



OREGON FOOD BANK

Impact Report 2022

The Good Comes

“Local food purchasing kept some of our local grocery stores afloat during the pandemic.”

A friend and colleague, Tyler Johnson, said these words to me recently. He leads the regional food bank at Community Action Program of East Central Oregon (CAPECO) in Pendleton, providing essential resources and services in Morrow, Gilliam, Wheeler and Umatilla counties.

Tyler’s comment made me think of the Spanish proverb: *“No hay mal que por bien no venga,”* or *“There is nothing bad from which good doesn’t come”*.

We have been through a dreadful few years together. More than a million lives have been lost to COVID-19. Hunger remains at a historic high due to pandemic impacts and high inflation; I anticipate that a breathtaking 1.5 million neighbors will ask for food assistance in our region this year. And communities that have experienced disproportionate rates of hunger for decades have been particularly impacted.

And yet, as my friend observed: out of the bad, the good comes. With unprecedented, sustained support from the State of Oregon and this incredible community, our Oregon Food Bank Network has purchased food in huge quantities and in new ways. CAPECO purchased food at small grocery stores to help meet the demand for food assistance in

the region — supporting local businesses and economies along the way.

The past few years have also shown how much we all depend on neighbors who grow and harvest our food. Alongside many allies, we passed new legislation to protect farmworkers in hot conditions and ensure fair pay for long hours. This major victory wouldn’t have been possible without strong, local leadership — and we’ve invested in the Ambassador program, our Policy Leadership Council, in community grower support, and through regional food banks like CAPECO and Columbia Gorge.

Together, we have weathered the worst rates of hunger in a century. We’ve shown that we can advance public policy to solve hunger at its roots. And most importantly, we are — all of us — more embedded in our communities.

The good comes. We are emerging stronger.

With love and respect,



Susannah Morgan
CEO, Oregon Food Bank





Communities That Never Go Hungry: Our Vision in Action

Meeting Unprecedented Challenges

It's no secret that our communities continue to face significant economic disruption in the wake of COVID-19, now coupled with shocks to global food and fuel supplies. **Nearly 1 in 5 Oregonians experienced income and job loss in recent years.**

And the impact fell hardest on the communities that have faced disproportionate hunger and poverty for generations — Black, Indigenous and Communities of Color, immigrants and refugees, single moms and caregivers, and our trans and gender non-conforming neighbors. As a result, the **Oregon Food Bank Network** saw an unprecedented need for emergency food assistance throughout Oregon and Southwest Washington — nearly 1.7 million people in 2020 and over 1.2 million in 2021.

Many of us are still recovering from the impacts of the pandemic, and any additional pressure on income or the cost of living makes it even more difficult for families to make ends meet. There's no doubt that the rising cost of food and fuel is worsening food insecurity here in Oregon and across the country.

The cost of groceries alone is up at least 10% overall — even higher when we look at the cost of meat, fish and dairy. This is happening at a time when

lower-income households already spend more than a third of our budgets on food.

Whether through our emergency food assistance network or critical programs like SNAP and WIC, the number of people seeking support is again on the rise. A local pantry shared that demand for food assistance was up 34% over last year, on top of the huge increase they saw in 2021. Free food markets in the Portland area reported seeing more than a thousand new families in a single month, many who aren't able to make ends meet even with two full-time incomes. In the Gorge, agencies are working with many families they haven't seen since the peak of the pandemic. And the amount of food local agencies are ordering from our central warehouse is up overall — a key indicator of rising demand.

This is an incredibly challenging time for people throughout the region — and the need for continued support is real. It took an incredible, unprecedented government and community response to prevent hunger from becoming another symptom of COVID-19. And the latest wave of COVID and inflation pressures remind us that we can't afford to slow down in our response to this crisis.

Coming Together for Change

Across the Oregon Food Bank Network, we see the economic impact of the pandemic and rising food and fuel costs each and every day. But we have also seen our communities rise together to address hunger at its roots. We have seen an outpouring of community generosity through time, money and energy that has been nothing short of phenomenal. We have cared for each other in large and small ways — uncovering new power to drive collective change along the way.

The layered challenges we've faced reinforce what many of us have long known: that hunger is not just an individual experience or lone empty stomach. Hunger is a communitywide symptom of exclusion, of not having enough — not having enough nutritious food, enough income, enough power, enough representation in decisions that affect us. Hunger is a symptom of barriers to employment, education, housing and healthcare. We all experience the effects of hunger in our communities. And together, we can build communities that share responsibility for each other and the common good. We can build communities where every voice matters. We can build resilient communities that never go hungry.



Realizing Our Bold Vision

Through dedication, persistence and daily action, we've shown that ending hunger in Oregon and Southwest Washington is possible. It's a vision that requires us to meet both the incredible needs spurred by the pandemic and address the policies and systems that drive hunger and poverty. As an organization that touches rural, urban and suburban communities in every corner of our state — and building on the power of food as a shared human experience that connects us all — we have a unique role in mobilizing action to support the long-term health and resilience of our communities.

So, over the next four years, we've committed to:

ENSURE food access throughout the region. We will continue to evolve our food assistance network to meet the dietary, cultural and health needs of all who live in Oregon and Southwest Washington.

EXPAND community leadership at all levels of decision-making. We will increase the presence and power of equity constituencies in every aspect of our work — from partnerships and policies, to staffing and governance.

ADVANCE and expand the Food Justice movement. We will strengthen our partnerships and investments to support the leadership of Black, Indigenous and all People of Color who founded and sustain the Food Justice movement.

CULTIVATE equitable food systems. We will expand access to land and agricultural resources in ways that support the leadership of equity constituencies and honor food workers.

SPREAD the true story of hunger. We will uplift stories and narratives that fundamentally shift common understanding of food insecurity, its root causes and the actions needed to end hunger for good.

STRENGTHEN organizational systems. We will continue to transform our information, fiscal and administrative systems to center equity, love and justice, ensure long-term sustainability, and advance our 10-year vision.

To read more about our vision and commitments to equity and racial justice, visit

OregonFoodBank.org/Vision

By the Numbers

149,572

financial donations, including 7,701 new supporters and 7,189 monthly sustainers

3,500+

actions to advance anti-hunger policy and systems change

12,273

volunteer shifts and actions to help end hunger and its root causes

58%

of all food distributed as fresh or frozen produce, dairy and protein

521,000+

community members found resources via FoodFinder across 14 languages

44.4 million

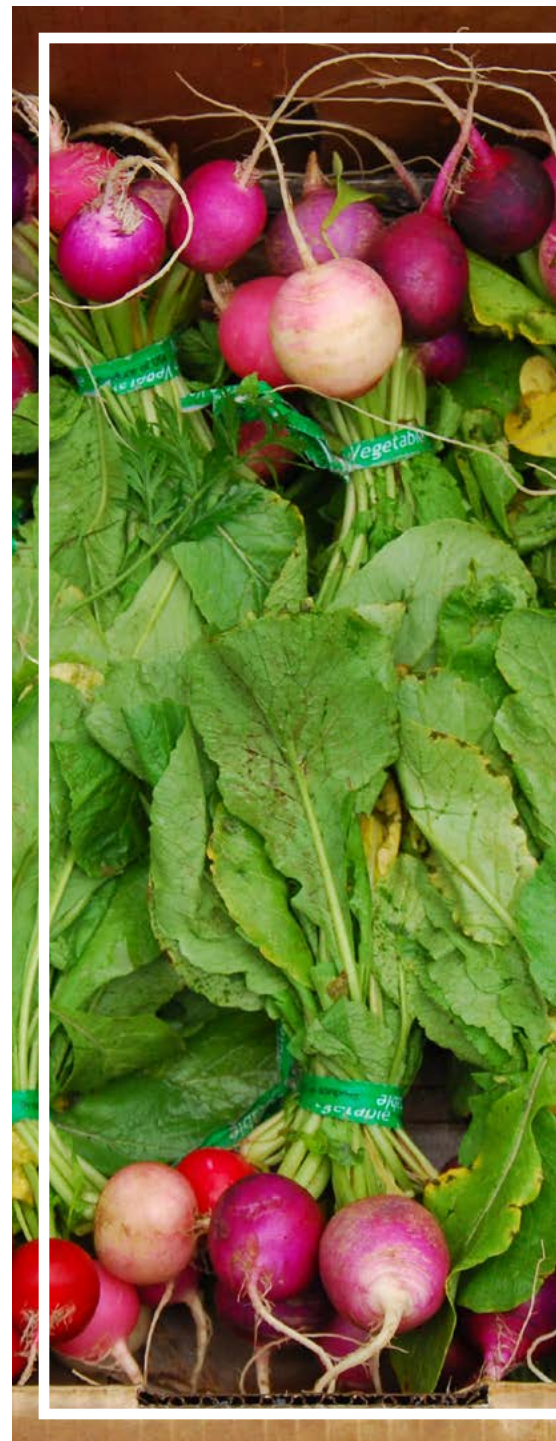
meals shared across our Network

\$608,000

in Double Up Food Bucks to support families' fresh produce purchases

\$330,000

invested in local food production with BIPOC farmers, Native and Tribal fishers



Addressing Hunger Through Policy Change

Our Policy Leadership Council (PLC) is paving the way toward a future without hunger. In its first full year of leadership at Oregon Food Bank, the Council — made up entirely of community leaders with lived experience of hunger and its root causes — has shortened the distance between

those of us who experience hunger and the decisions that affect us.

This year, the Council put forward a bold agenda of key policy changes and investments to help our communities recover from the pandemic and begin to emerge stronger. Our agenda recognizes

that the root causes of hunger — including poverty, racism, sexism and classism — are systemic. Because of this, the solutions must be systemic too.

Across the state, more than 1,000 members of the Oregon Food Bank community joined partners and allies to advocate for change. Together, we championed policy solutions to the root causes of hunger during a short, five-week legislative session — making our voices heard through calls, texts, emails and public testimony.

As a result, our communities won a host of important policies and legislative investments to #EmergeStronger! This translated to huge strides forward on community-led priorities to enhance racial justice, immigrant rights, economic and food security,



stable homes for all, access to childcare and much more – including:

- **\$87 million invested in our emergency food assistance network** and direct support through the Oregon Worker Relief Fund to families facing hunger and poverty
- **Overtime Protections for Farmworkers** ended Jim Crow-era exclusions from overtime protections and pay for 86,000+ essential agricultural workers
- **Affordable Housing and Houselessness Prevention** invests \$400 million in safe, stable homes for all to address challenges faced by those without stable housing, build and preserve affordable housing, and support homeownership
- **Transforming Justice:** Advanced racial justice by reducing disparities in traffic stops, improving success for people on probation and parole, and investing in communities

Combined, our advocacy at the local, state and federal levels has helped us address hunger at its roots!



“When the individuals who are experiencing the impacts of decisions every day are not at the table, it means we make many policy mistakes that have major implications for people’s lives. And for decades, farmworkers have been excluded from labor rights most workers take for granted.

Farmworkers deserve equal treatment, and the same quality of life as any other workers. They do some of the most important, hard, and dangerous work in one of the largest sectors of our state economy, and they are essential in feeding families across Oregon. We anticipate this legislation will mean a better quality of life for farmworkers – and I am excited to continue the work with our critical partners from the Farmworker Overtime coalition to make Oregon a better place for everyone.”

– **REYNA LOPEZ OSUNA**
Executive Director, PCUN

We Can Take Action Now to Guarantee Food for All Oregonians

Hunger was a crisis in our communities before the pandemic, and the health and economic impacts of COVID-19 have fallen hardest on newly-arrived Oregonians. Immigrants, refugees and Compact of Free Association (COFA) community members, in particular, have long faced higher rates of hunger and poverty in Oregon. Just one example: Latine and Pacific Islander families experienced hunger at twice the rate of White Oregonians pre-pandemic – and this gap has only widened as our communities continue to struggle in COVID’s wake.

Despite significant investments, state food assistance policies continue to leave more than 62,000 Oregonians behind, with programs that exclude huge portions of our communities. Shame, stigma and language barriers are built into existing rules, within a system that traces back to a long history of racism and White supremacy in Oregon. These systemic challenges are layered on top of specific exclusions from vital programs like SNAP (sometimes called “food stamps”) based on immigration status.

Hunger affects everyone in our communities in some way – and when we all have access to food, we’re all better off. Kids do better in school, our families’

health and well-being improves, and our economy thrives through support of local businesses. This is true in every corner of Oregon – in rural, urban and suburban communities alike – and we’re building the community power needed to make food for all Oregonians possible.

