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ARMANINO LLP

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Form **990**Department of the Treasury
Internal Revenue Service**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

2021Open to Public
Inspection**A** For the **2021** calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

SECOND HARVEST OF SILICON VALLEY

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

750 CURTNER AVENUE

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

SAN JOSE, CA 95125-2118

F Name and address of principal officer: NOLAND GRANBERRY

SAME AS C ABOVE

D Employer identification number

94-2614101

E Telephone number

(408) 266-8866

G Gross receipts \$ 355,801,097.**H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ WWW.SHFB.ORG**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: 1979**M** State of legal domicile: CA**Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: MISSION: LEAD OUR COMMUNITY TO ENSURE THAT ANYONE WHO NEEDS A HEALTHY MEAL CAN GET ONE.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	17
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	342
	6	Total number of volunteers (estimate if necessary)	6	23115
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 319,386,604.	Current Year 307,140,754.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,882,889.	5,262,168.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	137,211.	168,383.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	322,406,704.	312,571,305.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	214,712,440.	198,043,951.
Expenses	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	28,587,991.	32,700,852.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	1,043,474.	1,247,446.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 6,800,333.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	34,323,163.	37,443,227.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	278,667,068.	269,435,476.
	19	Revenue less expenses. Subtract line 18 from line 12	43,739,636.	43,135,829.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 189,621,743.	End of Year 252,633,823.
	21	Total liabilities (Part X, line 26)	8,163,684.	46,080,118.
	22	Net assets or fund balances. Subtract line 21 from line 20	181,458,059.	206,553,705.

Part II Signature Block

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

Sign Here	Signature of officer	Date	
	NOLAND GRANBERRY, CFO	5/1/2022	
Paid	Print/Type preparer's name	Preparer's signature	Date
	MATTHEW PETROSKI	MATTHEW PETROSKI	05/01/23
Preparer Use Only	Firm's name ▶ ARMANINO LLP	Firm's EIN ▶ 94-6214841	Check if self-employed <input type="checkbox"/> PTIN P00853132
	Firm's address ▶ 12657 ALCOSTA BLVD, STE. 500 SAN RAMON, CA 94583-4600	Phone no. 925-790-2600	

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission:

TO REALIZE OUR VISION OF A HUNGER FREE COMMUNITY WE WILL PROVIDE MORE
FOOD, HEALTHY FOOD AND BETTER ACCESS TO FOOD. WE WILL LEVERAGE OUR OWN
RESOURCES AND ALSO WORK WITH PARTNERS IN THE COMMUNITY.

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 255,149,965. including grants of \$ 198,043,951.) (Revenue \$ 168,383.)

SECOND HARVEST OF SILICON VALLEY (ALSO KNOWN AS "SECOND HARVEST"), A
NONPROFIT 501(C)(3) ORGANIZATION ESTABLISHED IN 1974 AND INCORPORATED
IN 1979, HAS THE MISSION OF LEADING OUR COMMUNITY TO ENSURE THAT
EVERYONE WHO NEEDS A HEALTHY MEAL CAN GET ONE. AS AN ORGANIZATION,
SECOND HARVEST FACED ONE OF ITS GREATEST CHALLENGES OF LIVING UP TO THE
MISSION DURING THE COVID-19 PANDEMIC. THE ECONOMIC CRISES CREATED BY
THE PANDEMIC PUSHED MANY FAMILIES DEEPER INTO POVERTY AND CAUSED MANY
OTHERS TO SEEK FOOD ASSISTANCE FOR THE VERY FIRST TIME. WITHIN JUST A
FEW MONTHS OF THE ONSET OF THE PANDEMIC, THE NUMBER OF CLIENTS SECOND
HARVEST SERVED GREW FROM 250,000 TO OVER 500,000 ON AVERAGE PER MONTH.
(CONTINUED ON SCHEDULE O)

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  255,149,965.Form **990** (2021)

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 67	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a 342		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c X	
d If "Yes," indicate the number of Forms 8282 filed during the year	7d 2	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h X	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state?	13a	
Note: See the instructions for additional information the organization must report on Schedule O.		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	X
If "Yes," see the instructions and file Form 4720, Schedule N.		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	X
If "Yes," complete Form 4720, Schedule O.		
17 Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17	
If "Yes," complete Form 6069.		

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

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

Section A. Governing Body and Management

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	17			
b Enter the number of voting members included on line 1a, above, who are independent		16		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► CA, AL, AK, AR, CO, FL, GA, HI, IL, KS, KY, ME

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

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►
 SOPHIA JUAREZ - (408) 266-8866
 750 CURTNER AVENUE, SAN JOSE, CA 95125-2118

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LESLIE BACHO CEO	40.00	X		X				359,869.	0.	37,655.
(2) CATHERINE A. CVENGROS VP OF DEVELOPMENT & MARKET	40.00					X		261,632.	0.	23,659.
(3) STANLEY EDDE VP OF OPERATIONS	40.00					X		248,760.	0.	31,783.
(4) BRUNO J. PILLET VP OF PROGRAMS & SERVICES	40.00					X		217,545.	0.	34,714.
(5) TRACY WEATHERBY VP OF STRATEGY & ADVOCACY	40.00					X		201,473.	0.	28,055.
(6) NOLAND PIERRE GRANBERRY CFO	40.00			X				194,760.	0.	21,915.
(7) BARBARA WILETS VP OF HUMAN RESOURCES	40.00					X		194,660.	0.	19,830.
(8) DAVID BABULAK CHAIR	6.10	X		X				0.	0.	0.
(9) BRIAN BIRTWISTLE VICE CHAIR	4.10	X		X				0.	0.	0.
(10) MARK CHANDLER SECRETARY	2.50	X		X				0.	0.	0.
(11) MERRY AYRES BOARD MEMBER	1.30	X						0.	0.	0.
(12) PAUL BAINS BOARD MEMBER	1.80	X						0.	0.	0.
(13) SUSAN BLANCO BOARD MEMBER (THRU 11/21)	1.20	X						0.	0.	0.
(14) CHRIS COOK BOARD MEMBER	2.60	X						0.	0.	0.
(15) ELLEN DREW BOARD MEMBER	1.50	X						0.	0.	0.
(16) LISA GOLDMAN ROSAS BOARD MEMBER	1.40	X						0.	0.	0.
(17) ERIN HOFFMANN BOARD MEMBER	1.50	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JOSH KAHN BOARD MEMBER	1.40	X						0.	0.	0.
(19) JAMILLAH MOORE BOARD MEMBER	1.60	X						0.	0.	0.
(20) VENK NATHAMUNI BOARD MEMBER	2.00	X						0.	0.	0.
(21) ADIRANA PORTER FELT BOARD MEMBER	2.20	X						0.	0.	0.
(22) MARIA POVEROMO BOARD MEMBER (START 11/21)	0.80	X						0.	0.	0.
(23) TINA SUNSERI BOARD MEMBER	2.30	X						0.	0.	0.
(24) RICHARD SVEC BOARD MEMBER	4.10	X						0.	0.	0.
1b Subtotal								1,678,699.	0.	197,611.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,678,699.	0.	197,611.

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

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- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
EXPRESS SERVICES, INC DBA EXPRESS EMPLOYMEN PO BOX 844277, LOS ANGELES, CA 90084-4277	PROF. TEMP. SERVICE PROVIDERS	1,736,402.
ADMIRAL SECURITY SERVICES, INC, 2151 SALVIO STREET, SUITE 260, CONCORD, CA	SECURITY SERVICES	1,349,827.
PROLOGIS 2, LP, 1800 WAZEE STREET, SUITE 500, DENVER, CO 80202	WAREHOUSE RENTAL	1,281,274.
STONE PUBLISHING, INC. 2549 SCOTT BOULEVARD, SANTA CLARA, CA 95050	DIRECT MAIL AND DATABASE CONSULTING	869,048.
RAYMOND HANDLING CONCEPTS P.O. BOX 7678, SAN FRANCISCO, CA 94120-7678	EQUIPMENT MAINTENANCE AND RENTAL	776,610.
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶		

