Ave -					of food at		with food to distribute
Fargo, ND 58103	84-4825215	501(c)(3)	0.	39,683.	\$1.92/pound	Food	to individuals
Youthworks Bismarck					20520 pounds		To provide food pantries
217 W Rosser Ave.					of food at		with food to distribute
Bismarck, ND 58501	46-0345922	501(c)(3)	0.	39,398.	\$1.92/pound	Food	to individuals
Pioneer Manor - FHRA					20141 pounds		To provide food pantries
201 11th St N					of food at		with food to distribute
Fargo, ND 58102	45-0453966	501(c)(3)	0.	38,671.	\$1.92/pound	Food	to individuals
Community Suppers					20120 pounds		To provide food pantries
1000 3rd St NE					of food at		with food to distribute
Minot, ND 58703	45-3539663	501(c)(3)	0.	38,630.	\$1.92/pound	Food	to individuals

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Turtle Mountain Worship Center					19927 pounds		To provide food pantries
Food Pantry - 402 Longie Dr. NE -					of food at		with food to distribute
Belcourt, ND 58316	44-0577787	501(a)(3)	0.	38 260	\$1.92/pound	Food	to individuals
Bercourt, ND 38316	44-0577787	501(0)(3)	· ·	58,200.	\$1.927poulla	rood	
Sheyenne High School Pantry					19750 pounds		To provide food pantries
800 40 Ave E					of food at		with food to distribute
West Fargo, ND 58078	47-2229589	Government	0.	37 920	\$1.92/pound	Food	to individuals
West Faigo, ND 50070	47 2225305	Government		57,520.	\$1.52/pound	roou	
Alternative Care Services - Fargo					18861 pounds		To provide food pantries
4624 38th Ave. S.					of food at		with food to distribute
Fargo, ND 58104	23-7115398	501(c)(3)	0.	36 213	\$1.92/pound	Food	to individuals
	23 /113330	501(0)(3)		50,215.		1000	
Cooper House					18788 pounds		To provide food pantries
414 11th St N					of food at		with food to distribute
Fargo, ND 58102	45-0453966	501(c)(3)	0.	36 073	\$1.92/pound	Food	to individuals
	15 0155500	501(0)(3)			91.927pouna		
Powers Lake Food Pantry					18580 pounds		To provide food pantries
201 1st Ave. W					of food at		with food to distribute
Powers Lake, ND 58773	41-1568278	501(c)(3)	0.	35 674	\$1.92/pound	Food	to individuals
					71.717 pound		
Dunn County Food Pantry					17869 pounds		To provide food pantries
220 4th Ave SW, Suite A.					of food at		with food to distribute
Killdeer, ND 58640	41-1568278	501(c)(3)	0.	34 308.	\$1.92/pound	Food	to individuals
				,	1		
Luther's Kitchen					17246 pounds		To provide food pantries
120 5th Ave NW					of food at		with food to distribute
Minot, ND 58703	41-1568278	501(c)(3)	0.	33 112.	\$1.92/pound	Food	to individuals
				,	+ - • , <u>-</u>		
River View Heights					17188 pounds		To provide food pantries
800 2nd Ave. N					of food at		with food to distribute
Moorhead, MN 58560	41-1384343	501(c)(3)	0.	33 001	\$1.92/pound	Food	to individuals
			· · · ·				
Emmons County Food Pantry					16947 pounds		To provide food pantries
118 S Broadway St.					of food at		with food to distribute
Linton, ND 58552	82-0746863		0.		\$1.92/pound	Food	to individuals

(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
Society of St. Stephen Food Pantry					15646 pounds		To provide food pantries
10 Washington Ave SW					of food at		with food to distribute
Bowbells, ND 58721	45-0340089	501(a)(3)	0.	30 040	\$1.92/pound	Food	to individuals
Bowbeils, ND 56721	45-0540089	501(0)(3)		30,040.	\$1.92/pound	rood	
Alternative Care Services					14857 pounds		To provide food pantries
1041 Basin Ave.					of food at		with food to distribute
Bismarck, ND 58504	23-7115398	501(c)(3)	0.	28 525	\$1.92/pound	Food	to individuals
Dismaick, ND 50504	25 /115550	501(0/(5/	, °.	20,525.	\$1.52/pound	1000	
Kidder County Food Pantry					14843 pounds		To provide food pantries
202 1st Ave. NW					of food at		with food to distribute
Steele, ND 58482	83-0491838	501(c)(3)	0.	28 499	\$1.92/pound	Food	to individuals
	00 0101000	501(0)(5)			91.927pouna		
TUDEAKO Group Organization					14831 pounds		To provide food pantries
15 21st St. S #103					of food at		with food to distribute
Fargo, ND 58103	80-0588933	501(c)(3)	0.	28 476	\$1.92/pound	Food	to individuals
		501(0)(5)			91.927pouna		
Carson Food Pantry					14631 pounds		To provide food pantries
123 North Main St.					of food at		with food to distribute
Carson, ND 58529	45-0449712	501(c)(3)	0.	28 092	\$1.92/pound	Food	to individuals
	15 0115/12	501(0)(5)		20,052.	\$1.52/pound	1000	
Building 400					14586 pounds		To provide food pantries
400 Broadway N					of food at		with food to distribute
Fargo, ND 58102	92-2399953	501(c)(3)	0.	28 005.	\$1.92/pound	Food	to individuals
Moorhead School District School					14311 pounds		To provide food pantries
Pantries - 3601 12 Ave S -					of food at		with food to distribute
Moorhead, MN 56560	47-2229589	Government	0.	27 477.	\$1.92/pound	Food	to individuals
					+ - • / <u>-</u>		
Mott Food Pantry					14070 pounds		To provide food pantries
212 Iowa Ave					of food at		with food to distribute
Mott, ND 58646	81-3861084	501(c)(3)	0.	27 014	\$1.92/pound	Food	to individuals
			+ ···	27,011.			
Ellendale Community Food Pantry					13818 pounds		To provide food pantries
504 2nd Ave. N					of food at		with food to distribute
Ellendale, ND 58436	82-0636869	501(c)(3)	0.	26 531	\$1.92/pound	Food	to individuals