That’s why the Food for All Oregonians coalition has introduced legislation to create a state-funded program that ensures everyone in Oregon has access to the food we need. This game-changing policy will:

- Make food assistance available to all Oregonians who are currently excluded due to immigration status
- Provide families with money for groceries that matches federal SNAP food assistance benefits
- Ensure everyone is aware of this vital support through community navigation and outreach, improved language access and more

Together, we’re creating a system that benefits everyone in our communities. Join us and get involved in the campaign to guarantee Food for All Oregonians at Contact@FoodForAllOR.org



“Everyone has the right to food. Food that is accessible, culturally appropriate, and nutritious... [Food for All Oregonians] will be a community-led and community-focused program that will create state funding to fill status-related gaps in SNAP. Food for All Oregonians (FFAO) will address food insecurity for many Oregonians, especially for those who currently face a limbo in their immigration status or are in mixed status households and therefore are not eligible for state or federally funded food assistance programs. Food is a human right. No one in our state should have to go hungry.”

— **PETRONA DOMINGUEZ FRANCISCO**

Adelante Mujeres
Leadership and Advocacy Program Coordinator,
FFAO Steering Committee Member

Ambassadors at the Intersection of Food and Civic Engagement


As a **Supplemental Nutrition Assistance Program (SNAP) Outreach Ambassador**, Denis Nyongesa has made transformative changes within the Swahili-speaking community in Washington County. He works primarily to increase food security and improve individuals' experience with SNAP.

Denis recognizes that hunger is not an individual experience. It is inextricably linked to barriers to employment, education, housing and health care. That's why he begins not with the goal to address a single issue or need, but to build community – to create a space where Swahili-speaking individuals and families feel safe and empowered. A space where parents support each other with childcare, friends give each other rides to the ballot box and

families grab their shovels to help each other build garden plots in their backyards.

To Denis, this sense of community is the foundation that must be laid before it is possible to imagine and work toward a world without hunger. His activism has mobilized the Swahili-speaking community to grow culturally-specific food, register people in the community to vote through grassroots organizing, and increase access to COVID-19 vaccinations.

"No one is an island," Denis shares. "We all need each other. Sometimes we don't realize that, but in the long run, when something hits, when something comes up, I realize that I can't do it on my own. I need help. And that's why we need our community."

A man wearing a blue baseball cap, sunglasses, a black t-shirt with a Columbia logo, and dark pants is leaning over a chain-link fence. He is wearing work gloves and appears to be working in a garden. The garden contains various plants, including tall corn stalks and leafy greens. The background shows a grassy area and trees under a bright sky.

“I believe that no one should go to bed hungry. I’ve grown up sharing and caring about other people. And if I can help someone in that aspect, I don’t see why I should not.”

— DENIS NYONGESA
SNAP Ambassador

To learn more, visit
OregonFoodBank.org/Denis

Mano Amiga: Mobilizing Communities to End Hunger

Just before the pandemic began, a group of Latine community leaders met to learn about gardening and medicinal herbs at the Oregon Food Bank Learning Gardens. From there, the Latinx Leaders group became deeply involved in civic engagement and community activism efforts – ensuring community members were registered to vote and counted in the 2020 Census.

As the group prepared for door-to-door and in-person civic engagement work, COVID emerged. So they evolved to host phone banks and virtual gatherings, along with information sessions about the legislative session and opportunities to provide testimony. Along the way, an increasing number of community members expressed concern about the pandemic's impact on food access. With support from Oregon

Food Bank, the leaders launched a series of food distributions in the community.

Now known as Mano Amiga, the group has expanded to two regions, hosting bi-monthly food distributions that support hundreds of local families. Their work has helped deepen relationships with other members of the Spanish-speaking community.

Mano Amiga is a beautiful example of many groups across Oregon and Southwest Washington working to increase access to culturally-specific food and mobilize communities to address the root causes of hunger. Their incredible work further proves that communities facing food insecurity are in the strongest position to lift and develop solutions to hunger.



New Investments to Help End Hunger in the Gorge

Sparked by a foundational investment from Anne Naito-Campbell and generous community support, Columbia Gorge Food Bank (CGFB) broke ground this year at their new warehouse and community food center. A much-needed resource for the community, this new home not only positions CGFB to expand food assistance today, but also works to create long-term food security for the entire region.

Opening in late 2022, Columbia Gorge Food Bank's new 11,000-square-foot permanent home will boast a learning kitchen for classes, space for volunteers to receive and repack donations from local farmers, and hybrid meeting space for community partners to host workshops, trainings and more. Longtime partners at Windy River Gleaners Food Pantry and The Dalles Community Backpack Program will co-locate in the Community Food Center, helping the organizations serve the community with new infrastructure and space to grow.

The expansion of access to free, nutritious food and broader anti-hunger efforts comes at a critical time for local families. The Columbia Gorge Food Bank currently serves over 5,000 families per month across more than 35 community partners – so additional space for food storage and distribution is urgently needed. When complete, the new space will dedicate five times more warehouse and community space to the local fight to end hunger and its root causes.

"Until now, this has been one of the most underserved regions in Oregon – and at the outset of the pandemic, there were parts of this region that received no service whatsoever," said Sharon Thornberry, Columbia Gorge Food Bank manager. *"With this new building and resource for the community, we are doing something that not only sets us up to expand food assistance now, but also builds long-term food security for the whole region."*



‘Doubling Up’ Access to Fresh Produce for Area Families

The Supplemental Nutrition Assistance Program (often called “SNAP” or “food stamps”) is one of the most direct, efficient ways to increase food security. The Double Up Food Bucks program extends these benefits to increase shoppers’ purchasing power with a dollar-to-dollar match on fresh fruits and vegetables, herbs and plant starts. Double Up is available at participating grocery stores, farmers markets and Community Supported Agriculture (CSA) operations across the state.

Double Up Food Bucks also provides an important financial boost to local farmers and grocers. This year, Oregon families purchased more than \$600,000 worth of fruits and vegetables through the program – with more than a quarter of those funds spent at culturally-specific and BIPOC-owned stores. And with support from Oregon Food Bank, Farmers Market Fund and Pacific Northwest CSAs, Double Up is now available in 18 counties! This includes an incredible expansion to 15 new grocery stores in the past year – including Organics to You, Yadanar Halal Market, Fubonn Supermarket, Fossil Mercantile, Chester’s Market (John Day) and Market Place Fresh Foods (La Grande).





How You Can Get Involved

Our vision for resilient communities that never know hunger is only possible through the strength of our community partnerships. There are many ways for you to get involved in the fight to end hunger for good!

Become a Partner

CORPORATE AND ORGANIZATIONAL PARTNERS: Engaged, socially-responsible corporate and organizational partners are key to ending hunger and hunger's root causes. We seek values-aligned collaborators that share our vision – whether through fundraising drives, group volunteer shifts or other local partnerships.

FOOD INDUSTRY PARTNERS: A significant portion of the food we distribute comes through the generosity of incredible partners in the food industry – from local growers, packers, retailers, manufacturers and more. We seek food industry partners that are looking for innovative ways to make their product or expertise stretch further to help the communities we live and work in. Our food resource developers ensure that the fruits of your labor support area families in need of food assistance.

COMMUNITY PARTNERS: Throughout the region, we work with a wide variety of community partners

to advance our mission of eliminating hunger and its root causes. From running food pantries and free food markets, to supporting local BIPOC and Indigenous farmers, to grassroots organizing around anti-hunger policies, we are honored to work with so many passionate and committed individuals and organizations.

Volunteer to support the nearly 1 in 5 community members who have faced hunger in the pandemic's wake. Through your time and effort, there are many ways to support the movement to end hunger and its root causes.

We continue to offer socially-distanced volunteer shifts at our warehouses and out in the community, along with opportunities to make a difference from the comfort of home. Please check our website for the latest shifts and events!

Join us to build a powerful movement. Oregon Food Bank's Advocacy team works year-round to advance anti-hunger policies at the local, state and federal level. Through the concerted efforts of people like you, we can ensure that decision-makers get the message: our communities need investments to keep food flowing today, and we need systemic change to end hunger for good.

Become a Monthly Sustainer as an easy, convenient way to support our work throughout the year. Set up your recurring gift and we will take care of the rest.

Join our Legacy Circle and ensure that your family has a lasting impact through a planned gift to Oregon Food Bank. You can designate a percentage or specific dollar amount and revise at any time.

We greatly appreciate all you do to help end hunger and its root causes! Our team is here to support our shared vision, so please don't hesitate to reach out at Contact@OregonFoodBank.org, 503.282.0555 or @oregonfoodbank on social media.



"Donating helps you see the impact you can have on the world, no matter how big or small it is."

— CATHY
Monthly Sustainer

Together, we can end hunger and its root causes for good.

Learn more and get involved at
OregonFoodBank.org/Get-Involved



@oregonfoodbank

OregonFoodBank.org | 503.282.0555



OREGON FOOD BANK

Impact Report 2023

We Have to Face Hunger as an **Ongoing Crisis**



HERE'S A HARD TRUTH WE ALL HAVE TO FACE: hunger is terrible right now. The number of people experiencing hunger in our communities is unbearably high.

More than 860,000 neighbors sought food assistance through the Oregon Food Bank Network in 2019. By comparison, we worked with upwards of 1.5 million people in 2022, and we expect to see more than a million in 2023. That's the highest demand I've seen in my lifetime — and very likely the worst hunger crisis we've faced since the Great Depression.

We hear time and again from parents, seniors and young people alike that food and housing prices are still too high to make ends meet with the type of jobs and pay that are available — let alone for folx on fixed incomes like social security. These affordability challenges have gotten worse just as pandemic-related supports began to sunset. More than 750,000 Oregonians saw a drastic cut to grocery budgets, and many of these families showed up at food assistance sites.

Disasters driven by climate change don't help either. The vast majority of food banks around the country

this year spent time in emergency response mode — from wildfires, to tornadoes, to tropical storms and flooding. This near-constant disruption to our lives and livelihoods is yet another reminder that we have to face hunger as an ongoing crisis, with actions to match.

Thank you for the many incredible ways this community shows up each day. It's through your love and support that Oregon Food Bank has remained strong, forward-looking and rooted in values of equity and justice. That same love and support kept food assistance flowing throughout the pandemic; it ensures that our local food systems are strong and resilient; and it will help us dismantle the systems that drive poverty in our communities.

Hunger is an ongoing crisis. And with your ongoing love and support, we can end it for good.

Susannah Morgan

President, Oregon Food Bank





From Crisis Response to Food Justice

In one way or another, we've all experienced the impacts of rising prices and widening inequality in recent years. Groceries today are nearly 20 percent more expensive than they were in 2020. In that same time period, the number of people living outdoors or without permanent housing has increased 22 percent. The housing affordability crisis in many parts of Oregon has left more than half of people who rent their homes without enough money to afford essentials beyond housing. Making matters worse, federal supports that improved the affordability of food, housing and childcare during the pandemic all expired even as prices continued to rise.

For those of us who were already living paycheck-to-paycheck, these trends have forced impossible choices between putting food on the table, keeping a roof over our heads and paying for healthcare. And we know that these realities are much worse

for communities that have long faced disproportionate hunger and poverty – including more than 62,000 Oregonians who are excluded from cash food assistance and vital government-run programs simply because of arbitrary factors like immigration status.

With what feels like ever-shrinking options, families throughout Oregon and Southwest Washington have increasingly turned to our emergency food assistance system for support. Free food markets, pantries and meal sites across the Oregon Food Bank Network have seen record-high demand over the past year, even as our own food, transportation and shipping costs rise.

Yet through it all, we've persevered with this community's shared belief in food justice. We believe that food is a human right. That everyone deserves access to fresh, nutritious food – no matter where we live, where

we're from or the color of our skin. That communities must make our own decisions about the food we produce, distribute and consume. That we must preserve native and traditional land stewardship practices that have fostered sustainable food systems for generations.

