Form **990**

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2023

Open to Public

Department of the Treasury

A For the 2023 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Address change HUNGER ENDS HERE Name 46-0967063 HARVEST PACK Doing business as change Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated PO BOX 17315 612-385-4190 1,052,791. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended 55417 MINNEAPOLIS, MN H(a) Is this a group return return
Application
pending F Name and address of principal officer: WILLIAM MCNALLY Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions WWW.HARVESTPACK.ORG H(c) Group exemption number **K** Form of organization: X Corporation L Year of formation: 2012 M State of legal domicile: MN Association Other Part I Summary Briefly describe the organization's mission or most significant activities: ESTABILISHED IN 2012, HARVEST Activities & Governance PACK IS A NON-PROFIT ORGANIZATION COMMITTED TO BRINGING FOOD TO if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 152 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 305,676. 294,610. Contributions and grants (Part VIII, line 1h) 320,196. 703,405. Program service revenue (Part VIII, line 2g) 2,546. 11,119. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 15,371. 43,657. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 643,789. ,052,791. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,095. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 205,331. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 360,385. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 423,422. 500,060. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 631,848. 860,445. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 11,941. 192,346. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 465,393. 563,814. Total assets (Part X, line 16) 194,537. 100,611 21 Total liabilities (Part X, line 26) 三年 270,856. Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign William McNally 25/11/24 WILLIAM MCNALLY, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature MATT PILLSBURY 11/07/24 P01565609 self-employed Paid CARPENTER, EVERT & ASSOCIATES, Firm's EIN 41-1534805 Preparer Firm's name 7760 FRANCE AVE S, SUITE 940 Use Only Phone no. (952) 831-0085BLOOMINGTON, MN 55435

X | Yes

	Chack if Cahadula O cantains a reasonate are note to any line in this Dout III	X
4	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: HARVEST PACK'S MISSION IS BRINGING FOOD TO THOSE IN NEED, WITH THE	
	HELP OF PEOPLE WHO CARE. HARVEST PACK ENVISION A WORLD WHERE HEALTHY	
	FOOD IS ACCESSIBLE TO EVERYONE.	
	TOOD ID ACCESSIBLE TO EVERTONE.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2		₹ No
	prior Form 990 or 990-EZ?	7 INO
2	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	₹ N.a
3		Z NO
	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
4		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported. (Code:) (Expenses \$ 754,343. including grants of \$) (Revenue \$ 701,67	, o
4a	(Code:) (Expenses \$	
	FOOD TO EVERY TABLE. HARVEST PACK UTILIZE VOLUNTEERS TO PACK MEALS THA	.T.
	HAVE BEEN FORMULATED BY FOOD SCIENTISTS TO PROVIDE A RICH SOURCE OF	
	EASILY DIGESTIBLE PROTEIN, CARBOHYDRATES, AND VITAMINS NEEDED BY A	
	MALNOURISHED CHILD'S BODY AND MIND. HARVEST PACK'S MEALS OFFER ALL NIN	IΕ
	OF THE ESSENTIAL AMINO ACIDS REQUIRED FOR COMPLETE NUTRITION. IN 2023	
	HARVEST PACK PACKAGED 3,167,551 MEALS AND DONATED 2,764,599 MEALS	
	LOCALLY AND 510,088 MEALS INTERNATIONALLY, WHICH INCLUDED 107,136 MEAL	<u>ıS</u>
	THAT WERE PACKED IN 2022 AND STORED IN THE WAREHOUSE PENDING	
	DISTRIBUTION. LIMITED ACCESS TO FRESH PRODUCE IS A MAJOR PROBLEM	
	WITHIN COMMUNITIES SUFFERING FROM FOOD INSECURITY. LOW INCOME	
	COMMUNITIES LIVING IN FOOD DESERTS HAVE LIMITED ACCESS TO FRESH,	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 754, 343.	
	· · · · · · · · · · · · · · · · · · ·	

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Form 990 (2023) HUNGER ENDS HERE 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		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		1
8	, ,			x
•	Schedule D, Part III	8		
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?			3,7
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
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		Х
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	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	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	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZU		
J		12b		X
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the appropriation projection of the control of the Light of the Light of the Light of the Control			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			X
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
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	ا ا		_v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X

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Form 990 (2023) HUNGER ENDS HERE
Part IV Checklist of Required Schedules (continued)

	· (GOTATIAGA)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		100	110
	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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? 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		<u> </u>
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			l
	Schedule L, Part I	25b		<u> X</u>
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		<u> </u>
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			37
	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	00-		
L	"Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	28c		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
00	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? <i>If</i> "Yes," <i>complete</i>	 		
-	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		х
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		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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?			1
	Note: All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			Ш
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		37	
	(gambling) winnings to prize winners?	1c	N OOO	(0000)
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Form 990 (2023) HUNGER ENDS HERE
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	11			
	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		•	2b	х	
	D. I.			За		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		Х
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 A	Accou	nts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction	·	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne org	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions c	r gifts			
	were not tax deductible?			6b		
	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 se	rvices	provided to the payor?	7a		_X_
				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	luired			7.7
	to file Form 8282?	 I		7с		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d		_		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		ot?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of qualified intellectual grant and did the appropriate of the Contribution of qualified intellectual grant and did the appropriate of the Contribution of		200	7f		
_	If the organization received a contribution of qualified intellectual property, did the organization file For			7g		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			7h		
		•		8		
	Sponsoring organizations maintaining donor advised funds.			Ü		
а				9a		
	Did the constant of the control of the first tent of the control o			9b		
	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
	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	า 1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	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.					
	Enter the amount of reserves the organization is required to maintain by the states in which the	1	1			
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	130				v
				14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule the explanation on Schedule the explanation of the explanatio			14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune			45		Х
	excess parachute payment(s) during the year?			15		Λ
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investmer	nt inco	me?	16		Х
	is the organization an educational institution subject to the section 4900 excise tax on het investmen	IL ILICO	me?	16		22
	If "Yes," complete Form 4720, Schedule O.	ctivitio	•			
17				17		