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Wilton Food Pantry					12793 pounds		To provide food pantries
42 Dakota Avenue					of food at		with food to distribute
Wilton, ND 58579	45-0336324	501(c)(3)	0.	24 563	\$1.92/pound	Food	to individuals
	45 0550524	501(0/(3/		24,303.		rood	
Church of God's Word Food Pantry					12637 pounds		To provide food pantries
227 Main Ave W					of food at		with food to distribute
West Fargo, ND 58708	85-2811739	501(c)(3)	0.	24 263	\$1.92/pound	Food	to individuals
	00 1011/05	501(0)(0)			91.927 pound	1000	
Sharp View					12467 pounds		To provide food pantries
920 5th Ave. S					of food at		with food to distribute
Moorhead, MN 58560	41-1384343	501(c)(3)	0.	23 937.	\$1.92/pound	Food	to individuals
				,	+ - • / <u>-</u>		
Peace Lutheran Church Food Pantry					12353 pounds		To provide food pantries
1011 12th Ave N					of food at		with food to distribute
Fargo, ND 58102	45-0261730	501(c)(3)	0.	23 718.	\$1.92/pound	Food	to individuals
Rural Cass County Emergency Food					11769 pounds		To provide food pantries
Pantry - 602 1st. St. N -					of food at		with food to distribute
Casselton, ND 58012	45-0428047	501(c)(3)	0.	22 596.	\$1.92/pound	Food	to individuals
······································				,	1		
Olivet Lutheran Church Food Pantry					11744 pounds		To provide food pantries
1330 S. University Dr.					of food at		with food to distribute
Fargo, ND 58103	41-1568278	501(c)(3)	0.	22,548.	\$1.92/pound	Food	to individuals
				,	-		
Ashley Food Pantry					11338 pounds		To provide food pantries
112 1st St SE					of food at		with food to distribute
Ashley, ND 58413	41-1568278	501(c)(3)	0.	21,769.	\$1.92/pound	Food	to individuals
- /				,			
Lehr Lions Club Food Pantry					10943 pounds		To provide food pantries
403 East St.					of food at		with food to distribute
Lehr, ND 58460	31-1666075	501(c)(3)	0.	21,011.	\$1.92/pound	Food	to individuals
· ·				, -	_		
Cobber Food Pantry					10836 pounds		To provide food pantries
901 8th St. South					of food at		with food to distribute
Moorhead, MN 56560	41-0693977	501(c)(3)	0.	20 805	\$1.92/pound	Food	to individuals

(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
Longfellow Elementary School					10257 pounds		To provide food pantries
Pantry - 600 16 St NW - Minot, ND	47 0000500	. .		10 000	of food at		with food to distribute
58703	47-2229589	Government	0.	19,693.	\$1.92/pound	Food	to individuals
The Lord's Pantry					10248 pounds		To provide food pantries
515 Kundert Street					of food at		with food to distribute
Turtle Lake, ND 58575	41-1568278	501(a)(3)	0.	19 676	\$1.92/pound	Food	to individuals
Initie Lake, ND 30373	41-1300270	501(0/(3)	0.	19,070.	\$1.92/pound	roou	
South Central High School Pantry					10165 pounds		To provide food pantries
406 S Anderson St					of food at		with food to distribute
Bismarck, ND 58504	47-2229589	Government	0.	19,517.	\$1.92/pound	Food	to individuals
Divide County Food Pantry					10127 pounds		To provide food pantries
204 Main Street NE					of food at		with food to distribute
Crosby, ND 58730	45-0239712	501(c)(3)	0.	19,444.	\$1.92/pound	Food	to individuals
Wishek Food Pantry					9884 pounds of		To provide food pantries
5 Centennial St. S -back of Sr. Ctr					food at		with food to distribute
Wishek, ND 58495	45-6051285	501(c)(3)	0.	18,977.	\$1.92/pound	Food	to individuals
Community Nourishment					9745 pounds of		To provide food pantries
321 3rd Ave					food at		with food to distribute
Tokio, ND 58379	86-3807977	501(c)(3)	0.	18,710.	\$1.92/pound	Food	to individuals
Midway School Pantry					9659 pounds of		To provide food pantries
3202 33 Ave NE					food at		with food to distribute
Inkster, ND 58233	47-2229589	Government	0.	18 545	\$1.92/pound	Food	to individuals
	47 2225305	Government	•.	10,545.	\$1.927pound	roou	
Selfridge Assembly of God					9618 pounds of		To provide food pantries
110 1st St N					food at		with food to distribute
Selfridge, ND 58568	44-0577787	501(c)(3)	0.	18.467.	\$1.92/pound	Food	to individuals
- /		,		_ ,			
Community Cupboard of Underwood					9392 pounds of		To provide food pantries
208 Lincoln Ave.					food at		with food to distribute
Underwood, ND 58576	81-3864828	501(c)(3)	0.	18 033	\$1.92/pound	Food	to individuals

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KIDS Food Pantry					9080 pounds of		To provide food pantries
725 28th St. N.					food at		with food to distribute
Fargo, ND 58102	45-3621605	501(a)(3)	0.	17 /3/	\$1.92/pound	Food	to individuals
Faigo, ND 56102	43-3021003	501(0)(3)	· · ·	17,434.	\$1.927 <u>p</u> ound	rood	
Salvation Army Jamestown					8949 pounds of		To provide food pantries
320 1st Ave N					food at		with food to distribute
Jamestown, ND 58401	36-2167910	501(c)(3)	0.	17 182	\$1.92/pound	Food	to individuals
	50 2107510	501(0)(5)		17,102.	\$1.52/pound	roou	
Gateway Gardens					8895 pounds of		To provide food pantries
2903 15th St. S.					food at		with food to distribute
Moorhead, MN 56560	41-1294489	501(c)(3)	0.	17 078	\$1.92/pound	Food	to individuals
		501(0)(5)		17,070.	91.927pouna	1000	
West Fargo High School Pantry					8728 pounds of		To provide food pantries
801 9 ST E					food at		with food to distribute
West Fargo, ND 58078	47-2229589	Government	0.	16 758	\$1.92/pound	Food	to individuals
					71.917 <u>p</u> ound		
Amidon Community Cupboard					8540 pounds of		To provide food pantries
hwy 85 & Court St.					food at		with food to distribute
Amidon, ND 58620	41-1568278	501(c)(3)	0.	16 397	\$1.92/pound	Food	to individuals
	11 10001/0				, , , , , <u>,</u> , , , , , , , , , , , , ,		
Emerado Community Food Pantry					8348 pounds of		To provide food pantries
208 Main St					food at		with food to distribute
Emerado, ND 58228	51-0188148	501(c)(3)	0.	16 028.	\$1.92/pound	Food	to individuals
					, 1, 5 1, <u>p</u> ound		
Salvation Army Fargo					8296 pounds of		To provide food pantries
304 Roberts St					food at		with food to distribute
Fargo, ND 58102	13-5562351	501(c)(3)	0.	15 928	\$1.92/pound	Food	to individuals
					71.917 <u>p</u> ound		
Open Door Food Pantry					8235 pounds of		To provide food pantries
437 Main St					food at		with food to distribute
New England, ND 58647	53-0196617	501(c)(3)	0.	15 811	\$1.92/pound	Food	to individuals
			, v.				- Individualb
Larimore Food Pantry					8203 pounds of		To provide food pantries
109 Terry Alley					food at		with food to distribute
Larimore, ND 58214	45-0255772	501(c)(3)	0.	15 750	\$1.92/pound	Food	to individuals