Our freedom, our health and our ability to thrive all depend on access to food. Yet we know we can't truly end hunger through food alone. We have to take action to prevent hunger from happening in the first place. That's why we pursue systemic solutions that help families keep food on the table today and address the challenges that drive food insecurity in our communities. Together, we're building a movement toward food justice – one that is led and fueled by people who are most impacted by hunger and poverty. And together we can eliminate hunger and its root causes... *because no one should be hungry.*



By the Numbers

BUILDING A MOVEMENT

44,700+

44,700+ volunteer hours completed among more than 8,600 volunteers committed to ending hunger and its root causes

3,000+

3,000+ people and over 50 events drove action to advance anti-hunger policy and systems change

OUR BELOVED COMMUNITY

38,000+

38,000+ donors collectively gave over \$21 million – with the most common gift of \$25 given 16,000+ times

\$1.8 million

\$1.8 million invested in local food production supporting 136 BIPOC farmers and Native and Tribal fishers

FREE, NUTRITIOUS FOOD FOR ALL

53%

53% of all food distributed as fresh or frozen produce, dairy and protein

48+ million

48 million meals worth of centrally-sourced food – part of 73 million distributed across the OFB Network

\$1.4 million

\$1.4 million in fresh produce purchases through Double Up Food Bucks in 32 grocery stores across 20 counties in Oregon

720,600+

720,600+ community members accessed resources via FoodFinder across 14 languages



Centering Our Community

THE MOST VALUABLE INSIGHTS and effective solutions come from those of us who have experienced hunger and its root causes first-hand. And here in Oregon and Southwest Washington, there are specific communities that face disproportionately-high rates of hunger across rural, urban, suburban and remote areas:

Black, Indigenous and all People of Color (BIPOC):

Hunger and poverty disproportionately impact BIPOC communities in every corner of Oregon and Southwest Washington, as a result of systemic racism and historical injustices. According to data from the **Oregon Center for Public Policy**, Black and Latine households in Oregon are twice as likely to experience poverty as White households.

Immigrants and refugees:

1 in 5 **Oregonians born outside of the U.S. live in poverty**, the number one driver of hunger. Almost 80 percent of Latine immigrant parents surveyed in Oregon in 2020 reported being worried whether food would run out before they had enough money to buy more.

Trans and gender-expansive communities:

In Oregon, gender expansive and Two-Spirit individuals face significantly higher rates of food insecurity. According to a **survey conducted in 2022 by the Williams Institute at UCLA**, 20 percent of transgender adults compared to eight percent of cisgender adults experienced food insecurity.

Single mothers and caregivers:

Single mothers face the highest food insecurity rates in the United States and the majority are paid poverty wages. Here



in Oregon, 1 in 3 single mothers lives below the poverty line — and for Black, Indigenous and Latine single mothers, that figure is 1 in 2, reinforcing the fact that **poverty and hunger are worse and more pervasive** for those who hold intersecting identities.

We hold the lived experience and expertise of these communities at the center of every decision we make — from the food we source, to the programs we invest in, to the anti-hunger policies we support. And this expertise underscores what so many of us have long known: that hunger is not an individual experience or circumstance. Hunger is a community-wide symptom of unequal access and barriers to employment, education, housing and health care — of a lack of voice and representation in major decisions that impact our families.

That's why it is so important that we continue to address the systemic injustices that drive hunger and poverty — including the intersections of racism, classism, sexism, settler colonialism and more. And with lived experience in the lead, we continue to make progress toward a hunger-free future.

Leading With Lived Experience

The majority of the Oregon Food Bank team has experienced hunger and/or its root causes, and our shared experiences inform the work we do every day. Celia Ferrer, Oregon Food Bank's Community Philanthropy Associate Director, describes how her personal experience with hunger and its root causes drives her work.



"I'm an immigrant and a single mother," Celia shares. "My primary motivation is to be able to give my kids and everyone's kids the best chance at life. I live and breathe that hope."

Celia also speaks to the importance of ending stigma and shame around food assistance and understanding that hunger is not a personal choice: "Hunger is not a personal issue; it's an issue that is born of systemic inequalities that exist in our society. And so I feel strongly about being able to contribute to reshaping this society. That means eliminating the root causes of hunger and looking at the systems we operate in — from food distribution to production."

Celebrating Community Leadership with Guerreras Latinas

Our network of community-based, grass-roots partners like **Guerreras Latinas** — an organization that offers Spanish-speaking women a safe space to connect, access resources and opportunities to empower themselves through information — shows how those of us with lived experience are the experts on ending hunger.

Guerreras Latinas removes barriers to education and resources by offering classes, workshops, and training — along with child care, hot meals and transportation to and from community events.. Women come together to advocate and make transformative changes to community conditions, making it possible for everyone to thrive., Through mutual support, women build healthier relationships with their children and partners, gain skills in financial management, access improved health care benefits and so much more. Many participants have purchased new homes,

made successful financial investments and started new businesses — successes the organization’s leaders attribute to the power of listening and learning with the community.

“The only thing we do is listen,” shares Guerreras Latinas Executive Director, Yoana Molina Marcial. “Our community is filled with desires and a lot of dreams. I believe that by listening carefully to how they are repeated over and over again, we can help them turn those wishes and dreams into goals and connect them to resources and services to help them achieve them.”

We’re excited to deepen Oregon Food Bank’s partnership with Guerreras Latinas through a new **FEAST grant** that supports organizing efforts with Latine families in East Multnomah County. The future of food security and food sovereignty in the community has never been brighter!







Transformative Investments to **End Hunger**

WE KNOW THE ROOT CAUSES OF HUNGER are systemic — and achieving our mission requires the kind of transformative, systemic change that ensures everyone has access to the food we need today and tackles hunger at its roots.

Over the past year, Oregon Food Bank invested heavily in programs and infrastructure that will transform our region and our community's experience — dismantling the barriers to shared prosperity through community-led solutions. Through the generosity of this community and strong government and industry partnerships, we will channel transformational resources into programs, staffing, capital projects, sustainable agriculture, technology and more.

Combined, these efforts will advance local solutions that modernize infrastructure, amplify community power and reimagine our food systems. And we're excited to

share just a few examples of these investments in action over the past year.

Community Grower Support Addresses Historical Injustices

Small agriculture can yield statewide economic strength and help solve hunger. Yet farmers and small food processors from Oregon Food Bank's priority equity constituencies — particularly BIPOC, immigrant and refugee communities — face significant barriers to launching farming businesses, including Oregon's history of racist land use laws. To help address these systemic barriers, the Community Grower Support fund supports farmers and food producers from communities that face disproportionately-high rates of hunger.

Boosted by \$7 million in local food purchasing grants from the U.S. Department of Agriculture, the fund is helping 136 growers

and producers launch and expand farming businesses focused on fresh, culturally familiar foods across 18 counties. Food purchase dollars ensure that food produced by BIPOC fruit and vegetable growers, ranchers, herbalists, dairy farmers, bakers, and Native and Tribal fishers is distributed to underserved rural, remote and urban areas throughout the region.

The impact of these investments has been transformational in many ways, with funds helping growers hire local employees, invest in critical infrastructure, and expand access to culturally-specific and fresh foods in communities that are not adequately served through existing food assistance networks. Together, we're fostering the kind of connections and support that promotes health, well-being and financial stability in local communities throughout the region!



Modernized infrastructure, reduced carbon emissions

Oregon Food Bank's statewide warehouse in Northeast Portland is the central hub of an incredible network of 21 regional food banks and more than 1,400 local food assistance sites. More than ~50 million lbs of food are sourced and distributed annually through this hub, reaching more than a million people facing food insecurity in rural areas, small towns and urban centers alike. Yet this amazing operation — and our broader efforts to prioritize fresh produce, dairy and protein — are limited by 20-year-old facilities that were designed to handle large quantities of shelf-stable goods like pasta and canned vegetables.

Rooted in the belief that everyone in our communities deserves access to fresh, nutritious food, we've deepened and expanded relationships with local growers, ranchers and manufacturers to identify new ways to share our local bounty. This year, we began renovations that will double the amount of refrigerated storage in our statewide warehouse — and repurpose space to safely receive and process a higher volume of fresh foods.

This work is among a host of improvements that will reduce our carbon footprint and minimize our contribution to the climate

disasters that have played a significant role in worsening hunger and poverty across the country. An enhanced fleet of food distribution vehicles will replace fossil fuel consumption with renewable energy — and shore power upgrades in statewide shipping operations have eliminated the need for diesel fuel in our overnight refrigeration systems.

Today, each of the eight freight trailers used to deliver food statewide utilize electric power during loading and staging. And new electric vehicle purchases will soon modernize our local delivery fleet, decreasing impact on the environment while increasing access to fresh, local, refrigerated foods. These upgrades represent a major win for our communities — and the environment!

Closing unjust gaps in government food assistance

Civic engagement and community organizing are the most effective paths to changing the policies and systems that cause hunger in our region.

Guided by the expertise of immigrant and refugee leaders and organizations, Oregon Food Bank worked with more than 120 partners to launch the one of the most significant statewide efforts in our organization's history: **the Food for All Oregonians (FFAO)** coalition.



“Food for All will have a big impact for people in our communities who can’t access [SNAP] food assistance to feed our kids and families. This effort proves that when you show up and build trust, people will get involved — and we can change our communities for the better!”

— JOSE LUIS CUNA
Ontario



Food for All is anchored by policy solutions that close unjust gaps in government food assistance programs — policies that exclude huge portions of our communities based on immigration status and other arbitrary factors. More than 62,000 Oregonians are currently barred from vital supports like the Supplemental Nutrition Assistance Program (sometimes referred to as “SNAP” or “food stamps”), including Legal Permanent Residents and young people engaged in the Deferred Action for Childhood Arrivals program (commonly known as “Dreamers”).

The coalition’s locally-led approach successfully shortened the distance between people facing food insecurity and the elected officials whose decisions impact us — bringing a new level of accountability to leaders in Salem, including:


4,500+ pledges, emails and other actions supporting Food for All

1,600+ phone calls to Representatives and Senators urging passage

300+ advocates at state legislators’ Town Halls and Community Forums with in Ontario, Tillamook, Portland, Beaverton, Salem, Roseburg and online

100+ community leaders meeting with their elected officials in Salem — equipped to act as spokespeople and deliver testimony in public hearings





Between legislative dysfunction spurred by the Republican walkout and a lack of prioritization by Democratic leaders in the end-of-session rush, our landmark legislation (Senate Bill 610) ultimately did not pass this year. Yet we built undeniable community power together — and our coalition now has an incredibly strong foundation for future passage. We will not stop until everyone in Oregon has access to the resources we need to thrive!

Statewide resources for hunger relief

We need a robust, thriving ecosystem of anti-hunger partners throughout the region to achieve our vision for communities that never go hungry. Our Network is strong and resilient because we work together toward shared goals — including efforts to move state resources toward local solutions to hunger.

Throughout the legislative session, we drew on the wisdom and expertise of 21 regional food banks and 1,400+ food assistance sites to direct resources where they're needed most, maximizing our impact in communities that face disproportionate hunger and poverty. State investments in Oregon's food assistance network include:

\$10 million

Food purchasing:

As demand for food assistance continues to rise, these critical one-time funds are dedicated to local purchases that help fill gaps in the donated food supply — and ensure a steady flow of food in communities that need it most.

\$14.3 million

Food system infrastructure improvements:

Significant new funding will help regional food banks improve aging food system infrastructure. State investments also include nearly \$1 million for the visionary Black Community Food Center led by our partners at **Feed'em Freedom Foundation**.

\$6.3 million

The Oregon Hunger Response Fund:

A boost to the Oregon Hunger Response Fund (OHRF) will provide critical support for regional food banks — nearly \$2 million above current funding levels.



Anti-hunger policy wins and the work ahead

IN ADDITION TO MORE THAN \$30 MILLION INVESTED in the Oregon Food Bank Network, our community's advocacy and organizing efforts – guided by the Policy Leadership Council – secured a host of major investments and policy wins to address hunger and its root causes. Working alongside dozens of partners and allies, our victories this legislative session include:

- ✓ Support for **essential food assistance programs**, including free school meals at 200 additional schools across Oregon and \$4.2M of ongoing funding for Double Up Food Bucks, which doubles the value of SNAP dollars at many farmers markets, CSAs and local grocers.
- ✓ Steps toward **economic justice for low-income families**, including an Oregon Kids' Credit, that provides a **refundable credit** of \$1,000 per child for people who earn less than \$25,000/year.
- ✓ Steps toward a **healthier environment and mitigating climate change impacts** – including the establishment of community resilience hubs for natural disasters, increased accessibility to heating and cooling for low-income households, stronger protections against toxic chemicals and more.
- ✓ **Real progress on housing for all**, including a limit on extreme rent hikes, measures to help keep people in our homes, and investments in emergency rent assistance and homelessness prevention services.
- ✓ **Progress toward re-imagined community safety** such as investments in **Healing Hurt People**, a program that provides crisis intervention and navigation services in hospitals – including safety planning and connections to housing support and treatment for substance use disorder.
- ✓ **Increased access to quality, affordable child care**, including investments to help low-income families pay for care and supports for child care workforce retention and recruitment.



It takes a true movement to take on systems that exclude so many people in our communities, and we know that movements take years of effort and heart to build. We should all be proud of the landmark changes we passed this session – as well as the strong foundation for Food for

All Oregonians. And we know there is power in persistence. It takes time to achieve big things – and our mission to eliminate hunger and its root causes is most definitely big. The commitment and action from this incredible community keeps us inspired for the work ahead!

