Return of Organization Exempt From Income Tax

OMB No. 1545-0047 Open to Public

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Department of the Treasury ► Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection and ending A For the 2014 calendar year, or tax year beginning D Employer identification number Check if applicable: C Name of organization Address change Good360 Name change 54-1282616 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated (703) 836-2121 675 North Washington Street 330 G Gross receipts \$ 314 530 962. City or town, state or province, country, and ZIP or foreign postal code Amended return Alexandria, VA 22314 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: Shabab Gruberg Yes X No for subordinates? JYes ☐ No same as C above H(b) Are all subordinates included?

| 1 7 | ax-ex | tempt status: 🗓 501(c)(3) 🔲 501(c)()◀ (insert no.) 🔲 4947(a)(1) or 🔲 | 527 If "No," attach | a list. (see instructions) |
|--------------------------------|-------|---|---------------------------|-------------------------------|
| J١ | Vebs | ite: > www.good360.org | H(c) Group exempt | ion number 🕨 |
| K F | orm o | f organization: X Corporation Trust Association Other LY | ear of formation: 1984 | M State of legal domicile: VA |
| Pa | art I | | | |
| ø | 1 | Briefly describe the organization's mission or most significant activities: Our mission | is to help compani | es |
| ü | | help charities through product donations. | | |
| Governance | 2 | Check this box I if the organization discontinued its operations or disposed of n | assets. | |
| ove | 3 | 1 | | |
| S S | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | |
| Activities & | 5 | Total number of individuals employed in calendar year 2014 (Part V, line 2a) | | |
| | 6 | Total number of volunteers (estimate if necessary) | 6 | |
| | 7 a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7: | |
| • | b | Net unrelated business taxable income from Form 990-T, line 34 | 71 | 0. |
| | | | Prior Year | Current Year |
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | 305,733,329 | 309,216,742. |
| | 9 | Program service revenue (Part VIII, line 2g) | 4,232,895 | 5,250,229. |
| | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 0 | 0. |
| œ | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 48,562 | |
| | 12 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 310,014,786 | 314,530,962. |
| | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 315,590,270 | . 304,843,923. |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 0 | |
| S | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 3,115,478 | |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 0 | . 124. |
| xbe | b | Total fundraising expenses (Part IX, column (D), line 25) | | |
| ш | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 3,995,736 | |
| | 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 322,701,484 | |
| | 19 | Revenue less expenses. Subtract line 18 from line 12 | -12,686,698 | |
| 98 | | | Beginning of Current Year | |
| Net Assets or Fund Balances | 20 | Total assets (Part X, line 16) | 8,422,833 | |
| O BS | 21 | Total liabilities (Part X, line 26) | 5,564,204 | |
| 캺 | 22 | Net assets or fund balances. Subtract line 21 from line 20 | 2,858,629 | 5,481,248. |
| Do | rt 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 Shabab Gruberg, Current Interim Type or print name and title | Pres. & CEO | Dat | 11/4/2015 | |
|--|---|----------------------|------------------|-------------------------|----------|
| Paid | Print/Type preparer's name Frank H. Smith | Preparer's signature | Date 10/30/15 | Check PTIN if P00639053 | |
| Preparer | Firm's name Raffa, P.C. | | Firr | n's EIN 52-1511275 | |
| Use Only | Firm's address 1899 L Street, NW, Suit Washington, DC 20036 | e 900 | Pho | one no.(202) 822-5000 | |
| Charles of the Addition of the Control of the Contr | RS discuss this return with the preparer shown a | | | X Yes | No No |

LHA For Paperwork Reduction Act Notice, see the separate instructions.

COPY

| | 990 (2014) Good 360 | 54-1282616 | Page 2 |
|-------------|--|-----------------------------|---------------|
| Pa | rt 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: Good360 transforms lives and strengthens communities by mobilizing | | |
| | | | |
| | companies to donate critically needed goods. | | |
| | | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on | | |
| | the prior Form 990 or 990-EZ? | ШҮ | 'es 🗓 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 serval f "Yes," describe these changes on Schedule O. | vices?Y | es 🗓 No |
| 4 | • | one as modelired by exper | 2000 |
| 4 | Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to | | |
| | revenue, if any, for each program service reported. | to others, the total expens | es, and |
| | (Code:) (Expenses \$ | (Payanua \$ 5 | ,250,229. |
| Tu | At Good360, we bring together nonprofits, individuals and companies to | (Heverlue 4 | , , |
| | make a greater social impact in communities around the world. We work | | |
| | with our partners to deliver more than \$300 million in product | | |
| | donations each year to our 40,000+ nonprofit members across the globe. | | |
| | Our nonprofit partners receive the resources they need to help their | | |
| | communities, and corporate and individual donors witness the tangible | | |
| | good from their giving. From books for children to clothing and | | |
| | personal care items for disaster victims to mattresses for homeless | | |
| | shelters or technology for schools, Good360 gives corporate product | | |
| | donations a new and sustainable afterlife by keeping them out of | | |
| | landfills. We help companies achieve zero-waste initiatives while | | |
| | fulfilling the growing needs of our network of pre-qualified charities. | | |
| 4b | (Code:) (Expenses \$ including grants of \$) | (Revenue \$ | |
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| <i>A</i> =1 | Other pregram convices (Describe in Schedule O.) | | |
| 4U | Other program services (Describe in Schedule O.) | | |

including grants of \$

309,063,163.