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Bismarck High School Pantry					8164 pounds of		To provide food pantries
800 N 8 St.					food at		with food to distribute
Bismarck, ND 58501	47-2229589	Government	0.	15 675	\$1.92/pound	Food	to individuals
					+ - • , <u>-</u>		
Friends of the Children					7949 pounds of		To provide food pantries
5183 44th St S					food at		with food to distribute
Fargo, ND 58101	83-4476757	501(c)(3)	0.	15,262.	\$1.92/pound	Food	to individuals
				,			
Dunseith Food Pantry					7825 pounds of		To provide food pantries
315 Main St					food at		with food to distribute
Dunseith, ND 58329	41-1568278	501(c)(3)	٥.	15,024.	\$1.92/pound	Food	to individuals
Steele County Food Pantry					7804 pounds of		To provide food pantries
201 Washington Ave. W					food at		with food to distribute
Finley, ND 58230	81-5050534	501(c)(3)	0.	14,984.	\$1.92/pound	Food	to individuals
Glen Ullin Community Food Pantry					7394 pounds of		To provide food pantries
103 Oak Avenue East					food at		with food to distribute
Glen Ullin, ND 58631	46-4885049	501(c)(3)	٥.	14,196.	\$1.92/pound	Food	to individuals
Oliver County Food Pantry					7350 pounds of		To provide food pantries
312 Lincoln Ave N					food at		with food to distribute
Center, ND 58530	27-1138355	501(c)(3)	0.	14,112.	\$1.92/pound	Food	to individuals
Bowman Slope Community Cupboard					7325 pounds of		To provide food pantries
202 1st Ave. SE					food at		with food to distribute
Bowman, ND 58623	36-3540460	501(a)(3)	0.	14 064	\$1.92/pound	Food	to individuals
Bownan, ND 50025	50-5540400	501(0)(5)	0.	14,004.	\$1.927 <u>p</u> ouna	rood	
Lansford Food Pantry					7237 pounds of		To provide food pantries
410 2nd Ave					food at		with food to distribute
Lansford, ND 58750	34-0144250	501(c)(3)	0.	13 895	\$1.92/pound	Food	to individuals
	010111200		, ···	10,000.			
Central Dakota Food Pantry					6911 pounds of		To provide food pantries
708 Alder Avenue					food at		with food to distribute
Harvey, ND 58341	81-4815986	501(c)(3)	0.	13 269	\$1.92/pound	Food	to individuals

(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
Adama County Food Dontry					6866 pounds of		To provide food pantries
Adams County Food Pantry 609 2nd Ave. N					food at		with food to distribute
Hettinger, ND 58639	82-2010902	501(a)(3)	0.	12 192	\$1.92/pound	Food	to individuals
	02-2010902	501(0)(5)	0.	13,103.	\$1.92/pound	1000	
Watford City High School Pantry					6687 pounds of		To provide food pantries
2313 Wolves Den Parkway					food at		with food to distribute
Watford City, ND 58854	47-2229589	Government	0.	12 839	\$1.92/pound	Food	to individuals
	1, 2225305			12,000.	91.927 pound		
Enderlin Area Food Pantry					6661 pounds of		To provide food pantries
326 Bluff St.					food at		with food to distribute
Enderlin, ND 58027	41-1568278	501(c)(3)	0.	12,789.	\$1.92/pound	Food	to individuals
				,	-		
Turtle Mountain Mikinaak Ode					6639 pounds of		To provide food pantries
Shelter - 3063 Highway 281 Unit 2					food at		with food to distribute
- Dunseith, ND 58329	86-1378088	501(c)(3)	0.	12,747.	\$1.92/pound	Food	to individuals
,				,			
Velva Community Food Pantry					6632 pounds of		To provide food pantries
400 N Main St					food at		with food to distribute
Velva, ND 58790	41-1568278	501(c)(3)	0.	12,733.	\$1.92/pound	Food	to individuals
/				, -			
Dakota High School Pantry					6537 pounds of		To provide food pantries
1305 9 Ave S					food at		with food to distribute
Fargo, ND 58103	47-2229589	Government	0.	12,551.	\$1.92/pound	Food	to individuals
Goods for the Herd					6437 pounds of		To provide food pantries
1401 Administrative Ave.					food at		with food to distribute
Fargo, ND 58102	23-7120898	Government	0.	12,359.	\$1.92/pound	Food	to individuals
Marlene's Food Pantry of Hazen					6309 pounds of		To provide food pantries
146 Main Street NW					food at		with food to distribute
Hazen, ND 58545	93-4418143	501(c)(3)	0.	12,113.	\$1.92/pound	Food	to individuals
Barnes County Food Pantry					6198 pounds of		To provide food pantries
139 2nd Ave SE					food at		with food to distribute
Valley City, ND 58072	45-0319063	501(c)(3)	0.	11,900.	\$1.92/pound	Food	to individuals