The importance of traditional, familiar foods

AS AN OREGON FOOD BANK **Food Systems Ambassador** and food assistance coordinator with **Pacific Climate Warriors**, Heifara Wheeler is working toward a future where every Oregonian has access to the food they need to thrive.



Though he grew up in Hawaii, **Heifara** felt disconnected from traditional Pacific Islander foods. Like many immigrants, his family tried to assimilate to American culture, largely avoiding traditional foods and cultural practices. As Heifara grew older, he learned more about food's deep roots in creating and sustaining community, cultural identity and autonomy. And energized by these experiences, he now works to connect Pacific Islander families in the Northwest with traditional foods.

"Part of a society is to care for its people, and we need to care for everyone who lives here," Heifara shares. "It's important for our community to have access to traditional foods. These foods have a connection

to our oral histories — to who we are as a people and the belief systems that we share."

Oregon Food Bank is proud to partner with Heifara and leaders throughout the state to ensure communities have access to fresh, familiar food. And we're excited to expand this work through investments in local growers and producers who are bringing even more traditional foods to area free food markets and pantries.

Opening doors to end hunger

This year, we celebrated the **grand opening of Columbia Gorge Food Bank's new home in The Dalles** — marking a new era of expanded food distribution capacity and anti-hunger advocacy throughout Hood River, Sherman and Wasco counties.

The new warehouse and Community Food Center offers more than five times the space to meet the rising need for food assistance, with an even greater

opportunity to partner with local growers and producers to support families locally and across the state.

Victor Veloz is one of several community leaders working with Columbia Gorge Food Bank to connect people throughout the region with food, essential resources and opportunities to get involved.



“Having the provisions from the Columbia Gorge Food Bank is huge,” Victor shares. “We wouldn’t have the food that’s out in the community right now. That can make a difference in somebody’s life from one day to the next.”



Get Involved

OUR VISION FOR RESILIENT COMMUNITIES that never know hunger is only possible through the strength of our community partnerships. There are many ways for you to get involved in the fight to end hunger for good.

Food Industry Partners

Much of the food we distribute comes from food industry partners that include local, regional and national growers, packers, manufacturers, retailers and more. These companies know that joining with us means the products they donate will directly help individuals and families throughout Oregon and Southwest Washington. Our food resource developers work with these vital partners every day and regularly connect with other food system partners to build new relationships as the need for food assistance continues to grow.

Community Partners

Throughout the region, we work with a wide variety of community partners to advance our shared mission of eliminating hunger and its root causes. From running food pantries and free food markets, to supporting local BIPOC farmers, to grassroots organizing around anti-hunger policies, we are honored to work



with so many passionate and committed individuals and organizations.

Corporate and Organizational Partners

Engaged, socially-responsible allies are key to ending hunger and its root causes. We work with hundreds of incredible, values-aligned corporate and organizational partners that share our vision – whether through fundraising drives, employee giving, group volunteer shifts or other local partnerships.

Volunteers

Our food distribution efforts are supported by thousands of amazing volunteers at our central warehouses and out in the community. Along with these indoor and outdoor options, we offer a host of seasonal opportunities to make a difference from the comfort of home. Please check our website for the latest volunteer shifts and events near you!

Advocates and Organizers

Oregon Food Bank advocates and organizers work year-round to advance anti-hunger policies at the local, state and federal level. Together, we can ensure that decision-makers prioritize the investments needed to keep food flowing today, alongside

systemic changes to prevent hunger from happening in our communities.

Monthly Sustainers

Monthly Sustainers are critical partners in our work, helping ensure that we can meet the need for food today while addressing hunger's root causes. It's an easy, convenient way to support these efforts throughout the year – just set up your recurring gift and we will take care of the rest!

Legacy Circle Members

Legacy Circle members support the movement to end hunger at its roots through an estate, trust or bequest – opening doors to multi-generational relationships and engagement that help realize a vision of hunger-free communities.

Learn more and get involved at
OregonFoodBank.org/Get-Involved
or reach out to our team at
Contact@OregonFoodBank.org
or (503)282-0555.

Together, we can end hunger for good.

Learn more and get involved at
OregonFoodBank.org/Get-Involved



@oregonfoodbank

OregonFoodBank.org | 503.282.0555

Return of Organization Exempt From Income Tax

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

2021

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public Inspection

A For the **2021** calendar year, or tax year beginning **7/01**, **2021**, and ending **6/30**, **20** **2022**

B Check if applicable:	C	D Employer identification number
<input type="checkbox"/> Address change	OREGON FOOD BANK 7900 NE 33RD DR PORTLAND, OR 97211	93-0785786
<input type="checkbox"/> Name change		E Telephone number
<input type="checkbox"/> Initial return		503-282-0555
<input type="checkbox"/> Final return/terminated		G Gross receipts \$ 106,571,025.
<input type="checkbox"/> Amended return		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Application pending	F Name and address of principal officer: SUSANNAH MORGAN SAME AS C ABOVE	H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions.
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ WWW.OREGONFOODBANK.ORG		L Year of formation: 1988 M State of legal domicile: OR
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: <u>TO ELIMINATE HUNGER AND ITS ROOT CAUSES... BECAUSE NO ONE SHOULD BE HUNGRY.</u>		
Activities & Governance	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	27
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	250
	6 Total number of volunteers (estimate if necessary)	6	12,273
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	113,416,995.	104,423,987.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,078,849.	1,103,650.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	410,451.	853,952.
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	36,516.	61,068.
		115,942,811.	106,442,657.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	68,744,466.	58,796,412.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15,624,127.	19,310,238.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	557,715.	666,716.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>7,333,357.</u>		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,311,029.	8,687,682.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	95,237,337.	87,461,048.
19 Revenue less expenses. Subtract line 18 from line 12	20,705,474.	18,981,609.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	79,115,142.	88,735,569.
	22 Net assets or fund balances. Subtract line 21 from line 20	8,588,728.	2,645,812.
		70,526,414.	86,089,757.

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			
	▶ JOHN NG Type or print name and title	DIRECTOR OF FINANCE			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN
	KRIS OLIVEIRA, CPA				P00959389
	Firm's name ▶ KERN & THOMPSON LLC	Firm's EIN ▶ 93-1157146			
	Firm's address ▶ 1800 SW FIRST AVENUE, SUITE 410 PORTLAND, OR 97201	Phone no. (503) 222-3338			

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO ELIMINATE HUNGER AND ITS ROOT CAUSES...BECAUSE NO ONE SHOULD BE HUNGRY.

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 \$ 72,307,739. including grants of \$ 57,472,257.) (Revenue \$ 1,103,650.)

OREGON FOOD BANK ACTS AS A CONVENER, CAPACITY BUILDER AND RESOURCE BROKER TO SUPPORT COMMUNITY PARTNERS OF THE OREGON FOOD BANK NETWORK ACROSS OREGON AND SW WASHINGTON. OREGON FOOD BANK OWNS AND OPERATES A WAREHOUSE IN MULTNOMAH COUNTY, SERVING AS THE HUB FOR STATEWIDE RECEIPTS AND DISTRIBUTION OF FEDERAL COMMODITIES AND CORPORATE AND PRIVATE DONATIONS. ADDITIONALLY, OFB OWNS AND OPERATES FIVE REGIONAL FOOD BANKS, SERVING MULTNOMAH, CLACKAMAS, WASHINGTON, HARNEY, MALHEUR, TILLAMOOK, SHERMAN, HOOD RIVER AND WASCO COUNTIES. THROUGH THIS ROBUST NETWORK OF PARTNERS, FOOD ASSISTANCE IS DISTRIBUTED AT OVER 1200 SITES, INCLUDING SCHOOLS, COMMUNITY CENTERS, HEALTH CARE CENTERS, HOMELESS SHELTERS, DAYCARE CENTERS, SENIOR CENTERS AND CHURCHES, MOSQUES & SYNAGOGUES.

4b (Code:) (Expenses \$ 5,088,370. including grants of \$ 1,324,155.) (Revenue \$)

OREGON FOOD BANK BELIEVES THAT FOOD AND HEALTH ARE BASIC HUMAN RIGHTS FOR ALL. WE KNOW THAT HUNGER IS NOT JUST AN INDIVIDUAL EXPERIENCE; IT IS ALSO A COMMUNITY-WIDE SYMPTOM OF BARRIERS TO EMPLOYMENT, EDUCATION, HOUSING AND HEALTH CARE. THAT'S WHY OFB WORKS ON TWO FRONTS IN ITS MISSION TO END HUNGER IN OREGON: WE BUILD COMMUNITY CONNECTIONS TO HELP PEOPLE ACCESS NUTRITIOUS, AFFORDABLE FOOD TODAY, AND BUILD COMMUNITY POWER TO ELIMINATE THE ROOT CAUSES OF HUNGER FOR GOOD.

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 77,396,109.

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 Revenue Procedure 98-19? <i>If 'Yes,' complete Schedule C, Part III.</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I.</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III.</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in 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.</i> See instructions	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II.</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III.</i>		X
20a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H.</i>		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>	X	

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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 250		
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	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year. 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e		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		
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

		Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year. 1 a 27 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.		
1 b	Enter the number of voting members included on line 1a, above, who are independent. 1 b 27		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7 b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8 a	The governing body?	X	
8 b	Each committee with authority to act on behalf of the governing body?	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.		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed OR
- 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. SEE SCHEDULE O
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
 JOHN NG 7900 NE 33RD DRIVE PORTLAND OR 97211 (503) 282-0555

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

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

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

1 a 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 dotted 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) SUSANNAH MORGAN CEO	40 0			X				191,852.	0.	24,711.
(2) CURTIS HARRIS DIR. PHILANTHROPY	40 0					X		133,206.	0.	13,333.
(3) STARR YURKEWYCZ DIR. PROGRAMS	40 0					X		120,656.	0.	23,555.
(4) MOIRA BOWMAN DIR. ADVOCACY	40 0					X		117,014.	0.	13,077.
(5) JASON STEPHANY DIR. COMMUNICATION	40 0					X		123,012.	0.	2,587.
(6) RUT MARTINEZ-ALICEA DIR. CULTURE	40 0					X		114,369.	0.	10,052.
(7) CARRIE NOVAK DIR. OF FINANCE	40 0			X				118,042.	0.	3,502.
(8) SARAH OPFER CHAIR	2 0	X		X				0.	0.	0.
(9) WAYNE GRAHAM VICE CHAIR/TRES	2 0	X		X				0.	0.	0.
(10) KARIN POWER SECRETARY	2 0	X		X				0.	0.	0.
(11) JEN MAYNARD DIRECTOR	2 0	X						0.	0.	0.
(12) HOWARD MATSUMURA DIRECTOR	1 0	X						0.	0.	0.
(13) DUNYA MINOO DIRECTOR	1 0	X						0.	0.	0.
(14) MCKENA MIYASHIRO DIRECTOR	1 0	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 dotted 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			
(15) LIZ ASPRAY DIRECTOR	1 0	X					0.	0.	0.	
(16) LINDA DOVE DIRECTOR	1 0	X					0.	0.	0.	
(17) LUKE DIRKS DIRECTOR	1 0	X					0.	0.	0.	
(18) ANGELA DOWLING DIRECTOR	1 0	X					0.	0.	0.	
(19) RICK GAUPO DIRECTOR	1 0	X					0.	0.	0.	
(20) STUART HOGUE DIRECTOR	1 0	X					0.	0.	0.	
(21) DANIEL ISAAK DIRECTOR	1 0	X					0.	0.	0.	
(22) KERRI HOYT-PACK DIRECTOR	1 0	X					0.	0.	0.	
(23) SHANTAE JOHNSON DIRECTOR	1 0	X					0.	0.	0.	
(24) CHANEL ONEILL DIRECTOR	1 0	X					0.	0.	0.	
(25) FARAH PAKSERESHT DIRECTOR	1 0	X					0.	0.	0.	
1 b Subtotal							918,151.	0.	90,817.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							918,151.	0.	90,817.	
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 ▶ 7										

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual.</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If 'Yes,' complete Schedule J for such individual.</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person.</i>	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
MUDBONE GROWN LLC 39062 E KNIERIEM RD CORBETT, OR 97019	FARM FOOD ASSIST	374,016.
ASCETA LLC 3300 NW 185TH AVE #1053 PORTLAND, OR 97229	BUSINESS CONSULTANT	115,620.
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 ▶ 2		

Part VIII Statement of Revenue

Check 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	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c 531,680.				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e 19,217,501.				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 84,674,806.				
	g Noncash contributions included in lines 1a-1f	1 g 40,464,353.				
	h Total. Add lines 1a-1f	▶ 104423987.				
Program Service Revenue	Business Code					
	2 a <u>FOOD TO BUY PROGRAM</u>	624210	1,103,650.	1,103,650.		
	b -----					
	c -----					
	d -----					
	e -----					
	f All other program service revenue					
g Total. Add lines 2a-2f	▶ 1,103,650.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		802,341.		802,341.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		6 a				
		b Less: rental expenses	6 b			
	c Rental income or (loss)	6 c				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		7 a	93,041.			
		b Less: cost or other basis and sales expenses	7 b			
	c Gain or (loss)	7 c	51,611.			
	d Net gain or (loss)	▶	51,611.		51,611.	
8 a Gross income from fundraising events (not including \$ <u>531,680.</u> of contributions reported on line 1c). See Part IV, line 18	8 a	24,395.				
	b Less: direct expenses	8 b	86,938.			
	c Net income or (loss) from fundraising events	▶	-62,543.		-62,543.	
9 a Gross income from gaming activities. See Part IV, line 19	9 a					
	b Less: direct expenses	9 b				
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	10 a					
	b Less: cost of goods sold.	10 b				
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue	Business Code					
	11 a <u>MISC INCOME</u>	900099	123,611.		123,611.	
	b -----					
	c -----					
	d All other revenue					
e Total. Add lines 11a-11d	▶	123,611.				
12 Total revenue. See instructions	▶	106442657.	1,103,650.	0.	915,020.	