Form **990** (2014)

4e

Total program service expenses ▶

) (Revenue \$

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Form 990 (2014) Good 360 Part IV Checklist of Required Schedules

| | | | Yes | No |
|-----|---|-----|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | |
| | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | х |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | | | |
| | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | Х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | х |
| 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? | | | |
| | If "Yes," complete Schedule D, Part IV | 9 | | Х |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | Х |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | Х | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | Х |
| С | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | Х |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | Х |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | 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)? If "Yes," complete Schedule D, Part X | 11f | Х | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | х | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | Х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Х |
| 14a | | 14a | | Х |
| 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? If "Yes," complete Schedule F, Parts I and IV | 14b | Х | |
| 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? If "Yes," complete Schedule F, Parts II and IV | 15 | Х | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | Х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | Х |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | Х |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | |
| | complete Schedule G, Part III | 19 | | Х |
| 20a | , , , | 20a | | Х |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |

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Form 990 (2014) Good 360 Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|-----|--|-----|-----|----------|
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | Х | |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | 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? If "Yes," complete | | | |
| | Schedule J | 23 | Х | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | |
| | Schedule K. If "No", go to line 25a | 24a | | Х |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | |
| | any tax-exempt bonds? | 24c | | |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | Х |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 25b | | Х |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or | | | |
| | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," | 000 | | x |
| 07 | complete Schedule L, Part II | 26 | | |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | | | |
| | | 27 | | x |
| 28 | of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | |
| 20 | instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | х |
| | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | х |
| | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | |
| | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | Х | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | |
| | If "Yes," complete Schedule N, Part I | 31 | | Х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | Х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | Х |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| | Part V, line 1 | 34 | | Х |
| | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | Х |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | <u> </u> |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | 1 | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | Х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | Х |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | | ., | |
| | Note. All Form 990 filers are required to complete Schedule O | 38 | Х | |

Form **990** (2014)



| Form | 990 (2014) Good360 | 54-128 | 2616 | F | age 5 |
|------|--|---------------------------|----------|-----|--------------|
| Pai | t 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 | 1a | 9 | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 0 | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and r | reportable gaming | | | |
| | (gambling) winnings to prize winners? | | 1c | х | |
| 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 | 52 | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax retu | ırns? | 2b | х | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions | | | | |
| За | D. I | , | • | | х |
| | If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule | | | | |
| | At any time during the calendar year, did the organization have an interest in, or a signature or other | | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial | • | 4a | | х |
| b | If "Yes," enter the name of the foreign country: | , | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A | Accounts (FBAR). | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | 5a | | х |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa | | | | х |
| | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | _ | | |
| | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | | |
| | any contributions that were not tax deductible as charitable contributions? | | _ | | х |
| b | If "Yes," did the organization include with every solicitation an express statement that such contribution | | | | |
| | were not tax deductible? | | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se | ervices provided to the p | ayor? 7a | | х |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w | | | | |
| | to file Form 8282? | • | 7c | | x |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 1 1 | | | |
| | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of | L | 7e | | х |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont | | | | Х |
| g | If the organization received a contribution of qualified intellectual property, did the organization file F | | | | |
| • | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz | · · | | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained | | | | |
| | | | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | |
| а | | | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | | |
| а | Gross income from members or shareholders | 11a | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | | | |
| | amounts due or received from them.) | 11b | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form | n 1041? | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | • | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | | | |
| | organization is licensed to issue qualified health plans | 13b | | | |
| С | Enter the amount of reserves on hand | 13c | | | |
| | | | 14a | | х |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul | | ····· | + | L |
| | | | | | |

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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 in Schedule O. See instructions.