117 2nd Street NM 81-3556489 \$01(c)(3) 0. 11,825,\$1,92/pound Food to individue Next step 23-7115398 \$01(c)(3) 0. 11,976,\$1,92/pound Food to individue Arago, ND 58103 23-7115398 \$01(c)(3) 0. 11,576,\$1,92/pound Food to individue Cando Area Food Pantry 23-7115398 \$01(c)(3) 0. 11,576,\$1,92/pound Food to individue Cando Area Food Pantry 23-7115398 \$01(c)(3) 0. 11,576,\$1,92/pound Food to individue Cando Area Food Pantry 02-0735781 \$01(c)(3) 0. 11,570,\$1,92/pound Food to individue Pembina County Emergency Food 23-0549573 \$01(c)(3) 0. 11,345,\$1,92/pound Food to individue Centre Inc Mandan 30-0549573 \$01(c)(3) 0. 11,325,\$1,92/pound Food to individue Ransom County Pood Pantry 30-0549573 \$01(c)(3) 0. 11,320,\$1,92/pound Food to individue Ransom County Pood Pantry 501(c)(3) 0. 11,320,\$1,92/pound Food to individue	(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
117 2nd Street NM 81-3556489 \$01(c)(3) 0. 11,825,\$1,92/pound Food to individue Next step 23-7115398 \$01(c)(3) 0. 11,976,\$1,92/pound Food to individue Arago, ND 58103 23-7115398 \$01(c)(3) 0. 11,576,\$1,92/pound Food to individue Cando Area Food Pantry 23-7115398 \$01(c)(3) 0. 11,576,\$1,92/pound Food to individue Cando Area Food Pantry 23-7115398 \$01(c)(3) 0. 11,576,\$1,92/pound Food to individue Cando Area Food Pantry 02-0735781 \$01(c)(3) 0. 11,570,\$1,92/pound Food to individue Pembina County Emergency Food 23-0549573 \$01(c)(3) 0. 11,345,\$1,92/pound Food to individue Centre Inc Mandan 30-0549573 \$01(c)(3) 0. 11,325,\$1,92/pound Food to individue Ransom County Pood Pantry 30-0549573 \$01(c)(3) 0. 11,320,\$1,92/pound Food to individue Ransom County Pood Pantry 501(c)(3) 0. 11,320,\$1,92/pound Food to individue	mare Read Pantry					6159 pounds of		To provide food pantries
Kenmare, ND 58746 81-3556489 501(c)(3) 0. 11,825, \$1,92/pound Food to individue Next Step 1322 Gateway Dr. 23-7115398 501(c)(3) 0. 11,576, \$1,92/pound Food to individue Cando Area Food Pantry 23-7115398 501(c)(3) 0. 11,576, \$1,92/pound Food to individue Cando Area Food Pantry 02-0735781 501(c)(3) 0. 11,570, \$1,92/pound Food to individue Cando Area Food Pantry 02-0735781 501(c)(3) 0. 11,570, \$1,92/pound Food to individue Cando Area Food Pantry 02-0735781 501(c)(3) 0. 11,570, \$1,92/pound Food to individue Pembina County Emergency Food 30-0549573 501(c)(3) 0. 11,345, \$1,92/pound Food to individue Caratler, ND 58220 30-0549573 501(c)(3) 0. 11,322, \$1,92/pound Food to individue Caratler, ND 58254 45-0338735 501(c)(3) 0. 11,322, \$1,92/pound Food to individue Ransom County Food Pantry 501(c)(3) 0. 11,322, \$1,92/pound Food to individue Stafo pounds of food at 5752 pounds of food at food at Food to individue	-					-		with food to distribute
Next Step Next Step		81-3556489	501(a)(3)	0	11 925		Food	
1322 Gateway Dr. food at with food to Pargo, ND 58103 23-7115398 501(c)(3) 0. 11,576, \$1,92/pound Food to individue Cando Area Food Pantry 5026 pounds of food at food at To provide food at 304 5th Ave 02-0735781 501(c)(3) 0. 11,570, \$1,92/pound Food to individue Pembra County Emergency Food 02-0735781 501(c)(3) 0. 11,570, \$1,92/pound Food to individue Pembra County Emergency Food 30-0549573 501(c)(3) 0. 11,345, \$1.92/pound Food to individue Centre Inc Mandan 30-0549573 501(c)(3) 0. 11,322, \$1.92/pound Food to individue Ransom County Food Pantry 36-3504036 501(c)(3) 0. 11,322, \$1.92/pound Food to individue Ransom County Food Pantry 36-3504036 501(c)(3) 0. 11,230, \$1.92/pound Food to individue Ransom County Food Pantry 36-3504036 501(c)(3) 0. 11,230, \$1.92/pound Food to individue Ransom County Food Pantry 36-3504036 501(c)(3) 0. 11,230, \$1.92/pound Food to individue Ros of thos of thos of the set 36-3504036 501(c)	mare, ND 58740	01-3330403	501(0)(5)	0.	11,025.		rood	
1322 Gateway Dr. Food at with food to Pargo, ND 58103 23-7115398 501(c)(3) 0. 11,576, \$1,92/pound Food to individue Cando Area Food Pantry 5026 pounds of food at food at To provide food at 304 55h Ave 02-0735781 501(c)(3) 0. 11,570, \$1,92/pound Food to individue Pembra County Emergency Food 02-0735781 501(c)(3) 0. 11,570, \$1,92/pound Food to individue Pembra County Emergency Food 30-0549573 501(c)(3) 0. 11,345, \$1.92/pound Food to individue Centre Inc Mandan 30-0549573 501(c)(3) 0. 11,322, \$1.92/pound Food to individue Ransom County Pood Pantry 36-3504036 501(c)(3) 0. 11,230, \$1.92/pound Food to individue Ransom County Pood Pantry 36-3504036 501(c)(3) 0. 11,230, \$1.92/pound Food to individue Ransom County Pood Pantry 36-3504036 501(c)(3) 0. 11,230, \$1.92/pound Food to individue Ransom County Pood Pantry 36-3504036 501(c)(3) 0. 11,230, \$1.92/pound Food to individue Ransom County Pood Pantry 36-3504036 501(c)(3) </td <td>t Sten</td> <td></td> <td></td> <td></td> <td></td> <td>6029 pounds of</td> <td></td> <td>To provide food pantries</td>	t Sten					6029 pounds of		To provide food pantries
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	alion County Emorgonous Food					5625 pounds of		To provide food pantries
Dentwir 211 Mth Arro Tengden I I I I I Head at I I I I I I I I I I I I I I I I I I						food at		with food to distribute
	, ,	20 2050705	F01/-\/2\		10 000		n	to individuals