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	58,796,412.	58,796,412.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	338,107.	222,636.	36,190.	79,281.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	15,241,906.	10,036,458.	1,631,450.	3,573,998.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	502,122.	330,636.	53,746.	117,740.
9 Other employee benefits	2,030,665.	1,337,148.	217,357.	476,160.
10 Payroll taxes	1,197,438.	788,487.	128,170.	280,781.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	666,716.			666,716.
f Investment management fees	119,647.		119,647.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	1,233,028.	582,285.	136,139.	514,604.
12 Advertising and promotion				
13 Office expenses	1,392,817.	735,841.	44,273.	612,703.
14 Information technology	843,114.	495,068.	41,739.	306,307.
15 Royalties				
16 Occupancy	853,013.	696,016.	41,876.	115,121.
17 Travel	75,753.	54,315.	7,362.	14,076.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	204,605.	146,702.	19,886.	38,017.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,108,550.	835,450.	72,036.	201,064.
23 Insurance	120,922.	102,183.	4,928.	13,811.
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 <u>FOOD RELATED COSTS</u>	1,320,675.	1,320,675.		
b <u>TRANSPORTATION</u>	849,828.	849,828.		
c <u>DUES AND FEES</u>	524,730.	65,969.	176,783.	281,978.
d <u>PARTNER SUPPORT</u>	41,000.			41,000.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	87,461,048.	77,396,109.	2,731,582.	7,333,357.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash – non-interest-bearing	25,670,101.	1	29,921,155.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	346,122.	3	9,989,047.
	4 Accounts receivable, net	4,661,631.	4	4,161,573.
	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	4,819,750.	8	3,447,123.
	9 Prepaid expenses and deferred charges	304,944.	9	426,228.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 28,306,097.		
	b Less: accumulated depreciation	10b 11,699,465.	16,349,251.	10c 16,606,632.
	11 Investments – publicly traded securities	12,464,128.	11	10,274,359.
	12 Investments – other securities. See Part IV, line 11	14,499,215.	12	13,909,452.
	13 Investments – program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33).	79,115,142.	16	88,735,569.	
Liabilities	17 Accounts payable and accrued expenses	4,886,881.	17	2,579,315.
	18 Grants payable		18	
	19 Deferred revenue	1,066,594.	19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,635,253.	25	66,497.
	26 Total liabilities. Add lines 17 through 25.	8,588,728.	26	2,645,812.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	69,765,957.	27	78,498,154.
	28 Net assets with donor restrictions	760,457.	28	7,591,603.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	70,526,414.	32	86,089,757.
33 Total liabilities and net assets/fund balances	79,115,142.	33	88,735,569.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	106,442,657.
2	Total expenses (must equal Part IX, column (A), line 25)	2	87,461,048.
3	Revenue less expenses. Subtract line 2 from line 1	3	18,981,609.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	70,526,414.
5	Net unrealized gains (losses) on investments	5	-3,418,266.
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	86,089,757.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <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?		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
SEE SCHEDULE O			
3b	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	X	

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 OREGON FOOD BANK	Employer identification number 93-0785786
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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		
(A)						
(B)						
(C)						
(D)						
(E)						
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'.)	67919536.	72560022.	104056835.	113416995.	104423987.	462377375.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3.	67919536.	72560022.	104056835.	113416995.	104423987.	462377375.
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)						666,894.
6 Public support. Subtract line 5 from line 4.						461710481.

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.	67919536.	72560022.	104056835.	113416995.	104423987.	462377375.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	286,672.	342,044.	253,949.	300,569.	802,341.	1,985,575.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						0.
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.) SEE PART VI	58,160.	58,628.	91,434.	70,224.	123,611.	402,057.
11 Total support. Add lines 7 through 10.						464765007.
12 Gross receipts from related activities, etc. (see instructions)					12	12,887,221.
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	99.34 %
15 Public support percentage from 2020 Schedule A, Part II, line 14.	15	99.23 %

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. ▶

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 ▶

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. ▶

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. ▶

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. ▶

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

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b; 12 Other income; 13 Total support.

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

Table with 3 columns: Line number, Description, and Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)). Row 16: Public support percentage from 2020 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Line number, Description, and Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)). Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17.

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.

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.

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

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete line 2 below.
 - The organization is the parent of each of its supported organizations. Complete line 3 below.
 - 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.

	Yes	No
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 (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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 – provide details in Part VI)	5
6	Other distributions (describe in Part VI). 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 (provide details in Part VI). 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 – explain in Part VI). 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, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . 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			

BAA

Schedule A (Form 990) 2021

Part VI

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

PART II, LINE 10 - OTHER INCOME

<u>NATURE AND SOURCE</u>	<u>2021</u>	<u>2020</u>	<u>2019</u>	<u>2018</u>	<u>2017</u>
TOTAL	\$ 123,611.	\$ 70,224.	\$ 91,434.	\$ 58,628.	\$ 58,160.
	<u>\$ 123,611.</u>	<u>\$ 70,224.</u>	<u>\$ 91,434.</u>	<u>\$ 58,628.</u>	<u>\$ 58,160.</u>

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

OREGON FOOD BANK

Employer identification number

93-0785786

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)(3) (enter number) organization

[] 4947(a)(1) nonexempt charitable trust not treated as a private foundation

[] 527 political organization

Form 990-PF

[] 501(c)(3) exempt private foundation

[] 4947(a)(1) nonexempt charitable trust treated as a private foundation

[] 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering 'N/A' in column (b) instead of the contributor name and address), II, and III.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year. > \$ _____

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 OREGON FOOD BANK	Employer identification number 93-0785786
------------------------------------------	----------------------------------------------

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	CALIFORNIA ASSOC OF FOOD BANKS 1624 FRANKLIN STREET, #722 OAKLAND, CA 94612	\$ 2,826,531.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	US DEPARTMENT OF AGRICULTURE 1400 INDEPENDENCE AVENUE SW WASHINGTON, DC 20250	\$ 24,207,143.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	OREGON DEPT HUMAN SERVICES 500 SUMMER ST NE SALEM, OR 97301	\$ 10,735,143.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	SMALL BUSINESS ADMINISTRATION 409 3RD STREET SW FLOOR 2 WASHINGTON, DC 20416	\$ 2,560,665.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	FEEDING THE NORTHWEST 1234 EAST FRONT AVENUE SPOKANE, WA 99202	\$ 3,264,738.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	DARIGOLD 2720 SE 6TH AVE PORTLAND, OR 97202	\$ 2,365,875.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization OREGON FOOD BANK	Employer identification number 93-0785786
------------------------------------------	----------------------------------------------

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	FOOD	\$ 2,826,531.	6/30/22
2	FOOD	\$ 20,257,604.	6/30/22
5	FOOD	\$ 3,264,738.	6/30/22
6	FOOD	\$ 2,365,875.	6/30/22
		\$	
		\$	

Name of organization **OREGON FOOD BANK** Employer identification number **93-0785786**

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 information once. See instructions.)..... ▶\$ N/A
 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
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(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

(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

(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

**SCHEDULE C
(Form 990)**

Political Campaign and Lobbying Activities

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2021

Department of the Treasury
Internal Revenue Service

▶ **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.**

**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 OREGON FOOD BANK	Employer identification number 93-0785786
-------------------------------------------------	-----------------------------------------------------

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. See instructions for definition of 'political campaign activities.'
- 2 Political campaign activity expenditures. See instructions. ▶ \$ _____
- 3 Volunteer hours for political campaign activities. See instructions. ▶ _____

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. ▶ \$ _____ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955. ▶ \$ _____ 0.
- 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-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

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												
1 a Total lobbying expenditures to influence public opinion (grassroots lobbying)	25,239.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	50,955.													
c Total lobbying expenditures (add lines 1a and 1b)	76,194.	0.												
d Other exempt purpose expenditures	86,598,491.													
e Total exempt purpose expenditures (add lines 1c and 1d)	86,674,685.	0.												
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>			If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	0.												
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	0.												
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	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
2 a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	6,190.	1,154.	9,482.	76,194.	93,020.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures			2,763.	25,239.	28,002.

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?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i.			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
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?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		

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.

**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

OREGON FOOD BANK

Employer identification number

93-0785786

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

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.

1 a 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 ▶ \$ _____

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
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange program
- e Other _____

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

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

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

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

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

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

2 a 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
1 a Beginning of year balance	2,613,354.	1,968,953.	2,063,668.	2,019,400.	1,775,871.
b Contributions					160,500.
c Net investment earnings, gains, and losses	-140,768.	732,212.	-7,460.	130,130.	166,347.
d Grants or scholarships					
e Other expenditures for facilities and programs	93,041.	87,811.	87,225.	85,862.	83,318.
f Administrative expenses					
g End of year balance	2,379,545.	2,613,354.	1,968,983.	2,063,668.	2,019,400.

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

- a Board designated or quasi-endowment 100.00 %
- b Permanent endowment _____ %
- c Term endowment _____ %

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

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

	Yes	No
(i) Unrelated organizations	X	
(ii) Related organizations		X
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. SEE PART XIII

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
1 a Land		3,289,142.		3,289,142.
b Buildings		16,424,025.	6,826,368.	9,597,657.
c Leasehold improvements				
d Equipment		3,234,711.	2,366,229.	868,482.
e Other		5,358,219.	2,506,868.	2,851,351.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				16,606,632.

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 CERTIFICATES OF DEPOSIT	4,249,290.	COST
(A) FIXED INCOME SECURITIES	7,280,617.	COST
(B) FUNDS HELD AT OREGON COMMUNITY FOUNDATIO		
(C)	2,379,545.	COST
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	13,909,452.	

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. N/A

(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)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (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. N/A

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (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) OBLIGATIONS UNDER ANNUITY AGREEMENT	66,497.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	66,497.

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.

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	102,919,768.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	-3,418,266.	
	b Donated services and use of facilities	2b	15,024.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	-3,403,242.	
3	Subtract line 2e from line 1		3	106,323,010.
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	119,647.	
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c	119,647.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	106,442,657.

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	87,356,425.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	15,024.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	15,024.	
3	Subtract line 2e from line 1		3	87,341,401.
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	119,647.	
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c	119,647.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	87,461,048.

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 - INTENDED USES OF ENDOWMENT FUND

THE PURPOSE OF THE ENDOWMENT IS TO PROVIDE A LONG-TERM SOURCE OF REVENUE TO SUPPLEMENT OTHER SOURCES OF REVENUE AND TO PROTECT MAJOR CAPITAL INVESTMENTS IN ORDER TO BEST SERVE THE MISSION OF THE OREGON FOOD BANK AND ACHIEVE ITS LONG-TERM STRATEGIC GOALS. USE OF THE ENDOWMENT IS GOVERNED BY A BOARD ENDOWMENT POLICY ADOPTED 2/25/1998 AND AMENDED 1/27/2010 AND 4/9/2014. PRINCIPAL AND INCOME CAN BE ACCESSED IF THE BOARD OF DIRECTORS TAKES A SPECIFIC ACTION TO DO SO.