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	24,201,786.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	282,938,968.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 173,443,188.				
	h Total. Add lines 1a-1f						
Program Service Revenue			Business Code				
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3,401,456.			3,401,456.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real (ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)			1,860,712.			1,860,712.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
	b Less: direct expenses	8b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
	11 a OTHER REVENUE		900099	143,547.	143,547.		
	b RECYCLING AND REIMBURS		900099	24,836.	24,836.		
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			168,383.			
12 Total revenue. See instructions				312,571,305.	168,383.	0.	5,262,168.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	117,704,762.	117,704,762.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	80,339,189.	80,339,189.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	696,569.	207,083.	365,862.	123,624.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	25,277,874.	18,945,170.	3,106,591.	3,226,113.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	948,052.	706,706.	120,064.	121,282.
9 Other employee benefits	3,926,675.	2,894,324.	528,330.	504,021.
10 Payroll taxes	1,851,682.	1,355,658.	253,452.	242,572.
11 Fees for services (nonemployees):				
a Management				
b Legal	67,027.		67,027.	
c Accounting	118,535.		118,535.	
d Lobbying	49,915.		49,915.	
e Professional fundraising services. See Part IV, line 17	1,247,446.			1,247,446.
f Investment management fees	851,676.		851,676.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	7,049,866.	5,287,522.	1,245,663.	516,681.
12 Advertising and promotion	596,239.	286,591.		309,648.
13 Office expenses	4,771,633.	4,700,867.	70,766.	
14 Information technology	111,467.	83,211.	15,984.	12,272.
15 Royalties				
16 Occupancy	4,409,551.	4,104,465.	225,144.	79,942.
17 Travel	57,817.	51,085.	3,114.	3,618.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	58,807.	24,607.	21,372.	12,828.
20 Interest	108,510.	108,510.		
21 Payments to affiliates	9,383.	9,383.		
22 Depreciation, depletion, and amortization	3,349,614.	2,730,932.	324,807.	293,875.
23 Insurance	256,610.	213,156.	22,813.	20,641.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a FOOD AND SUPPLIES	10,175,975.	10,175,975.		
b FREIGHT AND STORAGE	3,214,199.	3,214,199.		
c VEHICLE OPERATING COSTS	1,226,329.	1,226,329.		
d EQUIPMENT RENTAL AND MA	891,008.	711,175.	94,063.	85,770.
e All other expenses	69,066.	69,066.		
25 Total functional expenses. Add lines 1 through 24e	269,435,476.	255,149,965.	7,485,178.	6,800,333.
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)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	140,493.	1	2,016,070.
	2 Savings and temporary cash investments	10,539,983.	2	28,377,108.
	3 Pledges and grants receivable, net	3,158,158.	3	35,542,492.
	4 Accounts receivable, net	65,030.	4	157,058.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	7,123,508.	8	7,008,520.
	9 Prepaid expenses and deferred charges	1,073,981.	9	1,423,536.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 94,878,715.		
	b Less: accumulated depreciation	10b 23,242,450.		
	11 Investments - publicly traded securities	31,341,174.	10c	71,636,265.
	12 Investments - other securities. See Part IV, line 11	77,188,139.	11	58,873,557.
	13 Investments - program-related. See Part IV, line 11	56,991,277.	12	47,599,217.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	2,000,000.	14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	189,621,743.	15	0.	
17 Accounts payable and accrued expenses	189,621,743.	16	252,633,823.	
Liabilities	18 Grants payable	7,934,543.	17	9,892,008.
	19 Deferred revenue		18	
	20 Tax-exempt bond liabilities	229,141.	19	55,350.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	
	24 Unsecured notes and loans payable to unrelated third parties		23	36,132,760.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		24	
	26 Total liabilities. Add lines 17 through 25		25	
	27 Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.	8,163,684.	26	46,080,118.
Net Assets or Fund Balances	27 Net assets without donor restrictions			
	28 Net assets with donor restrictions	177,372,136.	27	153,982,749.
	29 Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.	4,085,923.	28	52,570,956.
	30 Capital stock or trust principal, or current funds		29	
	31 Paid-in or capital surplus, or land, building, or equipment fund		30	
	32 Retained earnings, endowment, accumulated income, or other funds		31	
	33 Total net assets or fund balances	181,458,059.	32	206,553,705.
33 Total liabilities and net assets/fund balances	189,621,743.	33	252,633,823.	

Form **990** (2021)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	312,571,305.
2	Total expenses (must equal Part IX, column (A), line 25)	2	269,435,476.
3	Revenue less expenses. Subtract line 2 from line 1	3	43,135,829.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	181,458,059.
5	Net unrealized gains (losses) on investments	5	-18,040,183.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	206,553,705.

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	X

Form **990** (2021)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

SECOND HARVEST OF SILICON VALLEY

Employer identification number

94-2614101

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

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

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

f Enter the number of supported organizations _____

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	125,657,343.	134,594,612.	212,982,881.	319,386,604.	307,140,754.	1099762194.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	125,657,343.	134,594,612.	212,982,881.	319,386,604.	307,140,754.	1099762194.
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)						6,659,727.
6 Public support. Subtract line 5 from line 4.						1093102467.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	125,657,343.	134,594,612.	212,982,881.	319,386,604.	307,140,754.	1099762194.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	744,564.	918,202.	1,143,740.	1,538,505.	3,401,456.	7,746,467.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						1107508661.
12 Gross receipts from related activities, etc. (see instructions)					12	553,528.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	98.70	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	99.46	%
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Schedule A (Form 990) 2021

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

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

Schedule A (Form 990) 2021

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

		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Schedule A (Form 990) 2021

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

Schedule B
(Form 990)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

► Attach to Form 990 or Form 990-PF.
► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

SECOND HARVEST OF SILICON VALLEY

Employer identification number

94-2614101

Organization type (check one):

Filers of:**Section:**

Form 990 or 990-EZ

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

Form 990-PF

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

Name of organization	Employer identification number
SECOND HARVEST OF SILICON VALLEY	94-2614101

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 26,809,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 6,820,746.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 21,599,478.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
SECOND HARVEST OF SILICON VALLEY	94-2614101

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

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

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

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

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

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

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

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

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

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

Name of organization

SECOND HARVEST OF SILICON VALLEY

Employer identification number

94-2614101

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

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

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

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

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.)

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2021

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?	X		
e Publications, or published or broadcast statements?	X		650.
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		
i Other activities?		X	
j Total. Add lines 1c through 1i			650.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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

PART II-B, LINE 1, LOBBYING ACTIVITIES:

DURING THE FY22, THE ORGANIZATION ATTENDED VIRTUAL LEGISLATIVE EVENTS

FOR LEGISLATORS TO EXPLAIN THEIR POLICY AGENDA. THERE WERE NO IN-PERSON

LOBBYING EVENTS OR TRAVEL THIS YEAR.

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

2021**Open to Public Inspection****Name of the organization**

SECOND HARVEST OF SILICON VALLEY

Employer identification number

94-2614101

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

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

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X ▶ \$

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

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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

Schedule D (Form 990) 2021

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

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

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

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

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

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

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

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

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	18,650,394.	13,723,187.	13,182,466.	8,825,326.	7,152,977.
b Contributions	755,100.	1,297,035.	419,124.	3,889,055.	1,569,303.
c Net investment earnings, gains, and losses	-2,340,489.	3,630,172.	121,597.	468,085.	103,046.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	17,065,005.	18,650,394.	13,723,187.	13,182,466.	8,825,326.

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

a Board designated or quasi-endowment ☐ 100 %

b Permanent endowment ☐ %

c Term endowment ☐ %

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

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

(i) Unrelated organizations

(ii) Related organizations

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

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		42,568,682.		42,568,682.
b Buildings		30,228,468.	13,758,175.	16,470,293.
c Leasehold improvements				
d Equipment		11,599,266.	5,174,715.	6,424,551.
e Other		10,482,299.	4,309,560.	6,172,739.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				71,636,265.

Schedule D (Form 990) 2021

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) CORPORATE BONDS AND NOTES	44,656,278.	END-OF-YEAR MARKET VALUE
(B) REAL ESTATE INVESTMENT TRUSTS	2,942,939.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	47,599,217.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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

Schedule D (Form 990) 2021

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

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

1	Total revenue, gains, and other support per audited financial statements	1	294,080,043.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-18,040,183.
b	Donated services and use of facilities	2b	400,597.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	-17,639,586.
3	Subtract line 2e from line 1	3	311,719,629.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	851,676.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	851,676.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	312,571,305.

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

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

1	Total expenses and losses per audited financial statements	1	268,984,397.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	400,597.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	400,597.
3	Subtract line 2e from line 1	3	268,583,800.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	851,676.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	851,676.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	269,435,476.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE BOARD DESIGNATED ENDOWMENT SUPPORTS THE MISSION AND OPERATIONS OF THE

FOOD BANK.

PART X, LINE 2:

SECOND HARVEST OF SILICON VALLEY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER

SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND STATE INCOME TAXES

UNDER SECTION 23701(D) OF THE CALIFORNIA REVENUE TAXATION CODE.

ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE

ACCOMPANYING STATEMENTS.

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA

Part XIII Supplemental Information *(continued)*

PROVIDE ACCOUNTING AND DISCLOSURE GUIDANCE ABOUT POSITIONS TAKEN BY AN

ORGANIZATION IN ITS TAX RETURNS THAT MIGHT BE UNCERTAIN. MANAGEMENT HAS

CONSIDERED ITS TAX POSITIONS AND BELIEVES THAT ALL OF THE POSITIONS TAKEN

BY SECOND HARVEST IN ITS FEDERAL AND STATE EXEMPT ORGANIZATION TAX RETURNS

ARE MORE-LIKELY-THAN-NOT TO BE SUSTAINED UPON EXAMINATION.

SECOND HARVEST OF SILICON VALLEY'S FEDERAL RETURNS FOR THE YEARS ENDED

JUNE 30, 2021, 2020, AND 2019 COULD BE SUBJECT TO EXAMINATION BY FEDERAL

TAXING AUTHORITIES, GENERALLY FOR 3 YEARS AFTER THEY ARE FILED. THE SECOND

HARVEST'S STATE RETURNS FOR THE YEARS ENDED JUNE 30, 2021, 2020, 2019, AND

2018 COULD BE SUBJECT TO EXAMINATION BY STATE TAXING AUTHORITIES,

GENERALLY FOR 4 YEARS AFTER THEY ARE FILED.