HUNGER ENDS HERE 46-0967063 Page **6** Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management		ı	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 6			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			v
•	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	_		х
4	of officers, directors, trustees, or key employees to a management company or other person?	<u>3</u> 4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
5 6		6		X
о 7а	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	-		- 25
1 a	more members of the governing body?	7a		х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	- 'a		
b	persons other than the governing body?	7b		х
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		х
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		Х
	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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
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	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?		7.7	
	The organization's CEO, Executive Director, or top management official	15a	Х	77
b	Other officers or key employees of the organization	15b		X
10-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
ıva	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-		Х
L	taxable entity during the year? If "Yes " did the expanization follows a written policy or procedure requiring the organization to evaluate its participation.	16a		
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100	l	
17	List the states with which a copy of this Form 990 is required to be filed MN			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.	-/··y/		
	X Own website Another's website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
	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			
	WILLIAM MCNALLY - 612-385-4190			
	PO BOX 17315, MINNEAPOLIS, MN 55417			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See 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.

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

- 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.

(A)	(B)	(C) Position					our	(D)	(E)	(F)
Name and title	Average hours per week	(do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other				
	(list any hours for related organizations below line)	Individual trustee or director	Individual trustee or director Institutional trustee Officer Key employee Highest compensated employee		Highest compensated employee Former		the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations	
(1) WILLIAM MCNALLY	40.00							00.043	_	
EXECUTIVE DIRECTOR	1 00			Х		┝		92,843.	0.	0.
(2) ENRIQUE BARRERA BOARD MEMBER	1.00	х						0.	0.	_
(3) TANYA BECKWITH	1.00	Λ						0.	0.	0.
SECRETARY	1.00	Х		х				0.	0.	0.
(4) SAMANTHA JUNEAU	1.00	Λ		^		\vdash		0.	0.	· ·
BOARD MEMBER	1.00	Х						0.	0.	0.
(5) ATHANAS MCHA	1.00								•	•
BOARD MEMBER		Х						0.	0.	0.
(6) DOUG RUDE	1.00									
CHAIR		Х		Х				0.	0.	0.
(7) DENISE WILLENBRING	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) MERRY GRANDE	1.00									
BOARD MEMBER		Х						0.	0.	0.

Form 990 (2023) HUNGER EN									46-09	96706	3 P	age 8
Part VII Section A. Officers, Directors, Trus (A) Name and title	tees, Key Emp (B) Average			(C Posi	C) ition	1		ompensated Employee (D) Reportable	(continued) (E) Reportable		(F)	ed
	hours per week (list any hours for related organizations below line)	box,	unles	ss per	rson is irecto	Highest compensated transported transporte	an tee)	compensation from the organization (W-2/1099-MISC/ 1099-NEC)	compensatio from related organizations (W-2/1099-MIS 1099-NEC)	on amount other compensa SC/ from the		ation le tion ted
1b Subtotal								92,843.		0.		0.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)								92,843.		0.		0.
Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable)		0
3 Did the organization list any former officer,	director, truste	ee, k	ey e	empl	oye	e, or	hig	hest compensated emp	loyee on		Yes	No
line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the su											3	X
and related organizations greater than \$150Did any person listed on line 1a receive or a),000? If "Yes,	" coi	mple	ete S	Sche	edule	J f	or such individual		4	4	Х
rendered to the organization? If "Yes." com Section B. Independent Contractors	•				•			•			5	Х
Complete this table for your five highest con-	•	•								ensation	n from	
the organization. Report compensation for (A) Name and business			NE		ili i C	VVII		(B) Description of s		Com	(C)	n .
		110	7141					2 333., p. 13. 1 3				··-
-												
2 Total number of independent contractors (in	ncluding but no	ot lin	nited	d to t	thos	se lis	ted	above) who received mo	ore than			
\$100,000 of compensation from the organization	zation				C)				Fo	rm 990 ((2023)