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ 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

OREGON FOOD BANK

Employer identification number

93-0785786

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

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

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

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 MAL WARWICK DONOR DIGITAL 2550 NINTH STREET BERKELEY CA 94710	DIRECT MAIL FUNDRAISING		X	3,402,761.	81,850.	3,320,911.
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				3,402,761.	81,850.	3,320,911.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

OR WA

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 OREGON HARVEST (event type)	(b) Event #2 _____ (event type)	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))	
Revenue	1	Gross receipts	556,075.		556,075.	
	2	Less: Contributions	531,680.		531,680.	
	3	Gross income (line 1 minus line 2)	24,395.		24,395.	
Direct Expenses	4	Cash prizes				
	5	Noncash prizes	17,294.		17,294.	
	6	Rent/facility costs				
	7	Food and beverages	12,838.		12,838.	
	8	Entertainment				
	9	Other direct expenses	56,806.		56,806.	
	10	Direct expense summary. Add lines 4 through 9 in column (d)				86,938.
	11	Net income summary. Subtract line 10 from line 3, column (d)				-62,543.

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 column (a) through column (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: _____

10 a 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	13 a	%
b An outside facility	13 b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

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

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

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

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

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

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

OREGON FOOD BANK

Employer identification number

93-0785786

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. SEE PART IV

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
(1) REGIONAL FOOD BANKS & LOCAL FOOD DIST AGENCIES IN OR/WA VARIOUS CITIES, OR 97999		501 (C) (3)	8,704,671.	0.			TO PREVENT HUNGER
(2) REGIONAL FOOD BANKS & LOCAL FOOD DIST AGENCIES IN OR/WA VARIOUS CITIES, OR 97999		501 (C) (3)	0.	50,091,741.	COST OR DONATED VALUE	FOOD	TO PREVENT HUNGER
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 169

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

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

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 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

GOVERNMENT GRANTS ARE TYPICALLY ON A REIMBURSEMENT BASIS. OFB WORKS WITH NETWORK PARTNERS IN ADVANCE TO OUTLINE A WORK PLAN AND BUDGET TO SATISFY DONOR INTENT. QUARTERLY REPORTS ARE REVIEWED BY OFB TO TRACK PROGRESS AND ENSURE COMPLIANCE. DOCUMENTATION WITH REQUESTS FOR REIMBURSEMENT OF EXPENSES ARE SUBMITTED MONTHLY OR QUARTERLY AND DOCUMENTATION IS MAINTAINED FOR REVIEW AND AUDIT. ANNUAL MONITORING OF SUB-RECIPIENT ENTITIES IS PERFORMED. OFB MONITORS PROGRAM OPERATIONS TO ENSURE FUNDS ARE ADMINISTERED IN ACCORDANCE WITH FEDERAL, STATE REQUIREMENTS, AND PRIVATE DONOR INTENT. IF DEFICIENCIES ARE IDENTIFIED THROUGH THE MONITORING, OFB REVIEWS A PLAN FOR CORRECTIVE ACTION SUBMITTED BY RECIPIENT AND FORWARDS TO THE FUNDER.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2021

- ▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.

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Inspection**

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

OREGON FOOD BANK

93-0785786

Part I Questions Regarding Compensation

1 a 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 type="checkbox"/> Written employment contract |
| <input checked="" 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? **4 a** Yes No
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? **4 b** Yes No
- c** Participate in or receive payment from an equity-based compensation arrangement? **4 c** Yes No
- 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? **5 a** Yes No
- b** Any related organization? **5 b** Yes No
- 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? **6 a** Yes No
- b** Any related organization? **6 b** Yes No
- 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. **7** Yes No

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. **8** Yes No

9 If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9** Yes No

	Yes	No
1 a		
1 b		
2		
3		
4 a		X
4 b		X
4 c		X
5 a		X
5 b		X
6 a		X
6 b		X
7		X
8		X
9		

BAA 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				
SUSANNAH MORGAN 1 CEO	(i)	191,852.	0.	0.	3,830.	20,881.	216,563.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(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.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization OREGON FOOD BANK	Employer identification number 93-0785786
-----------------------------------------------------	-----------------------------------------------------

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art – Works of art				
2 Art – Historical treasures				
3 Art – Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities – Publicly traded	X	112	481,185.	FMV
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		39,965,874.	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (SPECIAL EVENT)	X		17,294.	FMV
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

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

		Yes	No
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?	30 a		X
b If 'Yes,' describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32 a	X	
b If 'Yes,' describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

BAA 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.

PART I, LINE 32 - HIRE AND USE OF THIRD PARTIES

VOLUNTEERS OF AMERICA RECONDITIONS AND SELLS DONATED VEHICLES; OFB MAINTAINS AN INVESTMENT ACCOUNT AT RBC CAPITAL TO RECEIVE AND THEN LIQUIDATE INVESTMENTS OF APPRECIATED MARKETABLE SECURITIES.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

OREGON FOOD BANK

Employer identification number

93-0785786

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

REVIEW AND APPROVAL BY THE BOARD OF DIRECTORS BEFORE FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

DISCLOSURE AND ABSTENTION BY MEMBERS ON CASE BY CASE BOARD ACTIONS.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

COMPLETE MARKET SURVEY IS PERFORMED BY STAFF EVERY FEW YEARS AND REVIEWED BY BOARD EXECUTIVE COMMITTEE. CEO SALARY IS REVIEWED AND APPROVED BY THE INDEPENDENT BOARD EXECUTIVE COMMITTEE ANNUALLY AND RECORDED IN CHAIRPERSON RECORDS AND/OR MINUTES. FULL BOARD VOTES ON TOTAL COMPENSATION PLAN BASED ON UPDATED MARKET INFORMATION.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

FINANCIAL STATEMENTS ARE POSTED ON OFB WEBSITE. CONFLICT OF INTEREST AND OTHER GOVERNING DOCUMENTS ARE NOT POSTED.

FORM 990, PART XII, LINE 2 - CHANGE OF OVERSIGHT OR SELECTION PROCESS

THE PROCESS HAS NOT CHANGED SINCE THE PRIOR YEAR.

SCHEDULE G, PART I, LINE 2B, COLUMN (V)

INVOICES IDENTIFY THE TYPE OF COST.

SCHEDULE I, PART I, LINE 2

GOVERNMENT GRANTS ARE TYPICALLY ON A REIMBURSEMENT BASIS. OFB WORKS WITH NETWORK PARTNERS IN ADVANCE TO OUTLINE A WORK PLAN AND BUDGET TO SATISFY DONOR INTENT. QUARTERLY REPORTS ARE REVIEWED BY OFB TO TRACK PROGRESS AND ENSURE COMPLIANCE. DOCUMENTATION WITH REQUESTS FOR REIMBURSEMENT OF EXPENSES ARE SUBMITTED MONTHLY OR QUARTERLY AND DOCUMENTATION IS MAINTAINED FOR REVIEW AND AUDIT. ANNUAL MONITORING OF SUB-RECIPIENT ENTITIES IS PERFORMED. OFB MONITORS PROGRAM OPERATIONS TO ENSURE FUNDS ARE ADMINISTERED IN ACCORDANCE WITH FEDERAL, STATE REQUIREMENTS AND PRIVATE DONOR INTENT. IF DEFICIENCIES ARE IDENTIFIED THROUGH THE MONITORING, OFB REVIEWS A PLAN FOR CORRECTIVE ACTION SUBMITTED BY RECIPIENT AND FORWARDS TO THE FUNDER.

Name of the organization

OREGON FOOD BANK

Employer identification number

93-0785786

SCHEDULE M, PART I, COLUMN (B)

NUMBER OF CONTRIBUTIONS FOR ALL ITEMS EXCEPT FOOD INVENTORY WHICH IS TRACKED AS
NUMBER OF POUNDS RECEIVED. THE ORGANIZATION RECEIVED APPROXIMATELY 18.5 MILLION
POUNDS OF FOOD AND GROCERY PRODUCTS FROM THE FOOD INDUSTRY.

Return of Organization Exempt From Income Tax

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

2022

Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection

A For the **2022** calendar year, or tax year beginning **7/01**, **2022**, and ending **6/30**, **2023**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C OREGON FOOD BANK 7900 NE 33RD DR PORTLAND, OR 97211	D Employer identification number 93-0785786	E Telephone number 503-282-0555
F Name and address of principal officer: SUSANNAH MORGAN SAME AS C ABOVE		G Gross receipts \$ 128,674,876.	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions.	
J Website: WWW.OREGONFOODBANK.ORG		H(c) Group exemption number	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1988	M State of legal domicile: OR

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: <u>TO ELIMINATE HUNGER AND ITS ROOT CAUSES... BECAUSE NO ONE SHOULD BE HUNGRY.</u>		
Activities & Governance	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	30
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	30
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	270
	6 Total number of volunteers (estimate if necessary)	6	14,942
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	104,423,987.	106,048,740.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,103,650.	2,022,804.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	853,952.	825,551.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	61,068.	77,448.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	106,442,657.	108,974,543.
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)	58,796,412.	75,747,613.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	16a Professional fundraising fees (Part IX, column (A), line 11e)	19,310,238.	24,307,061.
	b Total fundraising expenses (Part IX, column (D), line 25) <u>7,838,012.</u>	666,716.	740,179.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	8,687,682.	11,119,894.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	87,461,048.	111,914,747.
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12	18,981,609.	-2,940,204.
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	88,735,569.	88,796,009.
22 Net assets or fund balances. Subtract line 21 from line 20	2,645,812.	4,810,831.	
		86,089,757.	83,985,178.

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 JOHN NG	Date	Director of Finance	
	Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name KRISTIN L. BROOKS, CPA	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed PTIN P02397432
	Firm's name KERN & THOMPSON LLC	Firm's EIN 93-1157146		
	Firm's address 1800 SW FIRST AVENUE, SUITE 410 PORTLAND, OR 97201	Phone no. (503) 222-3338		
	May the IRS discuss this return with the preparer shown above? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO ELIMINATE HUNGER AND ITS ROOT CAUSES...BECAUSE NO ONE SHOULD BE HUNGRY.

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

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

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

4a (Code:) (Expenses \$ 90,449,100. including grants of \$ 75,747,613.) (Revenue \$) OREGON FOOD BANK ACTS AS A CONVENER, CAPACITY BUILDER AND RESOURCE BROKER TO SUPPORT COMMUNITY PARTNERS OF THE OREGON FOOD BANK NETWORK ACROSS OREGON AND SW WASHINGTON.

4b (Code:) (Expenses \$ 8,988,286. including grants of \$) (Revenue \$) OREGON FOOD BANK BELIEVES THAT FOOD AND HEALTH ARE BASIC HUMAN RIGHTS FOR ALL. WE KNOW THAT HUNGER IS NOT JUST AN INDIVIDUAL EXPERIENCE; IT IS ALSO A COMMUNITY-WIDE SYMPTOM OF BARRIERS TO EMPLOYMENT, EDUCATION, HOUSING AND HEALTH CARE.