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

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

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

- 16** Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer

☐ Employee

☐ Independent contractor

- 17** Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: RKD GROUP, LLC

(I) ADDRESS OF FUNDRAISER: 7130 S. 29TH STREET, SUITE B, LINCOLN, NE 68516

(I) NAME OF FUNDRAISER: GATEWAY COMMUNICATION, INC

(I) ADDRESS OF FUNDRAISER: 16805 NE MASON COURT, PORTLAND, OR 97230

Part IV	Supplemental Information <i>(continued)</i>
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[illegible]

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

SECOND HARVEST OF SILICON VALLEY

Employer identification number

94-2614101

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CATHEDRAL OF FAITH-GILROY 7250 FOREST STREET GILROY, CA 95020	94-1616911	501(C)(3)	0.	82,749.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
WEST VALLEY COMMUNITY SERVICES 10104 VISTA DRIVE CUPERTINO, CA 95014	94-2211685	501(C)(3)	0.	1,385,444.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
FOXDALE VILLAGE APARTMENTS 1250 FOXDALE LOOP SAN JOSE, CA 95122	33-0834635	501(C)(3)	0.	210,781.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
C.O.M.E. 121 EAST SAN SALVADOR ST. SAN JOSE, CA 95112	80-0757534	501(C)(3)	0.	203,841.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
FRIENDSHIP CHURCH OF GOD IN CHRIST 1654 EAST SAN ANTONIO ST. SAN JOSE, CA 95116	94-2780987	501(C)(3)	16,107.	914,253.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
OUR LADY OF GUADALUPE CATHOLIC CHURCH - 2020 EAST SAN ANTONIO ST. - SAN JOSE, CA 95116	94-2734503	501(C)(3)	0.	2,168,898.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 217.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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

Schedule I (Form 990) 2021

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST COMMUNITY HOUSING-JAPANTOWN SENIOR APARTMENTS - 685 N 6TH STREET - SAN JOSE, CA 95112	77-0119210	501(C)(3)	4,000.	74,120.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MILPITAS FOOD PANTRY 1440 S. MAIN STREET MILPITAS, CA 95035	77-0254042	501(C)(3)	0.	106,810.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MOST HOLY TRINITY CATHOLIC CHURCH 2040 NASSAU DRIVE SAN JOSE, CA 95122	94-2734503	501(C)(3)	0.	369,220.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
COMMUNITY SERVICES AGENCY 204 STIERLIN ROAD MOUNTAIN VIEW, CA 94043	94-1422465	501(C)(3)	0.	1,010,854.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CATHEDRAL OF FAITH - REACHING OUT 2315 CANOAS GARDEN ROAD SAN JOSE, CA 95125	94-1616911	501(C)(3)	0.	7,309,217.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SACRED HEART COMMUNITY SERVICE 1381 SOUTH FIRST ST. SAN JOSE, CA 95110	23-7179787	501(C)(3)	0.	5,694,698.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SANTA MARIA URBAN MINISTRY OF SAN JOSE - 778 SOUTH ALMADEN AVE. - SAN JOSE, CA 95110	94-2673950	501(C)(3)	0.	977,735.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ST. CATHERINE CHURCH - REACHOUT 17400 PEAK AVE. MORGAN HILL, CA 95037	94-2734503	501(C)(3)	0.	63,803.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ST. JOSEPH'S FAMILY CENTER 7950 CHURCH ST. SUITE A GILROY, CA 95020	03-0391775	501(C)(3)	0.	6,267,359.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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