332008 12-21-23

Par

rt '	VIII	Statement of	f F	₹е١	/en	ue

		Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
			 					sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	_	Federated campaigns	1a					
Gra	b		1b					
ts,		•	1c					
흝		Related organizations	1d					
ns, Sim		Government grants (contributions)	1e					
rtio er S	f	All other contributions, gifts, grants, and		204 610				
ĔĦ		similar amounts not included above		294,610.				
ont nd (g		1g \$		294,610.			
O e	<u>n</u>	Total. Add lines 1a-1f		Business Code	294,010.			
	0.0	MEAL PACKS		624210	701,678.	701 678		
/ice	2 a	PACKING EVENTS		624210	1,727.	701,678.		
Program Service Revenue	b			024210	1,727	1,7276		
m S	c d							
gra Re	u _							
Pro	f	All other program service revenue						
	a a	Total. Add lines 2a-2f			703,405.			
	3	Investment income (including divide			·			
				11,119.	11,119.			
	4	Income from investment of tax-exen						
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents 6a						
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of (i) S	Securities	(ii) Other				
		assets other than inventory 7a						
	b	Less: cost or other basis						
nue		and sales expenses 7b						
Revenue		Gain or (loss) 7c						
Ä,		Net gain or (loss)						
ther	8 a	Gross income from fundraising events (_					
0		including \$	_ of					
		contributions reported on line 1c). S	I .					
	h	Part IV, line 18 Less: direct expenses						
		Net income or (loss) from fundraisin						
		Gross income from gaming activitie						
	- u	Part IV, line 19	I .					
	b	Less: direct expenses						
		Net income or (loss) from gaming a						
		Gross sales of inventory, less return						
		and allowances	10a					
	b	Less: cost of goods sold	I					
	С	Net income or (loss) from sales of in	ventory					
g				Business Code				
90 n	11 a	OTHER INCOME		900019	43,657.	43,657.		
lan¢ enu	b							
Miscellaneous Revenue	С							
Mis		All other revenue			12 657			
		Total. Add lines 11a-11d			43,657. 1,052,791.	758,181.	0.	0.
	12	Total revenue. See instructions			±,UJ4,/9±•	130,101.	U •	5 000 (2222)

332009 12-21-23

Form 990 (2023) HUNGER ENDS HERE Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a respon				(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
•	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	92,843.	81,181.	10,828.	834.
6	trustees, and key employees	72,043.	01,101.	10,020.	034.
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7		240,363.	210,171.	28,031.	2,161.
8	Other salaries and wages Pension plan accruals and contributions (include	240,3034	220,2120	20,031.	2,101
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	27,179.	23,765.	3,170.	244.
11	Fees for services (nonemployees):	= : , = : 3 0	==,	-,	
	Management				
b	Legal	9,572.		9,572.	
	Accounting			·	
d					
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	19,531.			19,531.
12	Advertising and promotion	3,402.	400.		3,002.
13	Office expenses	7,757.	1,153.	6,128.	476.
14	Information technology				
15	Royalties	22 552	20 452	1 605	
16	Occupancy	33,758.	32,153.	1,605.	
17	Travel	45,447.	45,447.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			+	
20	Interest Payments to affiliates				
21 22	Payments to affiliates	2,714.		2,714.	
23	Insurance	11,611.		11,611.	
23 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.)	044.050	044 050		
а	COST OF GOODS SOLD	244,872.	244,872.		
b	FREIGHT & DELIVERY	105,535.	105,535.		
С	EVENT EXPENSE	6,074.	6,074.		2 524
d	BANK & CC PROCESSING CH	5,049.	2,525.	2 650	2,524.
e	All other expenses	4,738. 860,445.	1,067.	3,658.	13. 20 70F
<u>25</u>	Total functional expenses. Add lines 1 through 24e	000,443.	754,343.	11,311.	28,785.
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)				
	II TOHOWING OUT 30-2 (NOO 300-720)				Form 990 (2022)