(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
Minot Public Schools Foundation					5564 pounds of		To provide food pantries
School Pantries - 600 17 Ave SE -					food at		with food to distribute
Minot, ND 58701	47-2229589	Government	0.	10 683	\$1.92/pound	Food	to individuals
					+1.92, pound		
Hi-Liner School Pantry Program					5517 pounds of		To provide food pantries
493 Central Ave N					food at		with food to distribute
Valley City, ND 58072	47-2229589	Government	0.	10 593.	\$1.92/pound	Food	to individuals
				,	+		
Arbor House					5442 pounds of		To provide food pantries
510 W Arbor Ave					food at		with food to distribute
Bismarck, ND 58504	23-7115398	501(c)(3)	0.	10,449.	\$1.92/pound	Food	to individuals
				, -			
Hatton Helping Hand					5437 pounds of		To provide food pantries
1009 Dakota Ave.					food at		with food to distribute
Hatton, ND 58240	41-1991463	501(c)(3)	0.	10,439.	\$1.92/pound	Food	to individuals
New Horizons - FHRA					5235 pounds of		To provide food pantries
2525 North Broadway					food at		with food to distribute
Fargo, ND 58102	45-0453966	501(c)(3)	0.	10,051.	\$1.92/pound	Food	to individuals
i							
Glenburn Food Pantry					5153 pounds of		To provide food pantries
103 Healy Street					food at		with food to distribute
Glenburn, ND 58740	41-1568278	501(c)(3)	0.	9,894.	\$1.92/pound	Food	to individuals
Serenity					4943 pounds of		To provide food pantries
631 1st Ave N					food at		with food to distribute
Fargo, ND 58102	23-7115398	501(c)(3)	0.	9,491.	\$1.92/pound	Food	to individuals
Husky Hutch School Pantry					4911 pounds of		To provide food pantries
1417 6 St S					food at		with food to distribute
Fargo, ND 58103	47-2229589	Government	٥.	9,429.	\$1.92/pound	Food	to individuals
8th St East Group Home -					4862 pounds of		To provide food pantries
Opportunity Foundation - 701 8th					food at		with food to distribute
St E - Williston, ND 58801	45-0373040	501(c)(3)	0.	9,335.	\$1.92/pound	Food	to individuals

Youthworks 4751 pounds of food at To provide food patting food at 1330 19h Xve S, 46-0345922 501(c)(3) 0. 9,122, 31,92/pound Food to individuals Milton Young Towers Food Pantry 36-4029492 501(c)(3) 0. 8,907, \$1,92/pound Food To provide food pantrie food at Minot, ND 58701 36-4029492 501(c)(3) 0. 8,907, \$1,92/pound Food To provide food pantrie food pantrie food at Simarck, ND 58701 36-4029492 501(c)(3) 0. 8,907, \$1,92/pound Food To provide food pantrie food patrie food at Simarck, ND 58701 36-4029492 501(c)(3) 0. 8,907, \$1,92/pound Food To provide food pantrie food at Simarck, ND 58701 36-4029492 501(c)(3) 0. 8,774 \$1,92/pound Food To provide food pantrie food at Simarck, ND 58504 47-2229589 poverment 0. 8,774 \$1,92/pound Food To provide food pantrie food at Michigan Food Pantry 322 State Street S 45-0333456 501(c)(3) 0. 8,723 \$1,92/pound Food To provide food pantrie food at Kai Aboure, ND 58355 84-2097881 501(c)(3) 0. 8,703 \$1,92/pound Food To individuals Kai You Net 45-0338056 501(c)(3) 0. 8,703 \$1,92/pound Food To individuals <	(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
1310 18th Ave S. 46-0345922 501(c)(3) 0. 9,122, \$1,92/pound Food at with food to distribute Atlion Young Towers Pood Pantry 36-4029492 501(c)(3) 0. 8,907, \$1,92/pound Food to individuals Milton Young Towers Pood Pantry 36-4029492 501(c)(3) 0. 8,907, \$1,92/pound Food to individuals Minot, ND 58701 36-4029492 501(c)(3) 0. 8,907, \$1,92/pound Food to individuals Dorothy Moses School Pantry 312 Columbia Dr 4570 pounds of food at rood at with food to distribute Michigan Pood Pantry 22 State Street S 45-033455 601(c)(3) 0. 8,773, \$1,92/pound Food to individuals Wana Nota 45-033455 601(c)(3) 0. 8,773, \$1,92/pound Food to individuals Ray Community Nutrition & Resource 601(c)(3) 0. 8,733, \$1,92/pound Food to individuals Ray Community Nutrition & Resource 45-0238076 601(c)(3) 0. 8,763, \$1,92/pound Food to individuals Ray Community Nutrition & Resource 4500 pontrie 4408 pounds of food at To provide food pantrie food at food at food ot individuals Beach, Pood Pantry 501(c)(3)	Vouthworks					4751 pounds of		To provide food pantries
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LaMoure County Food Pantry 19 3rd Ave. SW LaMoure, ND 58458 41-1568278 501(c)(3) 0. 8,089.\$1.92/pound Food to individuals Glyndon Community Food Pantry 414 Parke Ave. S.	-	26 0101002	F(1/a)/2)	0	0 200		Food	
19 3rd Ave. SW 41-1568278 501(c)(3) 6ood at with food to distribute LaMoure, ND 58458 41-1568278 501(c)(3) 0. 8,089.\$1.92/pound Food to individuals Glyndon Community Food Pantry 4130.75 pounds Food at To provide food pantrie 414 Parke Ave. S. with food to distribute with food to distribute	Beach, ND 58621	20-0404002	501(C)(3)	U.	8,208.	\$1.92/pound	FOOD	
19 3rd Ave. SW 41-1568278 501(c)(3) 6ood at with food to distribute LaMoure, ND 58458 41-1568278 501(c)(3) 0. 8,089.\$1.92/pound Food to individuals Glyndon Community Food Pantry 4130.75 pounds Food at To provide food pantrie 414 Parke Ave. S. with food to distribute with food to distribute	LaMoure County Food Pantry					4213 nounds of		To provide food partrice
LaMoure, ND 58458 41-1568278 501(c)(3) 0. 8,089. \$1.92/pound Food to individuals Glyndon Community Food Pantry 414 Parke Ave. S. To provide food pantrie with food to distribute						-		
Glyndon Community Food Pantry 414 Parke Ave. S. To provide food pantrie with food to distribute		41 1560050			0.000			
414 Parke Ave. S. of food at with food to distribute	Lamoure, ND 58458	41-1568278	DUT(C)(3)	0.	8,089.	\$1.92/pound	rood	co individuais
414 Parke Ave. S. of food at with food to distribute	Glundon Community Food Bantry					4130 75 pounds		To provide food pantrics
						_		
	414 Parke Ave. S. Glyndon, MN 56547	41 15 60 0 50		0.			Food	to individuals