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ST. MARTIN OF TOURS CHURCH 200 O'CONNOR DRIVE SAN JOSE, CA 95128	94-2734503	501(C)(3)	0.	126,086.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
REDEMPTION DBA JUBILEE OUTREACH 161 NORTECH PARKWAY SAN JOSE, CA 95134	77-0195311	501(C)(3)	0.	1,308,112.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
THE SALVATION ARMY - GILROY 200 WEST FIFTH ST. GILROY, CA 95020	94-1170408	501(C)(3)	50,419.	2,042,927.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SUNNYVALE COMMUNITY SERVICES 1160 KERN AVENUE SUNNYVALE, CA 94085	94-1713897	501(C)(3)	252,041.	1,919,166.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
GLORIA DEI LUTHERAN CHURCH - LORD'S PANTRY - 121 SOUTH WHITE ROAD - SAN JOSE, CA 95127	41-1568278	501(C)(3)	5,553.	1,082,721.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
WESTGATE SOUTH HILLS CHURCH 6601 CAMDEN AVE. SAN JOSE, CA 95120	94-1727236	501(C)(3)	0.	213,592.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
HOME CHURCH 1799 S. WINCHESTER BLVD. CAMPBELL, CA 95008	94-2544750	501(C)(3)	0.	435,865.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
THE SALVATION ARMY - SAN JOSE 359 NORTH FOURTH ST. SAN JOSE, CA 95112	94-1170408	501(C)(3)	5,750.	4,898,653.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
EVERGREEN VALLEY COLLEGE 3095 YERBA BUENA RD SAN JOSE, CA 95135	94-2877474	501(C)(3)	866.	490,634.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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ST. JUSTIN COMMUNITY MINISTRY 2655 HOMESTEAD ROAD SANTA CLARA, CA 95051	94-2734503	501(C)(3)	0.	416,496.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
OPERATION SHARE 467 NORTH WHITE ROAD SAN JOSE, CA 95127	94-2240642	501(C)(3)	0.	479,626.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
DOWNTOWN STREETS TEAM 1671 THE ALAMEDA SAN JOSE, CA 95126	20-5242330	501(C)(3)	0.	53,661.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
THE SALVATION ARMY - SUNNYVALE 1161 SOUTH BERNARDO AVE. SUNNYVALE, CA 94087	94-1170408	501(C)(3)	0.	857,238.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ST. JULIE BILLIART PARISH 386 SAINT JULIE'S DRIVE SAN JOSE, CA 95119	94-2734503	501(C)(3)	0.	389,935.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
HEALTH TRUST - JERRY LARSON FOODBASKET - 1043 GARLAND AVENUE - SAN JOSE, CA 95126	94-6050231	501(C)(3)	12,717.	331,275.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
FISH OF SOUTH VALLEY SAN JOSE 5100 CAMDEN AVE. ROOMS A1 & A2 SAN JOSE, CA 95124	81-3487334	501(C)(3)	0.	201,665.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CITYTEAM IN THE NEIGHBORHOOD (CTN) 1297 NORTH 13TH ST. SAN JOSE, CA 95112	94-1501265	501(C)(3)	35,122.	7,177,318.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ABODE SERVICES 25 N. 14TH ST. SUITE 400 SAN JOSE, CA 95112	94-3087060	501(C)(3)	0.	212,377.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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RAHIMA FOUNDATION 2290 RINGWOOD AVE. SAN JOSE, CA 95131	77-0442850	501(C)(3)	18,460.	546,761.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
EAH INC 2000 MONTEREY ROAD SAN JOSE, CA 95112	94-2684272	501(C)(3)	0.	332,424.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
RIVER OF LIFE FOUNDATION 1177 LAURELWOOD ROAD SANTA CLARA, CA 95054	20-5427262	501(C)(3)	107,271.	8,562,499.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CROSSROAD CHURCH 990 S. CAPITOL AVENUE SAN JOSE, CA 95127	77-0536018	501(C)(3)	151,499.	3,042,669.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ANTIOCH BAPTIST CHURCH 268 E. JULIAN STREET SAN JOSE, CA 95112	94-2577738	501(C)(3)	133,074.	358,595.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
TRUE VINE BAPTIST CHURCH 505 SOUTH WHITE ROAD SAN JOSE, CA 95127	94-2874988	501(C)(3)	0.	882,056.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LOGOS CHRISTIAN FELLOWSHIP 4801 ALUM ROCK AVENUE SAN JOSE, CA 95127	94-2941659	501(C)(3)	9,554.	1,870,027.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
EL BUEN PASTOR CHURCH 2468 SUMMER STREET SAN JOSE, CA 95116	23-7424447	501(C)(3)	0.	215,256.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ALPHA PUBLIC SCHOOLS 1601 CUNNINGHAM AVENUE SAN JOSE, CA 95122	27-1881962	501(C)(3)	0.	599,251.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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EL BUEN PASTOR FOOD PANTRY 1937 CONCOURSE DRIVE SAN JOSE, CA 95131	47-4019571	501(C)(3)	0.	241,392.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
EL RANCHO VERDE APARTMENTS 300A CHECKERS DR SAN JOSE, CA 95133	33-0673939	501(C)(3)	0.	429,413.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
HUNGER AT HOME 1560 BERGER DRIVE SAN JOSE, CA 95112	47-5462752	501(C)(3)	0.	3,076,722.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CRY OUT CHRISTIAN FELLOWSHIP 20 GREAT OAKS BOULEVARD SAN JOSE, CA 95119	77-0455392	501(C)(3)	0.	657,442.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SUPPORT LIFE FOUNDATION 3003 SCOTT BOULEVARD SANTA CLARA, CA 95054	47-1675693	501(C)(3)	41,693.	890,577.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SHFB SANTA CRUZ COUNTY 800 OHLONE PKWY WATSONVILLE, CA 95076	77-0326685	501(C)(3)	0.	700,921.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SHFB OF THE GREATER VALLEY 1220 VANDERBILT CIRCLE MANTECA, CA 95337	68-0376587	501(C)(3)	0.	236,496.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
FOOD BANK FOR MONTEREY COUNTY 353 W. ROSSI STREET SALINAS, CA 93940	77-0270228	501(C)(3)	0.	1,138,356.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SAN FRANCISCO-MARIN FOOD BANK 900 PENNSYLVANIA AVE. SAN FRANCISCO, CA 94107	94-3041517	501(C)(3)	0.	16,036.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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FOOD BANK OF CONTRA COSTA AND SOLANO - 1891 WOOLNER SUITE I - FAIRFIELD, CA 94533	94-2418054	501(C)(3)	0.	33,178.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
REDWOOD EMPIRE FOOD BANK 3990 BRICKWAY BLVD. SANTA ROSA, CA 95403	68-0121855	501(C)(3)	0.	29,491.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SUNDAY FRIENDS FOUNDATION 645 WOOL CREEK DRIVE, 2ND FLOOR SUITE SAN JOSE, CA 95112	77-0518937	501(C)(3)	0.	222,740.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CATHOLIC CHARITIES - CORAL 645 WOOL CREEK DR SAN JOSE, CA 95112	94-2762269	501(C)(3)	0.	17,360.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PROJECT ACCESS 1250 FOXDALE LOOP SAN JOSE, CA 95122	33-0834635	501(C)(3)	0.	36,359.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CATHOLIC CHARITIES - FIRST 5 PROGRAM D4 - 4 WABASH AVENUE - SAN JOSE, CA 95128	94-2762269	501(C)(3)	0.	34,650.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CATHOLIC CHARITIES - FIRST 5 PROGRAM D1 - 3200 WATER STREET - SAN JOSE, CA 95111	94-2762269	501(C)(3)	0.	35,275.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
REDWOOD CITY EDUCATION FOUNDATION 750 BRADFORD STREET REDWOOD CITY, CA 94063	94-2903141	501(C)(3)	0.	46,707.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PROJECT READ REDWOOD CITY LIBRARY 1044 MIDDLEFIELD ROAD REDWOOD CITY, CA 94063	94-3133401	501(C)(3)	0.	174,171.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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MERCY HOUSING - SCHOOL HOUSE VISTA GRANDE - 99 SCHOOL STREET - DALY CITY, CA 94014	37-1068780	501(C)(3)	0.	50,297.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
DALY CITY PENINSULA PARTNERSHIP COLLABORATIVE - 111 LAKE MERCED BOULEVARD - DALY CITY, CA 94015	06-1734338	501(C)(3)	0.	118,479.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
NUESTRA CASA DE EAST PALO ALTO 2396 UNIVERSITY AVE EAST PALO ALTO, CA 94303	46-4040538	501(C)(3)	0.	1,720,379.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
VERBO FAMILY SERVICES 2798 BAY RD. REDWOOD CITY, CA 94063	94-3361715	501(C)(3)	50,357.	440,327.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
YMCA - SAN MATEO COUNTY LIBRARY 125 LESSINGIA COURT SAN MATEO, CA 94402	94-1156318	501(C)(3)	6,333.	0.			TO PREVENT HUNGER
ONE LIFE COUNSELING CENTER 1033 LAUREL STREET SAN CARLOS, CA 94070	81-0919786	501(C)(3)	33,554.	192,767.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SAN JOSE CONSERVATION CORPS AND CHARTER SCHOOL - 1560 BERGER DRIVE - SAN JOSE, CA 95112	77-0155997	501(C)(3)	0.	137,973.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
RONALD MCDONALD HOUSE CHARITIES BAY AREA - 520 SAND HILL ROAD - PALO ALTO, CA 94304	94-2538615	501(C)(3)	0.	99,712.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CORA - COMMUNITY OVERCOMING RELATIONSHIP ABUSE - P.O. BOX 5090 - SAN MATEO, CA 94403	94-2481188	501(C)(3)	0.	18,603.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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SAMARITAN HOUSE 4031 PACIFIC BLVD. SAN MATEO, CA 94403	23-7416272	501(C)(3)	152,309.	5,636,032.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER AND PURCHASE OF FORKLIFT , EQUIPMENT, REACH-IN REFRIGERATOR
THE SALVATION ARMY - REDWOOD CITY P.O. BOX 1147 REDWOOD CITY, CA 94062	94-1170408	501(C)(3)	37,893.	152,404.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER AND PURCHASE OF '19 FORD TRANSIT VAN
SVDP ST. FRANCIS OF ASSISI 1425 BAY ROAD EAST PALO ALTO, CA 94303	27-0334226	501(C)(3)	0.	1,441,279.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP REDWOOD CITY AND FAIR OAKS COMMUNITY CENTER - 2600 MIDDLEFIELD RD. - REDWOOD CITY, CA 94063	94-1375833	501(C)(3)	0.	16,590.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP ST. PIUS 1100 WOODSIDE ROAD REDWOOD CITY, CA 94061	27-0334588	501(C)(3)	0.	27,648.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP OUR LADY OF MT. CARMEL 300 FULTON STREET (PARISH CRT) REDWOOD CITY, CA 94062	27-0333929	501(C)(3)	0.	25,572.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
YMCA COMMUNITY RESOURCE CENTER 1486 HUNTINGTON AVE. SOUTH SAN FRANCISCO, CA 94080	23-7416272	501(C)(3)	0.	514,024.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SAN MATEO COUNTY COMMUNITY COLLEGES FOUNDATION-COLLEGE OF SAN MATEO/SMCCCD - 1700 W. HILLSDALE BLVD., BLDG 17 ROOM 154 - SAN	94-6133905	501(C)(3)	0.	123,584.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
COASTSIDE HOPE P.O. BOX 1089 EL GRANADA, CA 94018	51-0199747	501(C)(3)	41,345.	230,720.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER AND PURCHASE OF '19 FORD TRANSIT VAN

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CALL PRIMROSE UPCUSA 139 PRIMROSE RD. BURLINGAME, CA 94010	47-2131340	501(C)(3)	0.	752,964.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
AFL- CIO COMMUNITY SERVICES 1153 CHESS DRIVE, #200 FOSTER CITY, CA 94404	73-1656669	501(C)(3)	0.	760,012.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP ST. TIMOTHY 1515 DOLAN AVENUE SAN MATEO, CA 94401	94-1375833	501(C)(3)	0.	8,460.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ST. FRANCIS CENTER 151 BUCKINGHAM AVENUE REDWOOD CITY, CA 94063	94-3052056	501(C)(3)	11,561.	348,964.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
NORTH PEN FOOD PANTRY AND DINING CTR OF DALY CITY - P.O. BOX 280 - DALY CITY, CA 94016	94-3164510	501(C)(3)	0.	5,145.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LINCOLN PARK COMMUNITY CENTER PANTRY - 901 BRUNSWICK ST. - DALY CITY, CA 94014	06-1734338	501(C)(3)	0.	119,223.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PROJECT WEHOPE 1854 BAY RD. EAST PALO ALTO, CA 94303	94-3342713	501(C)(3)	0.	815,355.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MID-PENINSULA HISPANIC OUTREACH MINISTRY UPCUSA - 194 WEST 25TH AVENUE - SAN MATEO, CA 94403	23-6393377	501(C)(3)	0.	1,104,210.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP OUR LADY OF THE PILLAR 400 CHURCH ST. HALF MOON BAY, CA 94019	27-0334226	501(C)(3)	0.	245,619.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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SVDP NATIVITY 210 OAK GROVE AVE. MENLO PARK, CA 94025	94-1375833	501(C)(3)	0.	37,525.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
RAVENSWOOD CITY SCHOOL DISTRICT 2450 RALMAR AVENUE EAST PALO ALTO, CA 94303	94-2614101	501(C)(3)	4,471.	1,179,497.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP ST. DUNSTAN 1111 MAGNOLIA AVE MILLBRAE, CA 94030	94-1375833	501(C)(3)	0.	5,902.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP ST. MATTHEW 1 NOTRE DAME AVENUE SAN MATEO, CA 94402	94-1375833	501(C)(3)	0.	29,737.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CANADA COLLEGE/SMCCCD 4200 FARM HILL BLVD. REDWOOD CITY, CA 94061	94-6133905	501(C)(3)	0.	34,337.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SAN CARLOS SERVICE CLUBS FOR SENIORS - 601 CHESTNUT STREET - SAN CARLOS, CA 94070	94-3139839	501(C)(3)	0.	162,836.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PRIMERA IGLESIA BAUTISTA DE SSF 299 COUNTRY CLUB DRIVE SOUTH SAN FRANCISCO, CA 94080	94-3186395	501(C)(3)	0.	69,842.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP ST. CHARLES 880 TAMARACK AVENUE SAN CARLOS, CA 94070	94-1375833	501(C)(3)	0.	12,661.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ECUMENICAL HUNGER PROGRAM 2411 PULGAS AVENUE EAST PALO ALTO, CA 94303	94-2476942	501(C)(3)	0.	2,307,891.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SVDP ST. MATTHIAS 1685 CORDILLERAS ROAD REDWOOD CITY, CA 94062	94-1375833	501(C)(3)	0.	8,374.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP ST. ANTHONY 3500 MIDDLEFIELD RD MENLO PARK, CA 94025	94-1375833	501(C)(3)	0.	27,771.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SOUTH PALO ALTO FOOD CLOSET 670 E. MEADOW DRIVE, ROOM 9 PALO ALTO, CA 94306	77-0499948	501(C)(3)	6,099.	123,716.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
AIDS COMMUNITY RESEARCH CONSORTIUM 855 DOUGLAS AVENUE REDWOOD CITY, CA 94063	94-3100725	501(C)(3)	0.	92,011.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
HILLSIDE CHURCH OF GOD 1415 HILLSIDE BOULEVARD SOUTH SAN FRANCISCO, CA 94080	35-6064030	501(C)(3)	0.	115,118.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CAMINAR 248 REDWOOD AVENUE REDWOOD CITY, CA 94061	94-1639389	501(C)(3)	0.	48,245.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
DALY CITY PARTNERSHIP 350 90TH STREET, 1ST FLOOR DALY CITY, CA 94015	06-1734338	501(C)(3)	0.	2,521,349.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
EMBASSY CHRISTIAN CENTER 925 LINDEN AVENUE SOUTH SAN FRANCISCO, CA 94080	94-3299285	501(C)(3)	0.	271,820.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MACEDONIA CHURCH OF GOD IN CHRIST 66 N. CLAREMONT STREET SAN MATEO, CA 94401	94-3109136	501(C)(3)	0.	1,320,118.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD AND FREEZER	TO PREVENT HUNGER