Form 990 (2023)
Part X | Balance Sheet

4 5 6 7 8 9	Cash - non-interest-bearing Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any current of trustee, key employee, creator or founder, subscontrolled entity or family member of any of the Loans and other receivables from other disqua under section 4958(f)(1)), and persons describe Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges	or former c stantial co ese person lified person	fficer, director, htributor, or 35% s	(A) Beginning of year 284,112. 51,086. 0.	1 2 3 4	(B) End of year 296,692 29,921 29,412
2 3 4 5 6 7 8 9	Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any current of trustee, key employee, creator or founder, subscontrolled entity or family member of any of the Loans and other receivables from other disquaunder section 4958(f)(1)), and persons described Notes and loans receivable, net Inventories for sale or use	or former of stantial con ese person dified person d in section	fficer, director, ntributor, or 35% s	Beginning of year 284,112. 51,086.	3 4	296,692 29,921
2 3 4 5 6 7 8 9	Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any current of trustee, key employee, creator or founder, subscontrolled entity or family member of any of the Loans and other receivables from other disquaunder section 4958(f)(1)), and persons described Notes and loans receivable, net Inventories for sale or use	or former of stantial con ese person dified person d in section	fficer, director, ntributor, or 35% s	51,086.	3 4	29,921
3 4 5 6 7 8 9	Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any current of trustee, key employee, creator or founder, subscontrolled entity or family member of any of the Loans and other receivables from other disquaunder section 4958(f)(1)), and persons described Notes and loans receivable, net Inventories for sale or use	or former of stantial con ese person dified person d in section	fficer, director, ntributor, or 35% s		3 4	29,921 29,412
4 5 6 7 8 9	Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any current of trustee, key employee, creator or founder, subscontrolled entity or family member of any of the Loans and other receivables from other disquaunder section 4958(f)(1)), and persons describe Notes and loans receivable, net Inventories for sale or use	or former of stantial column ese person dified person d in section	fficer, director, ntributor, or 35% s		4	29,921 29,412
4 5 6 7 8 9	Accounts receivable, net Loans and other receivables from any current of trustee, key employee, creator or founder, substance controlled entity or family member of any of the Loans and other receivables from other disquatunder section 4958(f)(1)), and persons describe Notes and loans receivable, net Inventories for sale or use	or former of stantial con ese person lified person ad in section	fficer, director, htributor, or 35% s	0.		29,412
5 6 7 8 9	Loans and other receivables from any current of trustee, key employee, creator or founder, subscontrolled entity or family member of any of the Loans and other receivables from other disquaunder section 4958(f)(1)), and persons describe Notes and loans receivable, net Inventories for sale or use	or former of stantial contesse person lified personed in section	fficer, director, htributor, or 35% s uns (as defined		5	
7 8 9	controlled entity or family member of any of the Loans and other receivables from other disqua under section 4958(f)(1)), and persons describe Notes and loans receivable, net Inventories for sale or use	ese person lified perso ed in sectio	ns (as defined		5	
7 8 9	Loans and other receivables from other disqua under section 4958(f)(1)), and persons describe Notes and loans receivable, net Inventories for sale or use	lified perso ed in section	ons (as defined		5	
7 8 9	under section 4958(f)(1)), and persons describe Notes and loans receivable, net Inventories for sale or use	d in section	· · · · · · · · · · · · · · · · · · ·			
8 9	Notes and loans receivable, net Inventories for sale or use		n 4958(c)(3)(B)			
8 9	Inventories for sale or use		· / / / / F		6	
9	B				7	
	Prepaid expenses and deferred charges			66,891.	8	109,256
10a				3,024.	9	24,804
	Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D		17,403. 11,174.			
b				3,898.	10c	6,229
11			11			
12		52,182.		63,300		
13						
14	Intangible assets		4 000		4 000	
15	Other assets. See Part IV, line 11					4,200
16						563,814
17				24,51/.		25,064
18		170 020		75 547		
19		1/0,020.		75,547		
20						
21				21		
22						
		•				
23						
					24	
25						
		-	•		25	
26				194 537		100,611
20				131,337.	20	100,011
		CON HOLO				
27				270,856.	27	463,203
28				,		
		500, 01100				
29	•				29	
30						
31						
32				270.856.		463,203
						563,814
12 14 14 16 16 17 17 18 19 20 22 22 22 22 22 23 24 24 25 26 26 27 27 28 28 28 28 28 28 28 28 28 28 28 28 28	1 2 3 3 4 5 6 7 8 9 0 1 1 2 3 4 5 6 7 8 9 0 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related. See Part IV, line Intangible assets Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal for Accounts payable and accrued expenses Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Loans and other payables to any current or for trustee, key employee, creator or founder, subscontrolled entity or family member of any of the Secured mortgages and notes payable to unrelate Other liabilities (including federal income tax, parties, and other liabilities not included on line of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, chand complete lines 27, 28, 32, and 33. Net assets without donor restrictions Organizations that do not follow FASB ASC 9 and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or expected the section of the Retained earnings, endowment, accumulated in Total net assets or fund balances	Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 33) Accounts payable and accrued expenses Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Loans and other payables to any current or former officer trustee, key employee, creator or founder, substantial cor controlled entity or family member of any of these person Secured mortgages and notes payable to unrelated third Unsecured notes and loans payable to unrelated third parties, and other liabilities not included on lines 17-24). Of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment Retained earnings, endowment, accumulated income, or Total net assets or fund balances	Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Intangible assets Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 33) Accounts payable and accrued expenses Grants payable and accrued expenses Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Intangible assets Other assets. See Part IV, line 11 Intangible assets Other assets. See Part IV, line 11 Intangible assets. Add lines 1 through 15 (must equal line 33) Accounts payable and accrued expenses Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets Intangible assets Other assets. See Part IV, line 11 Intangible assets. Add lines 1 through 15 (must equal line 33) Intangible assets. Add lines 1 through 15 (must equal line 33) Intangible assets. Add lines 1 through 15 (must equal line 33) Intangible assets. Add lines 1 through 15 (must equal line 33) Intangible assets. Add lines 1 through 15 (must equal line 33) Intangible assets. Add lines 1 through 15 (must equal line 33) Intangible assets. Add lines 1 through 15 (must equal line 33) Intangible assets. Add lines 1 through 15 (must equal line 33) Intangible assets. Add lines 1 through 15 (must equal line 33) Intangible assets intangible assets intangible assets into asset intangible assets intangible assets into asset intangible asset intangible asset into asset intangible asset intangible asset into asset intangible asset into asset

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,05		
2	Total expenses (must equal Part IX, column (A), line 25)	2		0,4	
3	Revenue less expenses. Subtract line 2 from line 1	3		2,3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	27	0,8	<u>56.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			1.
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	46	3,2	03.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	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	Х	
	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 Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2023)

SCHEDULE A

(Form 990)