(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
Flasher Area Food Pantry					4086 pounds of		To provide food pantries
104 5th Ave E					food at		with food to distribute
Flasher, ND 58535	53-0196617	501(c)(3)	0.	7,845.	\$1.92/pound	Food	to individuals
,				,			
Central Cass Treehouse					4004 pounds of		To provide food pantries
802 5th St N					food at		with food to distribute
Casselton, ND 58012	84-3453213	501(c)(3)	0.	7,688.	\$1.92/pound	Food	to individuals
Tioga Community Food Pantry					3996 pounds of		To provide food pantries
313 S Torning St					food at		with food to distribute
Tioga, ND 58852	41-1568278	501(c)(3)	0.	7 672	\$1.92/pound	Food	to individuals
110gu, ND 50052	41 1300270	501(0)(3)		7,072.	\$1.52/pound	1000	
21st Avenue West Group Home -					3914 pounds of		To provide food pantries
Opportunity Foundation - 1814 21st					food at		with food to distribute
Ave West - Williston, ND 58801	45-0373040	501(c)(3)	0.	7,515.	\$1.92/pound	Food	to individuals
				,			
Hunger Free Food Pantry					3908 pounds of		To provide food pantries
436 1 Ave N.					food at		with food to distribute
New Rockford, ND 58356	41-1568278	501(c)(3)	0.	7,503.	\$1.92/pound	Food	to individuals
Warwick School Pantry					3880 pounds of food at		To provide food pantries
210 4 Ave	47-2229589	G		7 450		Read	with food to distribute to individuals
Warwick, ND 58381	47-2229589	Government	0.	7,450.	\$1.92/pound	Food	
Sargent County Food Pantry					3810 pounds of		To provide food pantries
346 Main Street					food at		with food to distribute
Forman, ND 58032	32-0163793	501(c)(3)	0.	7,315.	\$1.92/pound	Food	to individuals
·				,			
Immigrant Development Center					3786 pounds of		To provide food pantries
810 4th Ave S #100					food at		with food to distribute
Moorhead, MN 56560	20-3368647	501(c)(3)	0.	7,269.	\$1.92/pound	Food	to individuals
Prairie Rose Recovery Center					3656 pounds of		To provide food pantries
202 E Villard St.					food at		with food to distribute
Dickinson, ND 58601	45-0333761	501(c)(3)	0.	7,020.	\$1.92/pound	Food	to individuals

(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
Logan County Food Pantry					3621 pounds of		To provide food pantries
301 Broadway					food at		with food to distribute
Napoleon, ND 58561	45-0333497	501(c)(3)	0.	6 952	\$1.92/pound	Food	to individuals
	10 0000107	501(0)(3)		0,552;	91.927pouna	1000	
Bread of Life Food Pantry - MN					3618 pounds of		To provide food pantries
124 7th St					food at		with food to distribute
Felton, MN 56536	41-1473525	501(c)(3)	0.	6 947.	\$1.92/pound	Food	to individuals
				, =			
Maddock Community Food Pantry					3582 pounds of		To provide food pantries
309 Dakota Ave.					food at		with food to distribute
Maddock, ND 58348	41-1568278	501(c)(3)	0.	6,877.	\$1.92/pound	Food	to individuals
Barnesville Area Food Pantry					3578 pounds of		To provide food pantries
108 Front Street N.					food at		with food to distribute
Barnesville, MN 56514	26-4595572	501(c)(3)	0.	6,870.	\$1.92/pound	Food	to individuals
Northwood Food Pantry					3495 pounds of		To provide food pantries
6 Raymond Street N					food at		with food to distribute
Northwood, ND 58267	35-2388674	501(c)(3)	٥.	6,710.	\$1.92/pound	Food	to individuals
Domestic Violence Crisis Center					3283 pounds of		To provide food pantries
3900 11th Ave. SE					food at		with food to distribute
Minot, ND 58701	45-0343834	501(c)(3)	0.	6,303.	\$1.92/pound	Food	to individuals
Grand Forks District School Pantry					3120 pounds of		To provide food pantries
1412 5 Ave N.					food at		with food to distribute
Grand Forks, ND 58203	47-2229589	Government	0.	5 990	\$1.92/pound	Food	to individuals
Gland FOIRS, ND 30203	47 2225305	Government		5,550.	\$1.527pound	roou	
McLean Family Resource Center					3072 pounds of		To provide food pantries
205 7th Street					food at		with food to distribute
Washburn, ND 58577	45-0363291	501(c)(3)	0.	5 898.	\$1.92/pound	Food	to individuals
			· · ·	2,350.			
May Port Food Pantry					3069 pounds of		To provide food pantries
717 1/2 Bennett Ave.					food at		with food to distribute
Portland, ND 58274	20-4449271	501(c)(3)	0.	5 892.	\$1.92/pound	Food	to individuals

(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
Abused Adult Resource Center -					3014 pounds of		To provide food pantries
Hope House - 315 West Indiana Ave.					food at		with food to distribute
- Bismarck, ND 58504	45-0363127	501(c)(3)	0.	5 787	\$1.92/pound	Food	to individuals
Dibmaick, ND 50501	15 0505127	501(0)(3)		5,707.	91.927 pound	1000	
Sahnish Home					3001 pounds of		To provide food pantries
1728 Mapleton Ave					food at		with food to distribute
Bismarck, ND 58503	23-7115398	501(c)(3)	0.	5 762	\$1.92/pound	Food	to individuals
DIDMATOR, ND 50505	10 /110000	501(0)(0)		5,702.	çı.,, pound	1000	
Drake Anamoose FBLA School Pantry					2957 pounds of		To provide food pantries
411 Main St					food at		with food to distribute
Drake_ ND 58736	47-2229589	Government	0.	5 677	\$1.92/pound	Food	to individuals
					71.51, pound		
Underwood School Pantry					2885 pounds of		To provide food pantries
123 Summit St					food at		with food to distribute
Underwood, ND 58576	47-2229589	Government	0.	5 539	\$1.92/pound	Food	to individuals
				-,	+		
Community Cupboard (Drake)					2845 pounds of		To provide food pantries
969 Hwy 52 E					food at		with food to distribute
Drake, ND 58736	45-0995241	501(c)(3)	0.	5 462	\$1.92/pound	Food	to individuals
	15 0555211	501(0)(0)		5,102.	çı.,, pound	1000	
Berthold Zion Food Pantry					2826 pounds of		To provide food pantries
105 Main Street N					food at		with food to distribute
Berthold, ND 58718	41-1568278	501(c)(3)	0.	5 426	\$1.92/pound	Food	to individuals

Schedule I (Form 990) 2022

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
SFP Program	869	0.		288,237 pounds at \$1.92 / pound	Distribute food to individuals
lealthcare Programs	8966	0.		20,495 pounds at \$1.92 / pound	Distribute food to individuals
				465,094 pounds at \$1.92	
Nobile Distributions	25259	0.	892,980.	/ pound	Distribute food to individuals
Part IV Supplemental Information. Provide the informat	ion required in Part I, line	e 2; Part III, column	(b); and any other ac	dditional information.	
Part I, Line 2:					
han a ditana fara arab ananta ara					
expenditures for each grant are	tracked in	GFFB INVER	itory soltw	are,	
rimarius. Individual food pant	<u>ries store i</u>	nformation	n via sprea	dsheets and	
ntornal data guatoma Namas an	d addmagaaa	of indivia	luala ama a	allogted at	
nternal data systems. Names an	u auuresses		iuais are c	orrected at	

the time food is distributed. Food pantries receiving food must provide

their name, address, EIN, and verification of 501(c)(3) status prior to

being approved to receive food distributions.