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SVDP ST. MARK 325 MARINE VIEW BELMONT, CA 94002	94-1375833	501(C)(3)	0.	81,185.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PARCA - HORIZONS 825 OLD COUNTY RD. BELMONT, CA 94002	94-3039902	501(C)(3)	0.	19,459.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CHURCH OF CHRIST 1215 LAUREL AVE. EAST PALO ALTO, CA 94303	94-3188334	501(C)(3)	4,057.	2,526,137.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP ST. ANTHONY MISSION 696 NORTH ST. PESCADERO, CA 94060	94-1375833	501(C)(3)	0.	123,779.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
THERE WITH CARE 2682 MIDDLEFIELD ROAD, SUITE H REDWOOD CITY, CA 94063	45-3952029	501(C)(3)	0.	31,352.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PACIFICA RESOURCE CENTER 555 BUEL AVE. PACIFICA, CA 94044	81-1496989	501(C)(3)	0.	374,840.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PACIFICA RESOURCE CENTER 1809 PALMETTO AVENUE PACIFICA, CA 94044	81-1496989	501(C)(3)	0.	100,141.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PILLAR RIDGE MOBILE HOME PARK 164 CULEBRA LANE MOSS BEACH, CA 94038	33-0919418	501(C)(3)	0.	76,616.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SAN JOSE FIRST UNITED METHODIST 24 NORTH 5TH STREET SAN JOSE, CA 95112	77-0486323	501(C)(3)	0.	157,206.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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ST. VICTORS PARISH 3108 SIERRA ROAD SAN JOSE, CA 95132	94-2734503	501(C)(3)	0.	740,904.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LOAVES & FISHES FAMILY KITCHEN 16505 BUTTERFIELD BLVD MORGAN HILL, CA 95020	77-0370874	501(C)(3)	100,000.	492,601.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MARTHA'S KITCHEN 311 WILLOW STREET SAN JOSE, CA 95110	91-2091094	501(C)(3)	207,338.	2,829,813.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER AND PURCHASE OF BACK UP GENERATOR ,LK-IN COOLER , EQUIPMENT
FRONT DOOR COMMUNITIES 405 SOUTH TENTH STREET SAN JOSE, CA 95112	23-6393377	501(C)(3)	0.	21,945.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
OUR DAILY BREAD 231 SUNSET AVE. SUNNYVALE, CA 94086	94-2673950	501(C)(3)	0.	526,591.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CONXION TO COMMUNITY 749 STORY ROAD, SUITE 10 SAN JOSE, CA 95122	94-2400381	501(C)(3)	0.	1,114,327.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MARANATHA OUTREACH CENTER 1811 S. 7TH STREET, STE B SAN JOSE, CA 95112	77-0557182	501(C)(3)	0.	90,032.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
HOPE'S CORNER 748 MERCY STREET MOUNTAIN VIEW, CA 94041	47-3754161	501(C)(3)	0.	90,691.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
GILROY COMPASSION CENTER 458 FIRST ST. GILROY, CA 95020	45-2189365	501(C)(3)	0.	133,011.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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ST. ANTHONY'S PADUA DINING ROOM 3500 MIDDLEFIELD ROAD MENLO PARK, CA 94025	94-1156707	501(C)(3)	0.	213,446.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP HOMELESS HELP CENTER 344 GRAND AVENUE SOUTH SAN FRANCISCO, CA 94080	94-1375833	501(C)(3)	0.	12,931.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP SAN MATEO AREA CONFERENCE 50 NORTH B STREET SAN MATEO, CA 94401	94-1375833	501(C)(3)	0.	30,079.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
NO STRINGS ATTACHED BREAKFAST 925 MAIN STREET HALF MOON BAY, CA 94019	83-4682101	501(C)(3)	0.	60,521.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MT. OLIVE APOSTOLIC ORIGINAL HOLY CHURCH OF GOD - 605 HAMILTON AVENUE - MENLO PARK, CA 94025	94-3385727	501(C)(3)	0.	35,944.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
COMMUNITY SOLUTIONS - LA CASA DEL PUENTE - 17415 DEPOT ST. - MORGAN HILL, CA 95037	23-7351215	501(C)(3)	0.	33,917.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PATHWAY SOCIETY, INC. 1530 THE ALAMEDA SAN JOSE, CA 95126	94-1688522	501(C)(3)	0.	36,228.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MOMENTUM FOR MENTAL HEALTH - FSP RESIDENTIAL - 436 N. WHITE RD. - SAN JOSE, CA 95127	94-1496052	501(C)(3)	0.	24,781.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
THE SALVATION ARMY - ADULT REHABILITATION CENTER - 702 WEST TAYLOR STREET - SAN JOSE, CA 95126	94-1170408	501(C)(3)	0.	160,171.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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MOMENTUM FOR MENTAL HEALTH - LITTERAL HOUSE - 2001 THE ALAMEDA - SAN JOSE, CA 95126	94-1496052	501(C)(3)	0.	28,385.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MOMENTUM FOR MENTAL HEALTH - CROSSROADS VILLAGE - 2001 THE ALAMEDA - SAN JOSE, CA 95126	77-0075687	501(C)(3)	0.	44,598.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
THE ALANO CLUB OF SAN JOSE 1122 FAIR AVENUE SAN JOSE, CA 95122	94-1448128	501(C)(3)	0.	33,089.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
RAINBOW RECOVERY FOUNDATION 6217 CULVERT DRIVE SAN JOSE, CA 95123	06-1710609	501(C)(3)	0.	46,899.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PARISI HOUSE ON THE HILL P.O. BOX 21826 SAN JOSE, CA 95151	45-1911940	501(C)(3)	0.	10,266.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CAMINAR - PROJECT NINETY 114 DELAWARE AVENUE SAN MATEO, CA 94401	94-1639389	501(C)(3)	1,489.	63,416.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MATEO LODGE - CASSIA AND HUMBOLDT HOUSES - 420 CASSIA - REDWOOD CITY, CA 94063	51-0140976	501(C)(3)	0.	121,759.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
KAINOS HOME AND TRAINING CENTER 3631 JEFFERSON AVENUE REDWOOD CITY, CA 94062	23-7408490	501(C)(3)	0.	134,693.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CAMINAR - HAWTHORNE HOUSE 251 JACKSON AVENUE REDWOOD CITY, CA 94061	94-1639389	501(C)(3)	0.	44,001.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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HOPE HOUSE - SMC SERVICE LEAGUE 3789 HOOVER STREET REDWOOD CITY, CA 94063	94-1661885	501(C)(3)	0.	12,594.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
OUR COMMON GROUND 2560 PULGAS AVENUE EAST PALO ALTO, CA 94303	22-2923921	501(C)(3)	0.	46,652.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
THE LATINO COMMISSION 1001 SNEATH LANE SUITE 307 SAN BRUNO, CA 94066	94-3149136	501(C)(3)	0.	116,736.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
HEALTHRIGHT 360 2015 PIONEER COURT SAN MATEO, CA 94403	94-6129071	501(C)(3)	0.	97,683.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
JERICHO PROJECT 430 VALLEY DRIVE BRISBANE, CA 94005	94-3223981	501(C)(3)	0.	725,735.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
FREE AT LAST - MEN'S RESIDENTIAL 1095 WEEKS ST. EAST PALO ALTO, CA 94303	94-3193317	501(C)(3)	0.	7,687.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SVDP CATHERINE'S CENTER 50 N. B ST. SAN MATEO, CA 94401	94-1375833	501(C)(3)	0.	7,935.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MATEO LODGE - WALLY'S PLACE 695 5TH AVE. REDWOOD CITY, CA 94063	51-0140976	501(C)(3)	0.	46,243.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
FAMILY HOUSING & ADULT RESOURCES, INC. - 20 E 20TH AVE. - SAN MATEO, CA 94403	23-7062027	501(C)(3)	0.	58,257.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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ONE EAST PALO ALTO 903 WEEKS ST. EAST PALO ALTO, CA 94303	55-0816618	501(C)(3)	39,475.	534,288.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER AND PURCHASE OF GMC SAVANA CARGO VAN
CATHOLIC CHARITIES SCC- JOHN XXIII & EASTSIDE CTR - 195 EAST SAN FERNANDO ST. - SAN JOSE, CA 95112	94-2762269	501(C)(3)	67,109.	39,403.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER AND PURCHASE OF 2 FORD TRANSIT VANS
VIET TU TE CHARITY 765 STORY ROAD SAN JOSE, CA 95122	81-3938656	501(C)(3)	0.	208,542.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LA COMIDA DE CALIFORNIA 455 E. CHARLESTON RD PALO ALTO, CA 94306	94-2170907	501(C)(3)	0.	59,670.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
EAST PALO ALTO SENIOR CENTER 560 BELL STREET EAST PALO ALTO, CA 94303	94-2796500	501(C)(3)	0.	237,971.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
DOELGER & LINCOLN SENIOR CENTERS 101 LAKE MERCED BOULEVARD DALY CITY, CA 94015	94-2844797	501(C)(3)	35,824.	51,786.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
UNION COMMUNITY RESOURCES - LABORERS LOCAL 270 - 2195 FORTUNE DR. - SAN JOSE, CA 95131	77-0387535	501(C)(3)	0.	1,339,611.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
WEST VALLEY PRESBYTERIAN CHURCH 6191 BOLLINGER ROAD CUPERTINO, CA 95014	23-6393377	501(C)(3)	0.	5,477.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PORTUGUESE ORGANIZATION FOR SOCIAL SERVICES & OPPO - 1115 EAST SANTA CLARA STREET - SAN JOSE, CA 95116	51-0187655	501(C)(3)	0.	448,859.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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SILICON VALLEY INDEPENDENT LIVING CENTER - 25 N. 14TH ST. - SAN JOSE, CA 95112	94-2332246	501(C)(3)	0.	13,067.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SENIOR COASTSIDERS - MEALS ON WHEELS - 925 MAIN STREET - HALF MOON BAY, CA 94019	94-3119310	501(C)(3)	0.	41,644.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
PENINSULA VOLUNTEERS 800 MIDDLE AVENUE MENLO PARK, CA 94025	94-1294939	501(C)(3)	0.	163,902.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
NEXT DOOR SOLUTIONS TO DOMESTIC VIOLENCE - 234 E. GISH ROAD, SUITE 200 - SAN JOSE, CA 95112	94-2420708	501(C)(3)	0.	8,878.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LIFEMOVES - JULIAN STREET INN 546 W. JULIAN STREET SAN JOSE, CA 95110	77-0160469	501(C)(3)	0.	127,859.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
THE SALVATION ARMY - EMMANUEL HOUSE - 405 NORTH FOURTH STREET - SAN JOSE, CA 95112	94-1170408	501(C)(3)	0.	200,237.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
FAMILY SUPPORTIVE HOUSING 692 NORTH KING ROAD SAN JOSE, CA 95133	77-0106237	501(C)(3)	0.	47,119.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
COMMUNITY SOLUTIONS - LA ISLA PACIFICA - 9015 MURRAY AVENUE #100 - GILROY, CA 95020	23-7351215	501(C)(3)	0.	35,367.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
HOMEFIRST 2011 LITTLE ORCHARD STREET SAN JOSE, CA 95125	94-2684272	501(C)(3)	0.	508,620.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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ASIAN AMERICANS FOR COMMUNITY INVOLVEMENT - 2400 MOORPARK AVE, SUITE 300 - SAN JOSE, CA 95128	94-2292491	501(C)(3)	0.	5,316.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
COMMUNITY SOLUTIONS - CRIMINAL JUSTICE SERVICES - 9015 MURRAY AVENUE #100 - GILROY, CA 95020	23-7351215	501(C)(3)	0.	63,830.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
RECOVERY CAFE SAN JOSE INC 80 SOUTH FIFTH ST. SAN JOSE, CA 95112	35-0868116	501(C)(3)	0.	54,012.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LIFEMOVES - FIRST STEP FOR FAMILIES - 325 VILLA TERRACE - SAN MATEO, CA 94401	77-0160469	501(C)(3)	0.	44,564.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
STARVISTA 610 ELM STREET, SUITE 212 SAN CARLOS, CA 94070	94-3094966	501(C)(3)	0.	53,895.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LIFEMOVES - MAPLE STREET SHELTER 1580-A MAPLE STREET REDWOOD CITY, CA 94063	77-0160469	501(C)(3)	0.	22,056.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
HOMELESS VETERANS EMERGENCY HOUSING FACILITY - 10 KIRK AVE - SAN JOSE, CA 95127	94-3347254	501(C)(3)	0.	329,896.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LIFEMOVES - FAMILY CROSSROADS 50 HILLCREST DRIVE DALY CITY, CA 94014	77-0160469	501(C)(3)	0.	30,854.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LIFEMOVES - HAVEN FAMILY HOUSE 260 VAN BUREN ROAD MENLO PARK, CA 94025	77-0160469	501(C)(3)	0.	15,531.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