<u>Total</u>

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

HINGER FNDS HERE

Employer identification number

			ек еимо цеі				l l	0-0907003
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.	
he o	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, cl	heck 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	\Box	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).						
4	Ħ	A medical research organization					•	the hospital's name.
•		city, and state:	anon operated in ee.	, amonom man a moophan		000110		and neephane manne,
5		An organization operated for	or the benefit of a col	lege or university owned	l or operat	ed by a go	vernmental unit describe	ad in
5	ш			lege of university owned	or operat	ed by a go	verninental unit describe	5 u II I
_	$\overline{}$	section 170(b)(1)(A)(iv). (C						
6		A federal, state, or local gov	-					
7	X	An organization that norma	lly receives a substar	ntial part of its support fr	om a gove	ernmental i	unit or from the 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	t II.)			
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a land-grant	college
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of the college	or
		university:						
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membership fees, and	d gross receipts from
		activities related to its exem	•	• •				-
		income and unrelated busir	•	•			= = =	-
		See section 509(a)(2). (Con		(1000 00011011 011 111/1) 110			ou by the organization a	
11		An organization organized a	•	valy to test for public sat	faty Saa	saction 50)Q(a)(A)	
12	H	An organization organized a	•	•	•			nurnosos of one or
12	ш	more publicly supported or	•	•	-		· · · · · · · · · · · · · · · · · · ·	
								SHECK THE DOX OH
		lines 12a through 12d that	* *				· · · · ·	at tal
а				•	•	-		
		the supported organization			majority o	of the direc	tors or trustees of the su	ipporting
	_	organization. You must o	-					
b		■ Type II. A supporting org.	anization supervised	or controlled in connect	ion with it	s supporte	d organization(s), by hav	ring
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С			grated. A supporting	g organization operated	in connect	tion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions)	. You must complete I	Part IV, Se	ctions A,	D, and E.	
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	rith its supported organiz	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	uirement and an attentiv	/eness
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga	nization received a v	written determination from	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or					<i>y</i> ,	
f	Fnte	er the number of supported o		, 5	5 5			
q		ride the following information		d organization(s).				
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
				above (oce mondonomy)				

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	147,634.	88,465.	127,047.	625,872.	998,015.	1987033.
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	147,634.	88,465.	127,047.	625,872.	998,015.	1987033.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						1987033.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	147,634.	88,465.	127,047.	625,872.	998,015.	1987033.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	257.	321.	1.	2,546.	11,119.	14,244.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)			12,628.	122,468.		135,096.
11	Total support. Add lines 7 through 10						2136373.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2023 (I	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	93.01 %
	Public support percentage from 2022					15	77.17 %
16a	33 1/3 % support test - 2023. If the o	organization did no	t check the box or	line 13, and line 1	14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	•	• •				
17a	10% -facts-and-circumstances test	- 2023. If the orga	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organization	n qualifies as a pu	blicly supported or	rganization		
b	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, chec	ck this box and st	t op here. Explain ir	n Part VI how the	
	organization meets the facts-and-circu		-				
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	a, 16b, 17a, or 17b	o, check this box ar		
						Calaaduda A	(Form 990) 2023

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

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

Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and						
,	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the 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						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	(a) 2019	(b) 2020	(6) 2021	(u) 2022	(6) 2023	(i) iotai
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	1					
Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is requirely certified on.						
11 Net income from unrelated business activities not included on line 10b,						
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital 						
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 		rst, second, third,	fourth, or fifth tax y	year as a section 5	501(c)(3) organizatio	on,
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here 	the organization's fi	· · · · · · · · · · · · · · · · · · ·	· ·	,	() ()	<i>'</i>
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 	the organization's fi	centage	,	,		<i>'</i>
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 	the organization's filic Support Per	rcentage livided by line 13, o		,	15	%
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 	the organization's final	rcentage livided by line 13, o				%
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Investigation 	the organization's fine Support Per (line 8, column (f), co 2 Schedule A, Part	rcentage livided by line 13, of lill, line 15 Percentage	column (f))		15 16	%
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Investment income percentage for 202 	the organization's fine Support Per (line 8, column (f), column (f), column the state of the sta	rcentage livided by line 13, of lill, line 15 Percentage mn (f), divided by li	column (f))		15 16	% %
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Inve 17 Investment income percentage from 202 18 Investment income percentage from 	the organization's fi lic Support Per (line 8, column (f), c 2 Schedule A, Part stment Income 2023 (line 10c, colur 2022 Schedule A,	rcentage livided by line 13, of lll, line 15 Percentage mn (f), divided by li Part III, line 17	column (f))		15 16 17 18	% % %
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Inve 17 Investment income percentage from 202 18 Investment income percentage from 19a 33 1/3% support tests - 2023. If the 	the organization's filic Support Per (line 8, column (f), c 2 Schedule A, Part estment Income 2023 (line 10c, column 2022 Schedule A, e organization did r	rcentage livided by line 13, of the line 15 Percentage mn (f), divided by li Part III, line 17 not check the box of	ine 13, column (f))	2 15 is more than 3	15 16 17 18 33 1/3%, and line 17	% % %
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Investment income percentage from 202 18 Investment income percentage from 19a 33 1/3% support tests - 2023. If the more than 33 1/3%, check this box and 100 percentage from 19a 33 1/3% support tests - 2023. 	the organization's final stop here. The	rcentage livided by line 13, of the line 15 e Percentage mn (f), divided by line 17 not check the box organization quali	ine 13, column (f)) on line 14, and line fies as a publicly s	15 is more than 3	15 16 17 18 33 1/3%, and line 17	% % % % 7 is not
 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Pub 15 Public support percentage for 2023 16 Public support percentage from 202 Section D. Computation of Inve 17 Investment income percentage from 202 18 Investment income percentage from 19a 33 1/3% support tests - 2023. If the 	the organization's final stop here. The organization did rand stop here. The	rcentage livided by line 13, of lill, line 15 Percentage mn (f), divided by line 17 not check the box of organization qualitation check a box or	on line 14, and line fies as a publicly so line 14 or line 19a	e 15 is more than 3 upported organiza	15 16 17 18 33 1/3%, and line 17 ation	% % % % 7 is not