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 99,437,386.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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	270		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			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			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders.	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b			
c	Enter the amount of reserves on hand.	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17			

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

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

Section A. Governing Body and Management

		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.		
	1a 30		
b	Enter the number of voting members included on line 1a, above, who are independent.		
	1b 30		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	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.		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. SEE SCHEDULE O	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official SEE SCHEDULE O	X	
b	Other officers or key employees of the organization	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?		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 OR
- 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. SEE SCHEDULE O
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.
 JOHN NG 7900 NE 33RD DRIVE PORTLAND OR 97211 (503) 282-0555

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- 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 dotted 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			
(1) SUSANNAH MORGAN CEO	40 0			X			220,285.	0.	47,215.
(2) ANDREA WILLIAMS DEPUTY CEO	40 0					X	143,864.	0.	16,217.
(3) STARR YURKEWYCZ DIR. PROGRAMS	40 0					X	132,994.	0.	24,188.
(4) CURTIS HARRIS DIR. PHILANTHROPY	40 0					X	143,808.	0.	12,457.
(5) RUT MARTINEZ-ALECEA DIR. CULTURE	40 0					X	135,794.	0.	15,910.
(6) JASON STEPHANY DIR. COMMUNICATION	40 0					X	133,113.	0.	17,678.
(7) JOHN NG DIR. OF FINANCE	40 0			X			68,468.	0.	8,406.
(8) SARAH OPFER CHAIR 2022	2 0	X		X			0.	0.	0.
(9) WAYNE GRAHAM CHAIR 23/VC 22	2 0	X		X			0.	0.	0.
(10) FARAH PAKSERESHT VICE CHAIR 2023	2 0	X		X			0.	0.	0.
(11) KARIN POWER SECRETARY 2022	2 0	X		X			0.	0.	0.
(12) KEVIN RYAN SECRETARY 2023	2 0	X		X			0.	0.	0.
(13) CHANEL ONEILL TREASURER 2023	2 0	X		X			0.	0.	0.
(14) ANGELA DOWLING DIRECTOR	1 0	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 dotted 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			
(15) JEN MAYNARD DIRECTOR	1 0	X					0.	0.	0.	
(16) HOWARD MATSUMURA DIRECTOR	1 0	X					0.	0.	0.	
(17) DUNYA MINOO DIRECTOR	1 0	X					0.	0.	0.	
(18) MCKENA MIYASHIRO DIRECTOR	1 0	X					0.	0.	0.	
(19) JINKY PANGANIBAN DIRECTOR	1 0	X					0.	0.	0.	
(20) MARC PATRICK DIRECTOR	1 0	X					0.	0.	0.	
(21) BROOKE RANDALL DIRECTOR	1 0	X					0.	0.	0.	
(22) ALEXIS TAYLOR DIRECTOR	1 0	X					0.	0.	0.	
(23) JEFFERY TEMPLE DIRECTOR	1 0	X					0.	0.	0.	
(24) RICK GAUPO DIRECTOR	1 0	X					0.	0.	0.	
(25) LINDA DOVE DIRECTOR	1 0	X					0.	0.	0.	
1b Subtotal							978,326.	0.	142,071.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							978,326.	0.	142,071.	
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	6									

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual.</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual.</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person.</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
JH KELLY LLC 2000 SE HANNA HARVESTER DRIVE MILWAUKIE, OR 97222	PLUMBING/HVAC	347,985.
CFO SELECTIONS LLC 3150 RICHARDS ROAD, SUITE 150 BELLEVIEW, WA 98005	CONSULTANT-TEMP LABOR	160,586.
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	2	

Department of the Treasury
Internal Revenue Service

Name of the Organization OREGON FOOD BANK	Employer identification number 93-0785786
-----------------------------------------------------	-----------------------------------------------------

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted 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) SHANTAE JOHNSON DIRECTOR	1 0	X						0.	0.	0.
(2) KRISTOFER ZIRKEL DIRECTOR	1 0	X						0.	0.	0.
(3) LUKE DIRKS DIRECTOR	1 0	X						0.	0.	0.
(4) KRISTIN ANDERSON OSTROM DIRECTOR	1 0	X						0.	0.	0.
(5) GABRIELLA PENA DIRECTOR	1 0	X						0.	0.	0.
(6) LOUISE VAZ DIRECTOR	1 0	X						0.	0.	0.
(7) SARAH MCGREGOR DIRECTOR	1 0	X						0.	0.	0.
(8) CARLY AUTEN DIRECTOR	1 0	X						0.	0.	0.
(9) BETTY BROWN DIRECTOR	1 0	X						0.	0.	0.
(10) DARIUS HARTWELL DIRECTOR	1 0	X						0.	0.	0.
(11) MAYRA LEDESMA DIRECTOR	1 0	X						0.	0.	0.
(12) VIVANA MATTHEWS DIRECTOR	1 0	X						0.	0.	0.
(13) -----	-----									
(14) -----	-----									
(15) -----	-----									
(16) -----	-----									
(17) -----	-----									
(18) -----	-----									
(19) -----	-----									
(20) -----	-----									
(21) -----	-----									

Part VIII Statement of Revenue

Check 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	1a	Federated campaigns					
	1b	Membership dues					
	1c	Fundraising events					
	1d	Related organizations					
	1e	Government grants (contributions)	20,179,739.				
	1f	All other contributions, gifts, grants, and similar amounts not included above	85,869,001.				
	1g	Noncash contributions included in lines 1a-1f	47,591,854.				
	1h	Total. Add lines 1a-1f	106048740.				
	Program Service Revenue	2a		Business Code			
FOOD TO BUY PROGRAM		624210	2,022,804.	2,022,804.			
b							
c							
d							
e							
g		Total. Add lines 2a-2f		2,022,804.			
Other Revenue	3		Investment income (including dividends, interest, and other similar amounts)				
			834,625.		834,625.		
	4		Income from investment of tax-exempt bond proceeds				
	5		Royalties				
	6a			(i) Real		(ii) Personal	
		Gross rents					
		Less: rental expenses					
	6c		Rental income or (loss)				
	6d		Net rental income or (loss)				
	7a			(i) Securities		(ii) Other	
		Gross amount from sales of assets other than inventory		19691259.			
		Less: cost or other basis and sales expenses		19700333.			
	7c		Gain or (loss)				
	7d		Net gain or (loss)				
	8a		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18				
8b		Less: direct expenses					
8c		Net income or (loss) from fundraising events					
9a		Gross income from gaming activities. See Part IV, line 19					
9b		Less: direct expenses					
9c		Net income or (loss) from gaming activities					
10a		Gross sales of inventory, less returns and allowances					
10b		Less: cost of goods sold					
10c		Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11a		Business Code				
	MISC INCOME		900099	77,448.	77,448.		
	b						
	c						
	e	Total. Add lines 11a-11d		77,448.			
12			Total revenue. See instructions				
			108974543.		2,100,252.		
					0.		
					825,551.		

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.	75,747,613.	75,747,613.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	374,030.	260,687.	34,938.	78,405.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages.	19,101,429.	13,313,074.	1,784,280.	4,004,075.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	787,489.	548,854.	73,560.	165,075.
9 Other employee benefits.	2,473,752.	1,724,125.	231,075.	518,552.
10 Payroll taxes.	1,570,361.	1,094,490.	146,689.	329,182.
11 Fees for services (nonemployees):				
a Management.				
b Legal.				
c Accounting.				
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.	740,179.			740,179.
f Investment management fees.	104,891.		104,891.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	2,013,588.	1,052,756.	375,007.	585,825.
12 Advertising and promotion.				
13 Office expenses.	1,767,690.	939,098.	157,123.	671,469.
14 Information technology.	1,116,684.	743,904.	70,391.	302,389.
15 Royalties.				
16 Occupancy.	1,030,593.	944,965.	31,253.	54,375.
17 Travel.	203,430.	164,009.	11,088.	28,333.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	313,560.	252,797.	17,091.	43,672.
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	1,247,992.		1,247,992.	
23 Insurance.	133,812.	123,416.	3,793.	6,603.
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 <u>FOOD RELATED COSTS</u>	1,432,224.	1,432,224.		
b <u>TRANSPORTATION</u>	924,427.	924,427.		
c <u>DUES AND FEES</u>	790,003.	170,947.	350,178.	268,878.
d <u>PARTNER SUPPORT</u>	41,000.			41,000.
e All other expenses.				
25 Total functional expenses. Add lines 1 through 24e.	111,914,747.	99,437,386.	4,639,349.	7,838,012.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash – non-interest-bearing	29,921,155.	1	11,429,767.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	9,989,047.	3	4,308,607.
	4 Accounts receivable, net	4,161,573.	4	9,944,580.
	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	3,447,123.	8	3,585,167.
	9 Prepaid expenses and deferred charges	426,228.	9	481,133.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 31,338,848.		
	b Less: accumulated depreciation	10b 12,887,455.		
	11 Investments – publicly traded securities	10,274,359.	11	11,607,060.
	12 Investments – other securities. See Part IV, line 11	13,909,452.	12	28,988,302.
	13 Investments – program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	88,735,569.	16	88,796,009.	
Liabilities	17 Accounts payable and accrued expenses	2,579,315.	17	4,759,815.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D ..	66,497.	25	51,016.
	26 Total liabilities. Add lines 17 through 25	2,645,812.	26	4,810,831.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. <input checked="" type="checkbox"/>			
	27 Net assets without donor restrictions	78,498,154.	27	77,184,509.
	28 Net assets with donor restrictions	7,591,603.	28	6,800,669.
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. <input type="checkbox"/>			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	86,089,757.	32	83,985,178.
33 Total liabilities and net assets/fund balances	88,735,569.	33	88,796,009.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	108,974,543.
2	Total expenses (must equal Part IX, column (A), line 25)	2	111,914,747.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,940,204.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	86,089,757.
5	Net unrealized gains (losses) on investments	5	835,625.
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	83,985,178.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <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?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. <p style="text-align: center;">SEE SCHEDULE O</p>			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R Part 200, Subpart F?	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	X	

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

2022

Open to Public Inspection

Name of the organization OREGON FOOD BANK	Employer identification number 93-0785786
-----------------------------------------------------	-----------------------------------------------------

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		
(A)						
(B)						
(C)						
(D)						
(E)						
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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	72560022.	104056835.	113416995.	104423987.	106048740.	500506579.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3	72560022.	104056835.	113416995.	104423987.	106048740.	500506579.
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)						0.
6 Public support. Subtract line 5 from line 4						500506579.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	72560022.	104056835.	113416995.	104423987.	106048740.	500506579.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	342,044.	253,949.	300,569.	802,341.	834,625.	2,533,528.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI	58,628.	91,434.	70,224.	123,611.	77,448.	421,345.
11 Total support. Add lines 7 through 10						503461452.
12 Gross receipts from related activities, etc. (see instructions)					12	9,705,786.
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 2022 (line 6, column (f), divided by line 11, column (f))	14	99.41 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	99.34 %

16a **33-1/3% support test—2022.** 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

b **33-1/3% support test—2021.** 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

17a **10%-facts-and-circumstances test—2022.** 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

b **10%-facts-and-circumstances test—2021.** 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

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

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services 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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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 2022 (line 8, column (f), divided by line 13, column (f)).	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)).	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17.	18	%

19a 33-1/3% support tests—2022. 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—2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization.

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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.		Yes	No
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 (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part VI

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

PART II, LINE 10 - OTHER INCOME

<u>NATURE AND SOURCE</u>	<u>2022</u>	<u>2021</u>	<u>2020</u>	<u>2019</u>	<u>2018</u>
TOTAL	\$ 77,448.	\$ 123,611.	\$ 70,224.	\$ 91,434.	\$ 58,628.
	<u>\$ 77,448.</u>	<u>\$ 123,611.</u>	<u>\$ 70,224.</u>	<u>\$ 91,434.</u>	<u>\$ 58,628.</u>

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

PUBLIC DISCLOSURE COPY Schedule of Contributors

OMB No. 1545-0047

2022

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

Name of the organization

OREGON FOOD BANK

Employer identification number

93-0785786

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)(3) (enter number) organization

[] 4947(a)(1) nonexempt charitable trust not treated as a private foundation

[] 527 political organization

Form 990-PF

[] 501(c)(3) exempt private foundation

[] 4947(a)(1) nonexempt charitable trust treated as a private foundation

[] 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

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 OREGON FOOD BANK	Employer identification number 93-0785786
-------------------------------------------------	-----------------------------------------------------

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		\$ 3,093,825.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 10,930,266.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 3,340,783.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 2,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization OREGON FOOD BANK	Employer identification number 93-0785786
------------------------------------------	----------------------------------------------

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	FOOD ----- ----- -----	\$ 3,093,825.	
3	FOOD ----- ----- -----	\$ 3,340,783.	
-----	----- ----- -----	\$ -----	
-----	----- ----- -----	\$ -----	
-----	----- ----- -----	\$ -----	
-----	----- ----- -----	\$ -----	

Name of organization
OREGON FOOD BANK

Employer identification number
93-0785786

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 information once. See instructions.) \$ _____ **N/A**
 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
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(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

(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

(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

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2022

Department of the Treasury
Internal Revenue Service

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.

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 OREGON FOOD BANK	Employer identification number 93-0785786
-------------------------------------------------	-----------------------------------------------------

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. See instructions for definition of "political campaign activities."
- 2 Political campaign activity expenditures. See instructions. \$ _____
- 3 Volunteer hours for political campaign activities. See instructions. _____

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. \$ _____ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955. \$ _____ 0.
- 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-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

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).....		344,749.													
b Total lobbying expenditures to influence a legislative body (direct lobbying).....															
c Total lobbying expenditures (add lines 1a and 1b).....		344,749.	0.												
d Other exempt purpose expenditures.....		110,724,928.													
e Total exempt purpose expenditures (add lines 1c and 1d).....		111,069,677.	0.												
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.....		1,000,000.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is</th> <th style="text-align: left;">The lobbying nontaxable amount is</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is	The lobbying nontaxable amount is	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is	The lobbying nontaxable amount is														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f).....		250,000.	0.												
h Subtract line 1g from line 1a. If zero or less, enter -0-.....		94,749.	0.												
i Subtract line 1f from line 1c. If zero or less, enter -0-.....		0.	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 checked="" 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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	1,154.	9,482.	76,194.	344,749.	431,579.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures		2,763.	25,239.	344,749.	372,751.