 Schedule I (Form 990)
 Great

 Part IV
 Supplemental Information

The number of recipients is estimated based on the highest weekly

participation of individuals requesting food.

SC	HEDULE J	Compensation Information	1	OMB No. 1	1545-00	47	
	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	_	20	20		
•		Compensated Employees		20	22	-	
Dopor	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic	
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe			
Nam	e of the organization		Employer id			mber	
		Great Plains Food Bank	47-2	22958	9		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,				
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or c						
	Travel for com						
	Tax indemnification and gross-up payments						
	Discretionary	spending account Personal services (such as maid, chauffe	ur, chef)				
	If any of the st						
b		on line 1a are checked, did the organization follow a written policy regarding payment or					
•		rovision of all of the expenses described above? If "No," complete Part III to explain		<u>1b</u>			
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,		0			
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2			
3	Indicate which if a	ny, of the following the organization used to establish the compensation of the organization's					
5		ector. Check all that apply. Do not check any boxes for methods used by a related organization s					
		ation of the CEO/Executive Director, but explain in Part III.	UTIO				
	Compensation						
	·	ompensation consultant X Compensation survey or study					
	·	ther organizations X Approval by the board or compensation of	ommittee				
			Johnnittee				
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 re						
а	•	e payment or change-of-control payment?		4a		X	
b		eive payment from a supplemental nonqualified retirement plan?				X	
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		10		X	
		hes 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 of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on				
	contingent on the r	evenues of:					
а	The organization?			5a		X	
		ation?				X	
	If "Yes" on line 5a c	or 5b, describe in Part III.					
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	งท				
	contingent on the n	et earnings of:					
						<u>x</u>	
b	Any related organiz	ation?		6b		X	
		or 6b, describe in Part III.					
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments					
		nes 5 and 6? If "Yes," describe in Part III		7		X	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t	пе				
				8		X	
9		id the organization also follow the rebuttable presumption procedure described in					
		1 53.4958-6(c)?				<u> </u>	
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	ule J (Forn	n 990)) 2022	

47-2229589

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Melissa Sobolik	(i)	145,854.	0.	0.	10,290.	5,160.	161,304.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Part I, Line 3:

A comprehensive compensation study for the CEO is completed by the

Executive Committee of the Board every three years. The study includes

comparability data from other Feeding America food banks that have similar

programming, budgets and staffing size as well as data from other area

nonprofit organizations. The Executive Committee determines recommended

compensation following the annual performance review, which is approved by

the full Board of Directors. All compensation study data is retained as

part of the organization's records, and deliberations and decisions are

recorded in meeting minutes.

SCHEDULE	Μ
(Form 990)	

Department of the Treasury Internal Revenue Service

Part I

1

2

3

4

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10 11

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Noncash Contributions

OMB No. 1545-0047 2022

Open to Public

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

Name of the organization

Revenue S	Service	Go to www.ir	s.gov/Form	990 for instructior	ns and the latest informatio	n. 🔰	Inspection
e of the o	organization					Employer	identification number
		Great Plains	Food	Bank		4'	7-2229589
tl	Types of	Property				·	
·			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) of determining ntribution amounts
Art - Wo	orks of art						
Art - Hi	storical trea	sures					
Art - Fra	actional inte	rests					
Books	and publica	tions					
Clothin	g and house	ehold goods					
Cars ar	nd other veh	icles					
Boats a	and planes						
Intellec	tual propert	у					
Securit	ies - Publicl	/ traded	X	1	44,453.	Avg High,	/Low
Securit	ies - Closely	held stock					
Securit	ies - Partner	ship, LLC, or					
trust in	terests						
Securit	ies - Miscell	aneous					
Qualifie	ed conserva	tion contribution -					
Historic	c structures						
Qualifie	ed conserva	tion contribution - Other					
Real es	state - Resid	ential					
Real es	state - Comn	nercial					
Real es	state - Other						
Collect	ibles						
			X	99999999	19,162,703.	Per lb va	aluation
		supplies					
	fic specimer						

21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other (Food/General Wa)	X	4	47	,338	.Prices	of	simi	lar	pr
26	Other ()									
27	Other ()									
28	Other (
29	Number of Forms 8283 received by the organiz	zation during	g the tax year for co	ontributions						
	for which the organization completed Form 82	83, Part V, D	Donee Acknowledg	ement	29				0	
									Yes	No
30a	During the year, did the organization receive by	y contributio	on any property rep	orted in Part I, line	s 1 thro	ugh 28, that it				
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to	be use	d for				
	exempt purposes for the entire holding period?	?						30a		X
b	If "Yes," describe the arrangement in Part II.									
31	Does the organization have a gift acceptance p	policy that re	equires the review o	of any nonstandard	d contrib	outions?		31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell	noncas	h				
	contributions?							32a		X
b	If "Yes," describe in Part II.									
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column	(a) is ch	necked,				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

describe in Part II.

	M (Form 990)						
Part II	Supple	mental	Informat	ion. 🖻	Provide	the inform	nation real

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

Food inventory contributions were based on the number of pounds

contributed, using a valuation of \$1.92 per pound. All other

contributions are determined based on the number of contributors.

SCHEDULE O (Form 990)

Name of the organization

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.



47-2229589

Great Plains Food Bank

Form 990, Part I, Line 1, Description of Organization Mission:

end hunger through community partnerships. Our vision is a hunger-free

North Dakota and western Minnesota. Both our mission and vision are

fueled by our values of passion, service and innovation.