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Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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")? *If* "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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? 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 disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? 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.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
30		
10a		
 10b	- 000\	

Schedule A (Form 990) 2023

Par	t IV Supporting Organizations (continued)			
			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		
	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		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	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,			
S-0-1	supervised, or controlled the supporting organization.	2		
Seci	tion C. Type II Supporting Organizations			
			Yes	No
	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			
0	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations			
			Yes	No
	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. tion E. Type III Functionally Integrated Supporting Organizations	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ıs).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instruction		
	Activities Test. Answer lines 2a and 2b below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on I	Nov. 20, 1970 (explain in l	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		·	•
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):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting orga	nization (see

Schedule A (Form 990) 2023

instructions).

Schedule A (Form 990) 2023

e Excess from 2023

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

HUNGER ENDS HERE

Employer identification number 46-0967063

Pai	Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		milar Funds or Ad	ccounts. Complete if the
		(a) Donor advised	I funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held	d in donor advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any	other purpose confer	ring
	impermissible private benefit?			Yes No
Pai	T II Conservation Easements. Complete if the organization	anization answered "Yes	on Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreati	ion or education)	Preservation of a histo	orically important land area
	Protection of natural habitat		Preservation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribu	tion in the form of a co	onservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic structure.			2c
d	Number of conservation easements included on line 2c acquir	ed after July 25, 2006, a	nd not	
	on a historic structure listed in the National Register	•		2d
3	Number of conservation easements modified, transferred, rele			ization during the tax
	year			
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period	odic monitoring, inspecti	on, handling of	
	violations, and enforcement of the conservation easements it l	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and	d enforcing conservation	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enfo	orcing conservation ea	sements during the year
8	Does each conservation easement reported on line 2d above s	satisfy the requirements	of section 170(h)(4)(B)(i	
	and section 170(h)(4)(B)(ii)?			X Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenu	ue and expense statem	nent and
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's	inancial statements th	at describes the
	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of	Art, Historical Trea	sures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its reve	nue statement and bal	ance sheet works
	of art, historical treasures, or other similar assets held for publ	ic exhibition, education,	or research in furthera	nce of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that desc	ribes these items.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue	statement and balance	e sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furtherance	e of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(m)			•
2	If the organization received or held works of art, historical trea-	sures, or other similar as	sets for financial gain,	provide
	the following amounts required to be reported under FASB AS			
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2023

	rt III Organizations Maintaining Col		t. Histo	orical Tre	asures. o	r Other	Similar		(conti		age 🗲
3	Using the organization's acquisition, accession,								(COITE	iueu)	
Ū	collection items (check all that apply).	and other record	o, oncon	carry or the r	onowing that	. make sig	i iiiodi it d	100 01 110			
а											
b	Scholarly research	6			nange progra						
C	Preservation for future generations		,	Otrici							
4	Provide a description of the organization's colle	ctions and explain	n how th	ev further th	e organizatio	n's evem	nt nurnos	a in Part	XIII		
5	During the year, did the organization solicit or re							be iii i ait.	AIII.		
3	to be sold to raise funds rather than to be maint								Yes		No
Par	rt IV Escrow and Custodial Arrange										
	reported an amount on Form 990, Part X			organization	anowered	100 0111	01111 000,	r are rv, m	10 0, 01		
	Is the organization an agent, trustee, custodian,	or other intermed	diary for	contribution	s or other as	sets not ir	ncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII and										
_		a compress are re-							Amoun	t	
С	Beginning balance						1c				
	Additions during the year										
e	Distributions during the year										
f	Ending balance						1f				
	Did the organization include an amount on Forn								Yes		No
	If "Yes," explain the arrangement in Part XIII. Ch]
	rt V Endowment Funds Complete if the										
		(a) Current year		rior year	(c) Two year			ears back	(e) Fou	years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the current	t year end balance	e (line 1c	g, column (a)) held as:						
а	Board designated or quasi-endowment	•	%	, ,	,						
b	Permanent endowment	%									
С	Term endowment %										
	The percentages on lines 2a, 2b, and 2c should	equal 100%.									
За	Are there endowment funds not in the possessi	on of the organiza	ation tha	t are held an	nd administer	ed for the					
	organization by:	· ·								Yes	No
	(i) Unrelated organizations?								3a(i)		
	(ii) Related organizations?								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizatio								3b		
4	Describe in Part XIII the intended uses of the or	ganization's endo									
Par	t VI Land, Buildings, and Equipmer	nt									
	Complete if the organization answered "	Yes" on Form 990), Part IV	/, line 11a. S	ee Form 990	, Part X, li	ne 10.				
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Ac	cumulate	d	(d) Boo	k value	е
		basis (investr	ment)	basis	(other)	dep	reciation				
1a	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment			1	7,403.		11,17	74.		6,22	<u> 29.</u>
е	Other										

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Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