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LIFEMOVES - REDWOOD FAMILY HOUSE 110 LOCUST STREET REDWOOD CITY, CA 94061	77-0160469	501(C)(3)	0.	15,500.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LIFEMOVES - OPPORTUNITY SERVICES CENTER - 33 ENCINA AVE - PALO ALTO, CA 94301	77-0033628	501(C)(3)	0.	17,318.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
LIFEMOVES - HOPTEL 2800 ILLINOIS ST EAST PALO ALTO, CA 94303	77-0160469	501(C)(3)	0.	10,431.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
BILL WILSON CENTER 3490 THE ALAMEDA SANTA CLARA, CA 95050	94-2221849	501(C)(3)	0.	69,962.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SOUTH BAY TEEN CHALLENGE 4601 ALUM ROCK AVENUE SAN JOSE, CA 95127	77-0071828	501(C)(3)	0.	64,692.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SJB CHILD DEVELOPMENT CENTERS 1400 PARKMOOR AVENUE, STE. 220 SAN JOSE, CA 95126	94-1747079	501(C)(3)	0.	12,128.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ACHIEVEKIDS 1212 MCGINNESS AVENUE SAN JOSE, CA 95127	77-0412221	501(C)(3)	0.	26,512.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
FARM DRIVE NEIGHBORHOOD CENTER 3110 DAKAN COURT #1 SAN JOSE, CA 95136	94-2390928	501(C)(3)	0.	17,313.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CITY OF SAN JOSE - PARKS REC & NEIGHBORHOOD SVCS - 200 E SANTA CLARA ST - SAN JOSE, CA 95113	45-4028926	501(C)(3)	0.	40,144.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFRICAN AMERICAN COMMUNITY SERVICE AGENCY - 304 N. SIXTH STREET - SAN JOSE, CA 95112	94-2404728	501(C)(3)	0.	82,751.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ORGANIZATION OF SPECIAL NEEDS FAMILIES - 10823 WILLOWBROOK WAY - CUPERTINO, CA 95014	26-0038264	501(C)(3)	0.	21,034.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
YWCA SILICON VALLEY- CHILD CARE CENTERS - 375 SOUTH 3RD STREET - SAN JOSE, CA 95112	94-1186196	501(C)(3)	0.	18,958.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MID-PENINSULA BOYS & GIRLS CLUB 200 NORTH QUEBEC STREET SAN MATEO, CA 94401	94-1431583	501(C)(3)	0.	77,678.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
BOYS & GIRLS CLUBS OF NORTH SAN MATEO COUNTY - 955 YOSEMITE DRIVE - PACIFICA, CA 94044	94-3179959	501(C)(3)	0.	9,400.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
COASTSIDE CHILDREN'S PROGRAMS 494 MIRAMONTES AVENUE HALF MOON BAY, CA 94019	94-2407737	501(C)(3)	0.	94,663.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
BOYS & GIRLS CLUB OF THE COASTSIDE 600 CHURCH STREET HALF MOON BAY, CA 94019	94-3193725	501(C)(3)	0.	17,992.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
BOYS & GIRLS CLUBS OF THE PENINSULA - 2031 PULGAS AVE - EAST PALO ALTO, CA 94303	94-1552134	501(C)(3)	0.	8,942.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SAN MATEO COUNTY SHERIFF'S ACTIVITIES LEAGUE - 3151 EDISON WAY - REDWOOD CITY, CA 94063	45-0617342	501(C)(3)	0.	7,545.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACHIEVEKIDS 3860 MIDDLEFIELD RD PALO ALTO, CA 94303	77-0412221	501(C)(3)	0.	12,813.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
OPEN DOORS TO FUTURE POSSIBILITIES 1550 THE ALAMEDA, SUITE 150 SAN JOSE, CA 95125	83-3226119	501(C)(3)	0.	9,610.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
YMCA OF SV - CENTRAL YMCA 1717 THE ALAMEDA SAN JOSE, CA 95126	94-1156318	501(C)(3)	18,020.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER AND PURCHASE OF SUMMER ADULT MEALS
HOOVER ELEMENTARY SCHOOL/RCS 701 CHARTER ST. REDWOOD CITY, CA 94063	94-2903141	REDWOOD CITY SCH	23,709.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER AND PURCHASE OF FOOD PROCESSORS,WORKTABLES,WIRE SHARE CART KIT
VERBO SOUTH BAY 5038 HYLAND AVENUE SAN JOSE, CA 95127	94-3361715	501(C)(3)	43,669.	366,623.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER AND PURCHASE OF SUPER DUTY F-35 TRUCK
CELEBRATION NATION 3031 TISCH WAY SAN JOSE, CA 95128	85-0510391	501(C)(3)	0.	110,314.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
COVENANT HOUSE CALIFORNIA 2250 EL CAMINO REAL SANTA CLARA, CA 95050	13-3391210	501(C)(3)	0.	22,424.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
KIND HEARTS FOR YOU 205 E. ALMA AVE #D11 SAN JOSE, CA 95112	85-1137897	501(C)(3)	0.	134,766.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
CORNER PANTRY 929 WEDDELL COURT SUNNYVALE, CA 94089	77-0339609	501(C)(3)	0.	34,245.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN JOSE EVERGREEN COMMUNITY COLLEGE DISTRICT FOUNDATION-EVERGREEN VALLEY COLLEGE - 3095 YERBA BUENA RD - SAN JOSE, CA	94-2877474	501(C)(3)	0.	200,165.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SAN JOSE EVERGREEN COMMUNITY COLLEGE DISTRICT FOUNDATION-SAN JOSE CITY COLLEGE J - 2100 MOORPARK AVENUE - SAN JOSE, CA	94-2877474	501(C)(3)	0.	64,088.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
MARTHA'S KITCHEN 311 WILLOW STREET SAN JOSE, CA 95110	91-2091094	501(C)(3)	0.	253,017.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
SAN MATEO COUNTY COMMUNITY COLLEGES FOUNDATION-SKYLINE COLLEGE PANTRY - 3300 COLLEGE DRIVE, BUILDING 1, ROOM 1-214 -	94-6133905	501(C)(3)	0.	49,364.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD	TO PREVENT HUNGER
ANDREW HILL HIGH SCHOOL 3200 SENTER ROAD SAN JOSE, CA 95111	94-6172360	EAST SIDE UNION	5,863.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER - PURCHASE OF MILK COOLER
LAS LOMITAS SCHOOL DISTRICT 1011 ALTSCHUL AVENUE MENLO PARK, CA 94025	94-2952818	LAS LOMITAS SCHO	6,023.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER - PURCHASE OF REACH-IN REFRIGERATOR
SANTA CLARA UNIFIED SCHOOL DISTRICT - 1889 LAWRENCE ROAD - SANTA CLARA, CA 95051	77-0219105	SANTA CLARA UNIF	6,668.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER - PURCHASE OF SUMMER SCHOOL ADULT MEALS
SAN JOSE UNIFIED SCHOOL DISTRICT 855 LENZEN AVENUE SAN JOSE, CA 95126	94-6002606	SAN JOSE UNIFIED	18,126.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER - PURCHASE OF RETHREN OVEN AND REFRIGERATOR
SAN MATEO FOSTER CITY SCHOOL DISTRICT - 1170 CHESS DRIVE - FOSTER CITY, CA 94404	94-3083935	SAN MATEO FOSTER	111,327.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER - PURCHASE OF GAS KETTLE MIXER AND HOT CABINETS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILPITAS UNIFIED SCHOOL DISTRICT 1331 E. CALAVERAS BLVD. MILPITAS, CA 95035	77-0289955	MILPITAS UNIFIED	55,215.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER - PURCHASE OF AGENCY EQUIPMENT
MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT - 750-A SAN PIERRE WAY - MOUNTAIN VIEW, CA 94043	93-0991812	MOUNTAIN VIEW WH	9,703.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER - PURCHASE OF 384 SUMMER SEAMLESS MEALS
SAN JOSE PUBLIC LIBRARY 150 E SAN FERNANDO ST SAN JOSE, CA 95112	77-0142379	CITY OF SAN JOSE	20,475.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER - PURCHASE OF REFRIGERATION
OAK GROVE SCHOOL DISTRICT 6578 SANTA TERESA BLVD SAN JOSE, CA 95119	77-0220148	OAK GROVE SCHOOL	15,657.	0.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD		TO PREVENT HUNGER - PURCHASE OF ELECTRIC RICE COOKERS, WARMING TRAYS, HEATED LAMPS AND SHELVES