Form 990, Part III, Line 4a, Program Service Accomplishments: partner agencies (food pantries, shelters, soup kitchens, and other charitable feeding programs) operating in 118 communities who are on the front lines providing food to our neighbors in need. Our direct service programs allow the GPFB to fill gaps in service and bring food to people in need through a variety of targeted programs. VOLUNTEERS are the backbone of our operation. Their service enables us to distribute food efficiently. Last year 3,905 VOLUNTEERS shared 12,269 hours' worth of time with the GPFB, repackaging bulk items, packing food packages, handing out food, sorting food drive items, and performing administrative tasks. The GPFB is supported by thousands of FINANCIAL DONORS who keep our organization operational. For every \$1 donated, the GPFB can distribute food for 2 meals. We rely on COMMUNITY CHAMPIONS in every corner of the state to help us design and implement community-based services that tackle both the immediate hunger needs of our neighbors, and long-term root causes of hunger. And finally, we collaborate with our NEIGHBORS experiencing hunger by regularly seeking their guidance and feedback to improve services, reduce barriers, and adapt programs to better meet their needs.

Schedule O (Form 990) 2022	Page 2				
Name of the organization Great Plains Food Bank	Employer identification number 47-2229589				
	47-2229309				
The Great Plains Food Bank Senior Food Pack Program is a					
commodity-based program that provides nutritionally balanc	ed,				
shelf-stable food packages to low-income seniors, which is	also				
supplemented with perishable products provided by the GPFB. Seniors					
aged 60+ with incomes of less than 130 percent of the federal poverty					
line are eligible for enrollment in the program. The senior food pack					
program served 36 communities throughout the state of North Dakota.					
During FY23, the GPFB distributed food for 240,198 meals t	o 869				
eligible seniors.					

Form 990, Part III, Line 4c, Program Service Accomplishments: FY23, the GPFB partnered with 145 schools to provide a total of 141,839 backpacks to 4,132 children.

The Great Plains Food Bank School Pantry Program is simply a food pantry located in a school, ensuring families and youth in need of assistance have easy access to food and other necessities. In FY23, the GPFB partnered with 91 schools in 22 communities to provide food for 138,759 meals to students and their families.

The Great Plains Food Bank Youth Summer Meals program is designed to feed low-income children over the summer when they don't have access to school meals. The GPFB operates meals sites in low-income neighborhoods to provide well-balanced, nutritious meals to any child under age 18, free of charge. During the 2023 summer, GPFB's youth summer meal program provided 10,640 meals to 2,319 children at 15 meal sites across North Dakota.

Schedule O (Form 990) 2022	Page 2				
Name of the organization Great Plains Food Bank	Employer identification number 47-2229589				
	1, 222,505				
Form 990, Part III, Line 4d, Other Program Services:					
MOBILE FOOD PANTRY: The GPFB semi-trucks also serve as a					
food-pantry-on-wheels reaching food insecure individuals 1	iving in or				
near underserved communities. Truckloads of highly nutritious fresh					
produce along with boxes of shelf-stable food products are brought into					
communities and are met by volunteers who unload the food directly into					
client's cars. In FY23, the Great Plains Food Bank Mobile Food Pantry					
distributed food for 349,126 meals to families across North Dakota and					
Clay County, Minnesota.					

ENDING HUNGER 2.0: In 2016 GPFB took the next bold step in ending hunger with a new initiative called Ending Hunger 2.0 (EH2.0). Focused on addressing the root causes of hunger through new solutions, EH2.0 goes beyond food to look holistically at the issue of hunger. It allows GPFB to continue our core work of feeding people today through GPFB's partner network and direct service programs, while simultaneously working upstream to decrease the need and improve food security. EH2.0 works to bring sustainable, long-term solutions to hunger through advocacy, research, and community-based solutions.

In 2017, we launched the Great Plains Food Bank Wellness Pantry Program, putting healthy food pantries into clinics. There is a growing trend within the healthcare realm to see food/nutrition as medicine and as treatment for many chronic diseases. In FY23, we worked with 7 healthcare partners at 18 sites and distributed food for 59,098 meals.

SNAP Outreach: In partnership with the state of North Dakota, the GPFB

offers outreach to individuals who may be eligible for the Supplemental
232212 10-28-22
Schedule O (Form 990) 2022

Name of the organization	Employer identification number
Great Plains Food Bank	47-2229589
Nutrition Assistance Program (SNAP), formerly known a	as food stamps. The
GPFB employs 1 full-time SNAP Manager and 2 full-time	e SNAP Outreach
Coordinators who screen individuals for benefits and	offer application
assistance.	

Form 990, Part VI, Section A, line 1a:

Per the organization's bylaws, the Executive Committee shall be composed of the officers of the Corporation, the immediate past Chair, and up to two (2) additional voting directors. The CEO shall serve as a nonvoting ex-officio member. The Executive Committee shall have the powers and authority of the Board in the management of the business affairs of the Corporation in the intervals between meetings provided such actions are consistent with the directions and authorization of the Board to the Executive Committee. The Executive Committee shall coordinate the annual performance review of the CEO and be responsible for all Board level issues related to personnel.

The Board approved Executive Committee Charter further outlines the role of the committee, including what the committee has and does not have power or authority to do.

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Form 990, Part VI, Section B, line 11b:
The Form 990 is reviewed and approved by the Finance Committee, which
presents the document to the full Board to be accepted prior to filing. A
complete copy of the document is provided to each member.
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Form 990, Part VI, Section B, Line 12c:

Schedule O (Form 990) 2022	Page 2			
Name of the organization Great Plains Food Bank	Employer identification number 47-2229589			
The conflict of interest policy covers each director, prin	ciple officer,			
and member of a committee with Board delegated powers. The	Executive			
Committee or Board of Directors makes a determination whet	her a conflict is			
deemed to exist. The Executive Committee or Board of Directors review				
conflicts that are deemed to exist. Restrictions imposed upon the person				
with the conflict are dependent on the situation, and may	require recusal			
from voting on the matter, resignation or other appropriate disciplinary or				
corrective action. All Board members review the policy annually and				
complete a Conflict of Interest Annual Affirmation and Dis	closure form.			

Form 990, Part VI, Section B, Line 15a:

A comprehensive compensation study for the CEO is completed by the Executive Committee of the Board every three years per the organization's compensation policy, with updated information reviewed in years when a full study is not conducted. The study includes comparability data from other Feeding America food banks that have similar programming, budgets and staffing size as well as data from other area nonprofit organizations. The CEO receives cost-of-living increases and is eligible for merit increases approved by the Board for all employees of the organization in years when a full study is not conducted. The Executive Committee determines recommended compensation following the annual performance review, which is approved by the full Board of Directors. All compensation study data is retained as part of the organization's records, and deliberations and decisions are recorded in meeting minutes.

Form 990, Part VI, Section C, Line 19:

Governing documents and conflict of interest policy are available upon