Part VII Investments - Other Securities		41 0 E 000 B 1 V E 40	Tage 9
Complete if the organization answered "Yes"			I - f I I I
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other	62 200		
(A) SCHWAB ACCOUNT	63,300.	END-OF-YEAR MARKET	VALUE
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.	63,300.		
	on Form 000 Part IV line 1	1c Soc Form 990 Part V line 13	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	Lof-year market value
	(D) DOOK VAIUE	(C) MELLIOU OF VARIATION. COST OF END	rorycai market Value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"		1d. See Form 990, Part X, line 15.	(1) 5
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col	. (B))		
Part X Other Liabilities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X, line 25, col	(R))		
 Liability for uncertain tax positions. In Part XIII, provide 	· //		nat reports the

Schedule D (Form 990) 2023

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

Pa	rt XI	Reconciliation of Revenue per Audited Financial St	atements With F	Revenue per Ret	turn	
		Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a.			
1	Total r	revenue, gains, and other support per audited financial statements			1	1,220,244.
2	Amou	nts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net ur	nrealized gains (losses) on investments	2a			
b	Donate	ed services and use of facilities	2b	167,453.		
С	Recov	reries of prior year grants	2c			
d	Other	(Describe in Part XIII.)	2d			
е	Add lir	nes 2a through 2d			2e	167,453.
3	Subtra	act line 2e from line 1			3	1,052,791.
4	Amou	nts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	(Describe in Part XIII.)	4b			
С	Add lir	nes 4a and 4b			4c	0.
5	Total r	evenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	2.)		5	1,052,791.
Pa	rt XII	Reconciliation of Expenses per Audited Financial S		Expenses per R	eturr	1
Pa		Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a.			
1 1	Total 6	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements	line 12a.		eturr 1	1,027,898.
	Total e	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements	line 12a.			
1	Total e Amou	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements	line 12a.			
1 2	Total e Amou Donate Prior y	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements	2a 2b			
1 2 a	Total e Amou Donate Prior y	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements	2a 2b 2c			
1 2 a b c	Total e Amoun Donate Prior y Other	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements into included on line 1 but not on Form 990, Part IX, line 25: ed services and use of facilities vear adjustments losses (Describe in Part XIII.)	2a 2b 2c 2d	167,453.		1,027,898.
1 2 a b c	Total e Amoun Donate Prior y Other Other Add lin	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements into included on line 1 but not on Form 990, Part IX, line 25: ed services and use of facilities vear adjustments losses (Describe in Part XIII.) ines 2a through 2d	2a 2b 2c 2d	167,453.		1,027,898.
1 2 a b c	Total e Amoun Donate Prior y Other Other Add lin	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements into included on line 1 but not on Form 990, Part IX, line 25: ed services and use of facilities vear adjustments losses (Describe in Part XIII.)	2a 2b 2c 2d	167,453.	1	1,027,898.
1 2 a b c d	Total e Amour Donate Prior y Other Other Add lin	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements into included on line 1 but not on Form 990, Part IX, line 25: ed services and use of facilities vear adjustments losses (Describe in Part XIII.) ines 2a through 2d	2a 2b 2c 2d	167,453.	1 2e	1,027,898.
1 2 a b c d	Total e Amour Donate Prior y Other Other Add lin Subtra Amour	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements included on line 1 but not on Form 990, Part IX, line 25: ed services and use of facilities vear adjustments losses (Describe in Part XIII.) ines 2a through 2d act line 2e from line 1	2a 2b 2c 2d	167,453.	1 2e	1,027,898.
1 2 a b c d e 3 4	Total & Amount Donate Prior y Other Other Add lin Subtra Amount Investor	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements Ints included on line 1 but not on Form 990, Part IX, line 25: ed services and use of facilities Vear adjustments Losses (Describe in Part XIII.) Inter 2a through 2d act line 2e from line 1 Ints included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	167,453.	1 2e	1,027,898. 167,453. 860,445.
1 2 a b c d e 3 4 a b c	Total & Amount Donate Prior y Other Other Add lin Subtra Amount Investi Other Add lin Amount Donate Prior Add lin Amount Donate Prior Add lin Amount Donate Prior Don	Complete if the organization answered "Yes" on Form 990, Part IV, expenses and losses per audited financial statements into included on line 1 but not on Form 990, Part IX, line 25: ed services and use of facilities vear adjustments losses (Describe in Part XIII.) ince 2a through 2d act line 2e from line 1 into included on Form 990, Part IX, line 25, but not on line 1: ment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a 4b	167,453.	1 2e	1,027,898.

Part XIII Supplemental Information

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

PART X, LINE 2:

THE ORGANIZATION HAS A TAX-EXEMPT STATUS UNDER SECTION 501(C) (3) OF THE INTERNAL REVENUE CODE AND HAS ADOPTED ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, ASC 740-10. THE ORGANIZATION POLICY IS TO EVALUATE UNCERTAIN TAX POSITIONS, AT LEAST ANNUALLY, FOR THE POTENTIAL FOR INCOME TAX EXPOSURE FROM UNRELATED BUSINESS INCOME OR FROM LOSS OF NONPROFIT STATUS. THE ORGANIZATION CONTINUES TO OPERATE CONSISTENT WITH ITS ORIGINAL EXEMPTION APPLICATION AND EACH YEAR TAKES THE NECESSARY ACTIONS TO MAINTAIN ITS EXEMPT STATUS. IT HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE ORGANIZATION UNDER THE INTERNAL REVENUE CODE AND CHARITABLE CONTRIBUTIONS BY DONORS ARE TAX DEDUCTIBLE. IN COMPLIANCE WITH ITS EXEMPT THE ORGANIZATION ANNUALLY FILES A RETURN OF ORGANIZATION EXEMPT STATUS,

Schedule D (Form 990) 2023

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

HUNGER ENDS HERE

Employer identification number 46-0967063

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

THOSE IN NEED, WITH THE HELP OF PEOPLE WHO CARE. WE ENVISION A WORLD

WHERE HEALTHY FOOD IS ACCESSIBLE TO EVERYONE.