Schedule I (Form 990)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FREE GROCERIES	142318	0.	80,339,189.	ACTUAL PURCHASE COST AND FMV OF DONATED FOOD	FOOD

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

FOOD SAFETY TRAINING IS MANDATED AND PROVIDED ANNUALLY. COMPLIANCE IS

TRACKED IN THE COMPUTERIZED INVENTORY DATABASE. A DETAIL PRODUCT

DISTRIBUTION REPORT BY PROGRAM AND SITE IS GENERATED AND REVIEWED ON A

MONTHLY BASIS. INDIVIDUAL MONITORS ARE CONDUCTED EVERY TWO YEARS ON SITE

(AS PER REQUIREMENTS FROM FEEDING AMERICA). AUDIT REPORTS ARE OBTAINED FROM

THE LARGEST AGENCIES AND A RANDOM SAMPLE OF OTHER AGENCIES. THE AUDIT

REPORT IS REVIEWED TO IDENTIFY INTERNAL CONTROL ISSUES TO DISCUSS WITH THE

AGENCY.

Part IV Supplemental Information

1. FILES ARE REVIEWED TO INSURE PROPER DOCUMENTS ARE INCLUDED

A. AGENCY APPLICATION

B. AGENCY AGREEMENT

C. 501(C)(3) DOCUMENTATION

D. PREVIOUS MONITOR FORM

2. ON SITE VISIT CONDUCTED

A. PROPER PAPERWORK ON FILE INCLUDING ORIGINAL CLIENT SIGN-IN SHEETS

B. PROPER FOOD STORAGE

C. PROPER FOOD HANDLING PRACTICES

GRANTS TO PARTNERSHIP DISTRIBUTION AGREEMENT:

SHFB HAS A FORMALIZED PROCESS TO FACILITATE THE EQUIPMENT PURCHASES FOR

COMMUNITY BASED PARTNER DISTRIBUTION AGENCIES. ELIGIBLE AGENCIES MUST

COMPLETE A FUNDING REQUEST FORM. ALL AGENCY REQUESTS FOR EQUIPMENT ARE THEN

REVIEWED AND APPROVED BY A MANAGEMENT REVIEW GROUP USING DEFINED CRITERIA.

SHFB'S COMPETITIVE BID PROCESS WILL BE USED FOR ALL NEW SINGLE PURCHASES

OVER \$10,000 AND ALL MULTIPLE PURCHASES ACCUMULATED OVER THE COURSE OF ONE

YEAR TOTALING OVER \$25,000. ALL AGENCIES RECEIVING SUCH EQUIPMENT ARE

REQUIRED TO SIGN A CONTRACT AND COMPLIANCE IS MONITORED ON AN ONGOING

BASIS. THE AGENCY RETENTION TIME REQUIREMENT FOR THE EQUIPMENT VARIES FROM

2-15 YEARS DEPENDING ON THE EQUIPMENT VALUE.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

SECOND HARVEST OF SILICON VALLEY

Employer identification number

94-2614101

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

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

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

Yes No

1b		
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LESLIE BACHO	(i)	299,126.	60,743.	0.	14,250.	23,405.	397,524.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CATHERINE A. CVENGROS	(i)	229,632.	32,000.	0.	13,219.	10,440.	285,291.	0.
VP OF DEVELOPMENT & MARKET	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) STANLEY EDDE	(i)	228,760.	20,000.	0.	12,725.	19,058.	280,543.	0.
VP OF OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) BRUNO J. PILLET	(i)	197,545.	20,000.	0.	11,309.	23,405.	252,259.	0.
VP OF PROGRAMS & SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) TRACY WEATHERBY	(i)	178,473.	23,000.	0.	10,865.	17,190.	229,528.	0.
VP OF STRATEGY & ADVOCACY	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) NOLAND PIERRE GRANBERRY	(i)	179,760.	15,000.	0.	9,022.	12,893.	216,675.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) BARBARA WILETS	(i)	174,660.	20,000.	0.	9,897.	9,933.	214,490.	0.
VP OF HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 7:

THE ORGANIZATION PROVIDED BONUSES TO KEY STAFF BASED ON THEIR CONTRIBUTION

DURING THE YEAR THAT CONTRIBUTED TO A HIGHLY SUCCESSFUL YEAR.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public
Inspection

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

Name of the organization

SECOND HARVEST OF SILICON VALLEY

Employer identification number

94-2614101

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	19	46,625.	FAIR MARKET VALUE
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	306	4,937,639.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other ...				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	60	168,217,314.	FEEDING AMERICA VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (FREIGHT)	X	153	173,380.	FMV
26 Other ▶ (SUPPLIES AND)	X	19	50,399.	FMV
27 Other ▶ (GIFT CERTIFIC)	X	15	17,831.	FMV
28 Other ▶ ()				

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

29

2

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

	Yes	No
30a		X
31	X	
32a	X	
33		

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

Schedule M (Form 990) 2021

Part II

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

SCHEDULE M, PART I, COLUMN (B):

THIS NUMBER REPRESENTS THE NUMBER OF CONTRIBUTORS, NOT THE NUMBER OF
ITEMS CONTRIBUTED.