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?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i.			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
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?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		

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 expenditures 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.

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

2022

Open to Public Inspection

Name of the organization

Employer identification number

OREGON FOOD BANK

93-0785786

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4.

- 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...
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes...

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...
Protection of natural habitat...
Preservation of open space...
Preservation of a historically important land area...
Preservation of a certified historic structure...

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

Table with 2 columns: Question number, Held at the End of the Tax Year. Rows 2a, 2b, 2c, 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?
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)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet...

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.

- 1 a 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

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
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange program
- e Other _____

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

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

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

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

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

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

2 a 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
1 a Beginning of year balance	2,379,545.	2,613,354.	1,968,953.	2,063,668.	2,019,400.
b Contributions					
c Net investment earnings, gains, and losses	143,125.	-140,768.	732,212.	-7,460.	130,130.
d Grants or scholarships					
e Other expenditures for facilities and programs	98,298.	93,041.	87,811.	87,225.	85,862.
f Administrative expenses					
g End of year balance	2,424,372.	2,379,545.	2,613,354.	1,968,983.	2,063,668.

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

- a Board designated or quasi-endowment 100.00 %
- b Permanent endowment _____ %
- c Term endowment _____ %

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

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

	Yes	No
(i) Unrelated organizations	X	
(ii) Related organizations		X
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. **SEE PART XIII**

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
1 a Land		3,394,162.		3,394,162.
b Buildings		19,286,242.	7,367,406.	11,918,836.
c Leasehold improvements				
d Equipment		4,495,624.	2,710,853.	1,784,771.
e Other		4,162,820.	2,809,196.	1,353,624.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				18,451,393.

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 CERTIFICATES OF DEPOSIT/MONEY	19,374,541.	COST
(A) FIXED INCOME SECURITIES	7,189,389.	COST
(B) FUNDS HELD AT OREGON COMMUNITY FOUNDATIO		
(C)	2,424,372.	COST
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	28,988,302.	

Part VIII Investments – Program Related. N/A
 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)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets. N/A
 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)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (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) OBLIGATIONS UNDER ANNUITY AGREEMENT	51,016.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	51,016.

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

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	109,711,449.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	a Net unrealized gains (losses) on investments	2 a	835,625.
	b Donated services and use of facilities	2 b	6,172.
	c Recoveries of prior year grants	2 c	
	d Other (Describe in Part XIII.)	2 d	
	e Add lines 2 a through 2 d	2 e	841,797.
3	Subtract line 2 e from line 1	3	108,869,652.
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	4 a	104,891.
	b Other (Describe in Part XIII.)	4 b	
	c Add lines 4 a and 4 b	4 c	104,891.
5	Total revenue. Add lines 3 and 4 c . (This must equal Form 990, Part I, line 12.)	5	108,974,543.

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	111,816,028.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	a Donated services and use of facilities	2 a	6,172.
	b Prior year adjustments	2 b	
	c Other losses	2 c	
	d Other (Describe in Part XIII.)	2 d	
	e Add lines 2 a through 2 d	2 e	6,172.
3	Subtract line 2 e from line 1	3	111,809,856.
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	4 a	104,891.
	b Other (Describe in Part XIII.)	4 b	
	c Add lines 4 a and 4 b	4 c	104,891.
5	Total expenses. Add lines 3 and 4 c . (This must equal Form 990, Part I, line 18.)	5	111,914,747.

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 - INTENDED USES OF ENDOWMENT FUND

THE PURPOSE OF THE ENDOWMENT IS TO PROVIDE A LONG-TERM SOURCE OF REVENUE TO SUPPLEMENT OTHER SOURCES OF REVENUE AND TO PROTECT MAJOR CAPITAL INVESTMENTS IN ORDER TO BEST SERVE THE MISSION OF THE OREGON FOOD BANK AND ACHIEVE ITS LONG-TERM STRATEGIC GOALS. USE OF THE ENDOWMENT IS GOVERNED BY A BOARD ENDOWMENT POLICY ADOPTED 2/25/1998 AND AMENDED 1/27/2010 AND 4/9/2014. PRINCIPAL AND INCOME CAN BE ACCESSED IF THE BOARD OF DIRECTORS TAKES A SPECIFIC ACTION TO DO SO.

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

OREGON FOOD BANK

Employer identification number

93-0785786

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 MAL WARWICK DONOR DIGITAL 2550 NINTH STREET BERKELEY CA 94710	DIRECT MAIL FUNDRAISING		X	2,666,166.	823,137.	1,843,029.
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				2,666,166.	823,137.	1,843,029.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- OR WA
-
-
-
-

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	
		(event type)	(event type)	NONE (total number)	(add column (a) through column (c))	
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 column (a) through column (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: _____
- 10 a 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	13 a	%
b An outside facility	13 b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name -----

Address -----

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c If "Yes," enter name and address of the third party:

Name -----

Address -----

16 Gaming manager information:

Name -----

Gaming manager compensation \$ _____

Description of services provided -----

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year . . . \$ _____

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

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization

OREGON FOOD BANK

Employer identification number

93-0785786

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. SEE PART IV

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
(1) REGIONAL FOOD BANKS & LOCAL FOOD DIST AGENCIES IN OR/WA VARIOUS CITIES, OR 97999			15,111,648.	0.			TO PREVENT HUNGER
(2) REGIONAL FOOD BANKS & LOCAL FOOD DIST AGENCIES IN OR/WA VARIOUS CITIES, OR 97999			0.	60,680,965.	COST OR DONATED VALUE	FOOD	TO PREVENT HUNGER
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 2
- 3 Enter total number of other organizations listed in the line 1 table. 0

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

TEEA3901L 06/29/22

Schedule I (Form 990) 2022

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6						
7						

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 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

GOVERNMENT GRANTS ARE TYPICALLY ON A REIMBURSEMENT BASIS. OFB WORKS WITH NETWORK

PARTNERS IN ADVANCE TO OUTLINE A WORK PLAN AND BUDGET TO SATISFY DONOR INTENT.

QUARTERLY REPORTS ARE REVIEWED BY OFB TO TRACK PROGRESS AND ENSURE COMPLIANCE.

DOCUMENTATION WITH REQUESTS FOR REIMBURSEMENT OF EXPENSES ARE SUBMITTED MONTHLY OR

QUARTERLY AND DOCUMENTATION IS MAINTAINED FOR REVIEW AND AUDIT. ANNUAL MONITORING OF

SUB-RECIPIENT ENTITIES IS PERFORMED. OFB MONITORS PROGRAM OPERATIONS TO ENSURE FUNDS

ARE ADMINISTERED IN ACCORDANCE WITH FEDERAL, STATE REQUIREMENTS, AND PRIVATE DONOR

INTENT. IF DEFICIENCIES ARE IDENTIFIED THROUGH THE MONITORING, OFB REVIEWS A PLAN

FOR CORRECTIVE ACTION SUBMITTED BY RECIPIENT AND FORWARDS TO THE FUNDER.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2022

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.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

OREGON FOOD BANK

Employer identification number

93-0785786

Part I Questions Regarding Compensation

		Yes	No
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"/>	Travel for companions		
<input type="checkbox"/>	Tax indemnification and gross-up payments		
<input type="checkbox"/>	Discretionary spending account		
<input type="checkbox"/>	Housing allowance or residence for personal use		
<input type="checkbox"/>	Payments for business use of personal residence		
<input type="checkbox"/>	Health or social club dues or initiation fees		
<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	1b	
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?	2	
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"/>	Independent compensation consultant		
<input checked="" type="checkbox"/>	Form 990 of other organizations		
<input type="checkbox"/>	Written employment contract		
<input checked="" type="checkbox"/>	Compensation survey or study		
<input checked="" type="checkbox"/>	Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment?	4a	X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X
c	Participate in or receive payment from an equity-based compensation arrangement?	4c	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization?	5a	X
b	Any related organization?	5b	X
	If "Yes" on line 5a or 5b, describe in Part III.		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization?	6a	X
b	Any related organization?	6b	X
	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	7	X
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.	8	X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) 2022

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	(i) Bonus & incentive compensation	(ii) Other reportable compensation				
1 SUSANNAH MORGAN CEO	(i) 220,285. (ii) 0.	0.	0.	27,000.	0.	20,215.	267,500.	0.	
2 ANDREA WILLIAMS DEPUTY CEO	(i) 143,864. (ii) 0.	0.	0.	4,316.	0.	11,901.	160,081.	0.	
3 CURTIS HARRIS DIR. PHILANTHROPY	(i) 143,808. (ii) 0.	0.	0.	2,039.	0.	10,418.	156,265.	0.	
4 RUT MARTINEZ-ALECEA DIR. CULTURE	(i) 135,794. (ii) 0.	0.	0.	5,500.	0.	10,410.	151,704.	0.	
5 JASON STEPHANY DIR. COMMUNICATION	(i) 133,113. (ii) 0.	0.	0.	6,656.	0.	11,022.	150,791.	0.	
6 STARR YURKEWYCZ DIR. PROGRAMS	(i) 132,994. (ii) 0.	0.	0.	3,990.	0.	20,198.	157,182.	0.	
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									

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.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

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.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

OREGON FOOD BANK

Employer identification number

93-0785786

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded	X	78	467,500.	FMV
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	414	47,124,354.	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (_____)				
26 Other (_____)				
27 Other (_____)				
28 Other (_____)				

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

	Yes	No
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 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2022

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 O
(Form 990)**

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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.

2022

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

OREGON FOOD BANK

93-0785786

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

REVIEW AND APPROVAL BY THE BOARD OF DIRECTORS BEFORE FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

DISCLOSURE AND ABSTENTION BY MEMBERS ON CASE BY CASE BOARD ACTIONS.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

COMPLETE MARKET SURVEY IS PERFORMED BY STAFF EVERY FEW YEARS AND REVIEWED BY BOARD EXECUTIVE COMMITTEE. CEO SALARY IS REVIEWED AND APPROVED BY THE INDEPENDENT BOARD EXECUTIVE COMMITTEE ANNUALLY AND RECORDED IN CHAIRPERSON RECORDS AND/OR MINUTES. FULL BOARD VOTES ON TOTAL COMPENSATION PLAN BASED ON UPDATED MARKET INFORMATION.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

FINANCIAL STATEMENTS ARE POSTED ON OFB WEBSITE. CONFLICT OF INTEREST AND OTHER GOVERNING DOCUMENTS ARE NOT POSTED.

FORM 990, PART XII, LINE 2 - CHANGE OF OVERSIGHT OR SELECTION PROCESS

THE PROCESS HAS NOT CHANGED SINCE THE PRIOR YEAR.

SCHEDULE G, PART I, LINE 2B, COLUMN (V)

INVOICES IDENTIFY THE TYPE OF COST.

SCHEDULE I, PART I, LINE 2

GOVERNMENT GRANTS ARE TYPICALLY ON A REIMBURSEMENT BASIS. OFB WORKS WITH NETWORK PARTNERS IN ADVANCE TO OUTLINE A WORK PLAN AND BUDGET TO SATISFY DONOR INTENT. QUARTERLY REPORTS ARE REVIEWED BY OFB TO TRACK PROGRESS AND ENSURE COMPLIANCE. DOCUMENTATION WITH REQUESTS FOR REIMBURSEMENT OF EXPENSES ARE SUBMITTED MONTHLY OR QUARTERLY AND DOCUMENTATION IS MAINTAINED FOR REVIEW AND AUDIT. ANNUAL MONITORING OF SUB-RECIPIENT ENTITIES IS PERFORMED. OFB MONITORS PROGRAM OPERATIONS TO ENSURE FUNDS ARE ADMINISTERED IN ACCORDANCE WITH FEDERAL, STATE REQUIREMENTS AND PRIVATE DONOR INTENT. IF DEFICIENCIES ARE IDENTIFIED THROUGH THE MONITORING, OFB REVIEWS A PLAN FOR CORRECTIVE ACTION SUBMITTED BY RECIPIENT AND FORWARDS TO THE FUNDER.

Name of the organization

OREGON FOOD BANK

Employer identification number

93-0785786

SCHEDULE M, PART I, COLUMN (B)

NUMBER OF CONTRIBUTIONS FOR ALL ITEMS EXCEPT FOOD INVENTORY WHICH IS TRACKED AS
NUMBER OF POUNDS RECEIVED. THE ORGANIZATION RECEIVED APPROXIMATELY 20.8 MILLION
POUNDS OF FOOD AND GROCERY PRODUCTS FROM THE FOOD INDUSTRY.