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

HEALTHY, AND AFFORDABLE FOOD. FRESH PRODUCE IS A VITAL SOURE OF

NUTRIENTS THAT THE BODY NEEDS, AND HARVEST PACK BELIEVES IT SHOULD BE

WITHIN EVERYONE'S REACH. HARVEST PACK'S RATIO OF EXPENSES RELATED TO

PROGRAM VERSUS ADMINISTRATIVE AND FUNDRAISING ACTIVITIES REPORTED ON

FORM 990 IS BASED UPON ITS ACCRUAL BASIS CASH REVENUES AND EXPENSES

LESS COST OF GOODS SOLD OF \$350,359. THESE COSTS ARE REPORTED DIRECTLY

AGAINST THE RELATED RECEIPTS FROM SALE OF FOOD INVENTORY. DONATED

SERVICES ARE ALSO NOT RECOGNIZED AS PROGRAM EXPENSES FOR FORM 990

REPORTING PURPOSES. THE FINANCIAL STATEMENTS FUNCTIONAL EXPENSE

BREAKOUT IS REPORTED ON A GAAP BASIS WITH COST OF GOODS SOLD AND THE

VALUE OF DONATED SERVICES FACTORED IN RESULTING IN 90% PROGRAM, 9%

MANAGEMENT AND GENERAL, AND 1% FUNDRAISING. THE NUMBER OF EVENTS

INCREASED BY 25 EVENTS OVER 2022; THE ORGANIZATION CONTINUED TO USE

STRICT CDC GUIDELINES FOR COMMUNITY SAFETY DURING MEAL PACKING EVENTS.

HARVEST PACK'S PACKING EVENTS ARE AN INCREDIBLE WAY TO HIGHLIGHT

COMMUNITY, GENERATE POSITIVE ENERGY, AND FOSTER PRIDE IN WORKING

TOGETHER FOR THE BENEFIT OF OTHERS. THE EVENTS ARE ALSO FUN. MEAL

PAKING CAN BE DONE BY ANYONE AGES 5 THOUGH 105. THEY ARE DYNAMIC,

ENERGETIC EVENTS WITH MUSIC, LAUGHTER, AND HIGH SPIRITS. PACKING EVENTS

CAN ALSO BE DEEPLY MOVING AND MEANINGFUL. DURING A MEAL PAKING EVENT, A

LHA 332211 11-14-23

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Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page **2**

Name of the organization HUNGER ENDS HERE

Employer identification number 46-0967063

GROUP OF ABOUT 100 VOLUNTEERS CAN PACKAGE UP TO 20,000 MEALS. IN 2023,

29,283 VOLUNTEERS DONATED THEIR TIME DURING PACKING EVENTS. THE PACKING

EVENTS ARE CRITICAL TO THE SUCCESS OF BRINGING HEALTHY FOOD TO EVERY

TABLE. THE NUMBER OF VOLUNTEERS WAS OVER 19.000 HIGHER THAN THE

PREVIOUS YEAR.

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

AN ELECTRONIC VERSION OF THE 990 IS DISTRIBUTED TO THE BOARD. THE FINANCE

COMMITTEE AND/OR THE EXECUTIVE DIRECTOR RESPONDS TO INQUIRIES FROM BOARD

MEMBERS AND THEN THE BOARD VOTES TO APPROVE THE 990.

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

ENFORCEMENT OF CONFLICTS POLICY: ALL STAFF AND CONTRACTORS ARE REQUIRED TO

SIGN AND DISCLOSE CONFLICTS UNDER THE POLICY, ANNUALLY. ANY REPORTED

CONFLICTS ARE PREVIEWED BY THE EXECUTIVE DIRECTOR AND THE BOARD. FINANCIAL

TRANSACTIONS ARE REVIEWED BY THE CONTRACT ACCOUNTANT WHO REFERS

TRANSACTIONS THAT MAY HAVE POSSIBLE CONFLICTS OF INTEREST TO THE EXECUTIVE

DIRECTOR AND THE BOARD. THE BOARD MAKES A DETERMINATION IF THE CONFLICT

GIVES RISE TO CORRECTIVE ACTIONS.

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

EACH YEAR THE BOARD OF DIRECTORS REVIEW AND APPROVE THE EXECUTIVE DIRECTOR'S COMPENSATION AS PART

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

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS,
AND FORM 990 ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Schedule O (Form 990) 2023 Page **2**

Name of the organization HUNGER ENDS HERE	Employer identification number 46-0967063
FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTO	RS, ETC:
WILLIAM MCNALLY - 2288 UNIVERSITY AVE W , ST PAUL, MN 5541	7
FORM 990, PART IX, LINE 11G, OTHER FEES:	
SUBCONTRACTORS:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	19,531.
TOTAL EXPENSES	19,531.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	19,531.
	_