SCHEDULE M, LINE 32B:

SECOND HARVEST OF SILICON VALLEY UTILIZES A FINANCIAL INSTITUTION TO
LIQUIDATE GIFTS OF STOCK.

CHARITABLE ADULT RIDES & SERVICES, INC

4669 MURPHY CANYON ROAD, SUITE 200

SAN DIEGO, CA 92123

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

SECOND HARVEST OF SILICON VALLEY

Employer identification number

94-2614101

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

WHILE VACCINES ARE WIDELY AVAILABLE AND BUSINESSES HAVE REOPENED, THE

ECONOMIC ENVIRONMENT HAS ONLY WORSENERD DUE TO INFLATION. RECORD-HIGH

FOOD AND GAS PRICES, A HOUSING SHORTAGE AND THE FINANCIAL DEVASTATION

CAUSED BY THE PANDEMIC HAVE PROMPTED ANOTHER SURGE IN THE NEED FOR FOOD

ASSISTANCE. SECOND HARVEST DOES NOT BELIEVE THE LEVEL OF CLIENTS

REQUIRING ITS SERVICES WILL DECREASE TO PRE-PANDEMIC LEVELS. SECOND

HARVEST IS CONTINUING TO SERVE 450,000 PEOPLE ON AVERAGE EVERY MONTH,

AND THE CLIENT NUMBERS ARE TRENDING UP AS THE CHALLENGING ECONOMIC

CONDITIONS CONTINUE. SECOND HARVEST ANTICIPATES THIS LEVEL OF FOOD

INSECURITY WILL CONTINUE.

DURING THE PANDEMIC SECOND HARVEST TRANSITIONED FROM WALK-UP TO

DRIVE-THRU DISTRIBUTIONS PROVIDING PRE-BOXED FOOD TO ENSURE THE SAFETY

OF ITS CLIENTS, VOLUNTEERS AND STAFF. DRIVE-THRU GROCERY DISTRIBUTIONS

OFFER CLIENTS A PRE-SELECTED MIX OF FOODS, WHILE SECOND HARVEST'S

WALK-UP FARMERS' MARKET-STYLE DISTRIBUTIONS ALLOW CLIENTS TO CHOOSE

ONLY THE FOODS THEY WANT. AS SECOND HARVEST MOVES FORWARD, IT HAS

FOCUSED ITS EFFORTS ON CONTINUING TO SAFELY PROVIDE ENOUGH FOOD TO MEET

THE HIGHER DEMAND, WHILE TRANSITIONING SOME SITES BACK TO FARMERS

MARKET STYLE DISTRIBUTIONS. SECOND HARVEST'S MIX OF DISTRIBUTIONS USING

BOTH THE CHOICE AND DRIVE-THRU MODELS HAS ALLOWED IT TO BETTER MEET ITS

CLIENTS NEEDS. IN ADDITION, SECOND HARVEST CONTINUES TO DELIVER

PRE-BOXED GROCERIES TO AN AVERAGE OF 4,900 HOUSEHOLDS WITH HOMEBOUND

SENIORS AND HIGH-RISK INDIVIDUALS.

Name of the organization SECOND HARVEST OF SILICON VALLEY	Employer identification number 94-2614101
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DURING FISCAL YEAR 2022, SECOND HARVEST DISTRIBUTED 130 MILLION POUNDS

OF FOOD NEARLY 11 MILLION POUNDS PER MONTH, VERSUS 144 MILLION POUNDS

DELIVERED IN FISCAL YEAR 2021. WHILE THE TOTAL POUNDS DECREASED YEAR

OVER YEAR, THE AMOUNT OF FOOD DELIVERED IN FISCAL YEAR 2022 EXCEEDED

PRE-PANDEMIC LEVELS BY 90%, UP FROM 69 MILLION POUNDS IN 2019. MEETING

THE INCREASED NEED FOR FOOD ASSISTANCE IN OUR COMMUNITY HAS CONTINUED

TO BE A CHALLENGE AS SECOND HARVEST IS CURRENTLY OPERATING OUT OF FOUR

LOCATIONS, ONE OF WHICH WAS SPECIFICALLY LEASED TO SUPPORT ITS

INCREASED DISTRIBUTION NEEDS DURING THE PANDEMIC. WHILE THE LEASED

FACILITY CONTINUES TO BE A CRITICAL COMPONENT OF SECOND HARVEST'S

OVERALL OPERATIONS, SECOND HARVEST HAS REALIZED THAT OPERATING OUT OF

FOUR SITES IS NOT SUSTAINABLE. AS A RESULT, DURING FISCAL YEAR 2022,

SECOND HARVEST OF SILICON VALLEY ACQUIRED 10.4 ACRES OF LAND IN NORTH

SAN JOSE WITH THE INTENTION OF BUILDING A NEW OPERATIONS WAREHOUSE THAT

WILL ALLOW IT TO CONSOLIDATE ITS EXISTING FOUR OPERATING WAREHOUSES

INTO ONE LOCATION. SECOND HARVEST BELIEVES THE NEW FACILITY IS CRITICAL

FOR IT TO IMPROVE AND EXPAND ON ITS ABILITY TO DELIVER A NUTRITIOUS MIX

OF FOODS TO THE COMMUNITY.

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

THE PROCESS THE ORGANIZATION USES TO REVIEW 990:

THE CFO OR INTERIM CFO REVIEWS THE DRAFT FORM 990 AND ADDRESSES ANY FOLLOW

UP QUESTIONS WITH THE AUDITORS. THEN THE FORM 990 IS SUBMITTED TO THE BOARD

FOR THEIR INPUT. ANY IDENTIFIED ISSUES ARE RESOLVED AND THE FORM 990 IS

FINALIZED.

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

Name of the organization SECOND HARVEST OF SILICON VALLEY	Employer identification number 94-2614101
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MONITORING AND ENFORCING COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY:

CONFLICT OF INTEREST STATEMENTS ARE COMPLETED AND SIGNED BY EMPLOYEES AND BOARD MEMBERS. EMPLOYEE STATEMENTS ARE REVIEWED BY HR AND CORPORATE COUNSEL TO IDENTIFY ANY POTENTIAL CONFLICTS REQUIRING FURTHER REVIEW BY THE CEO. BOARD MEMBER STATEMENTS ARE REVIEWED AND ANY POTENTIAL CONFLICTS ARE COMMUNICATED TO THE CEO. ANY BOARD MEMBER STATEMENTS REQUIRING FURTHER CONSIDERATION ARE COMMUNICATED TO THE BOARD FOR FINAL DECISION.

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

IN ORDER TO REVIEW AND APPROVE THE RECOMMENDED SALARY INCREASES FOR MEMBERS OF THE LEADERSHIP TEAM AND THE CEO, THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS REVIEWED COMPILED MARKET DATA PROVIDED BY VARIOUS SURVEY SOURCES FOR EACH POSITION INCLUDED COMPARABLE POSITIONS IN LOCAL NON PROFIT ORGANIZATIONS AND IN SELECT LARGE URBAN AREAS NATIONALLY. IN ADDITION, THE COMMITTEE REVIEWED THE COMPENSATION OF EACH INDIVIDUAL BASED ON MARKET DATA, INPUT ON PERFORMANCE AND ACHIEVEMENTS, AND CONSIDERED THE PRIOR YEAR ADJUSTMENTS. SPECIFIC TO THE CEO, THE COMMITTEE REVIEWED LOCAL MARKET DATA AND SPECIFIC PEER DATA ON CEO POSITIONS IN LARGE URBAN CENTERS THAT ACTIVELY PARTICIPATED WITH FEEDING AMERICA. BASED ON THE REVIEW AND CONSIDERATION OF MARKET DATA AND PERFORMANCE INFORMATION FOR EACH LEADERSHIP POSITION, THE COMMITTEE FULLY SUPPORTED ALL BASE SALARY AND BONUS RECOMMENDATIONS, AND SIGNED APPROPRIATE DOCUMENTATION TO EFFECTUATE COMPENSATION CHANGE. THIS IS AN ANNUAL PROCESS. THE PROCESS WAS LAST COMPLETED IN SEPTEMBER 2021.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

CA,AL,AK,AR,CO,FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,MS,MN,NH,NJ,NM,NY,NC,ND,OH,SC

Name of the organization

SECOND HARVEST OF SILICON VALLEY

Employer identification number

94-2614101

TN, UT, VA, WA, WV, WI, CT, OK, OR, PA, RI, DC, LA, NV

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

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL

STATEMENTS ARE POSTED ON THE ORGANIZATIONS WEBSITE AND ALSO AVAILABLE UPON

REQUEST.