| | to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. | | | | | | |
|-----|---|---------|------|----|--|--|--|
| | Check if Schedule O contains a response or note to any line in this Part VI | | | X | | | |
| Sec | tion A. Governing Body and Management | | | | | | |
| | | | Yes | No | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 3 | | | | | |
| | 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 in Schedule O. | | | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 1b | 3 | | | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | | | | | |
| | officer, director, trustee, or key employee? | 2 | | х | | | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | | | | |
| | of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | х | | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | Х | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | Х | | | |
| 6 | Did the organization have members or stockholders? | 6 | | Х | | | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | | | | | | |
| | more members of the governing body? | 7a | | х | | | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | | | | |
| | persons other than the governing body? | 7b | | Х | | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | | | |
| а | The governing body? | 8a | Х | | | | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Х | | | | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | | | | | |
| | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | Х | | | |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | | | | | |
| | | | Yes | No | | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | Х | | | | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | | | | | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | Х | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Х | | | | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Х | | | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Х | | | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | | | | |
| | in Schedule O how this was done | 12c | Х | | | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Х | | | | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Х | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | | | | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | | |
| | The organization's CEO, Executive Director, or top management official | 15a | Х | | | | |
| b | Other officers or key employees of the organization | 15b | | Х | | | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | | | | |
| | taxable entity during the year? | 16a | | Х | | | |
| 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 | | | | | |
| Sec | tion C. Disclosure | | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, ID, IL | | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) | availab | le | | | | |
| | for public inspection. Indicate how you made these available. Check all that apply. | | | | | | |
| | Own website Another's website Upon request Other (explain in Schedule O) | | | | | | |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an | d finan | cial | | | | |
| | statements available to the public during the tax year. | | | | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records: | | | | | | |
| | Michael Avis, CPA - (703) 299-7566 | | | | | | |

1330 Braddock Place, Suite 600, Alexandria, VA 22314

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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 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 and/or Box 7 of Form 1099-MISC) 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.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

| (A) | (B) | l | <u> </u> | | C) | прс | ilou | (D) | (E) | (F) |
|--|------------------------|--------------------------------|-----------------------|----------|--------------|------------------------------|----------|----------------------|------------------------------|------------------------------|
| Name and Title | Average | (do | | Pos | ition |) than | one | Reportable | Reportable | Estimated |
| | hours per week | box | , unle | ss pe | rson i | is bot or/trus | h an | compensation from | compensation from related | amount of other |
| | (list any | ioi | | | | | Ė | the | organizations | compensation |
| | hours for | Individual trustee or director | | | | ted | | organization | (W-2/1099-MISC) | from the |
| | related | stee (| truste | | ap. | beusa | | (W-2/1099-MISC) | | organization |
| | organizations below | lual tri | tional | | nploye | st com | _ | | | and related organizations |
| | line) | Individ | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | o.gaa |
| (1) Carly Fiorina | 2.00 | | | | | | | | | |
| Board Chair | | Х | | Х | | | | 0. | 0. | 0. |
| (2) Matthew Connelly | 2.00 | | | | | | | | | |
| Director | | Х | | | | | | 0. | 0. | 0. |
| (3) Mikel Arden Durham | 2.00 | | | | | | | | | |
| Director | | Х | | | | | | 0. | 0. | 0. |
| (4) Saul Ramirez | 2,00 | ١,, | | | | | | | 0. | _ |
| (5) Peter Resnick | 2.00 | Х | | | | | | 0. | 0, | 0. |
| Director | 2.00 | X | | | | | | 0. | 0. | 0. |
| (6) Bob Schwartz | 2.00 | ^ | | | | | | 0. | 0. | <u> </u> |
| Director | 2.00 | x | | | | | | 0. | 0. | 0. |
| (7) Matthew Shay | 2.00 | | | | | | | | | <u>~.</u> |
| Director | | x | | | | | | 0. | 0. | 0. |
| (8) Mark White | 2.00 | | | | | | | - | - | |
| Director | | х | | | | | | 0. | 0. | 0. |
| (9) Cindy Hallberlin | 45.00 | | | | | | | | | |
| CEO | | | | х | | | | 267,215. | 0. | 20,685. |
| (10) Michael Avis | 45.00 | | | | | | | | | |
| CFO | | | | Х | | | | 114,544. | 0. | 12,133. |
| (11) Gerald Borenstein | 45.00 | | | | | | | | | |
| CFO (Thru 2/24/14) | | | | Х | | | | 43,664. | 0. | 3,406. |
| (12) Shabab Gruberg | 45.00 | | | | | | | | | |
| CIO | | | | | Х | | | 159,298. | 0. | 13,901. |
| (13) Melissa Lanning | 45.00 | | | | | | | | | |
| CMO | 45.00 | | | | | Х | | 143,189. | 0. | 14,428. |
| (14) Doyle Delph | 45.00 | | | | | ,, | | 110 046 | | 1 261 |
| VP, Donor Relations (Thru 10/31/14) (15) Lori Cook | 45.00 | | | _ | _ | Х | \vdash | 119,246. | 0. | 1,261. |
| Director of National Accounts | 45.00 | | | | | x | | 104 200 | 0. | 7 447 |
| Director of National Accounts | | \vdash | | \vdash | | ^ | \vdash | 104,388. | 0. | 7,447. |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | - 000 |

COPY

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

| Fai | Section A. Officers, Directors, Trus | itees, Key Em | ploy | <u>rees</u> | , an | a Hi | gnes | st C | compensated Employe | es (continuea) | | | | |
|-----|---|-------------------|--------------------------------|-----------------------|-------------|--------------|---------------------------------|-------------|--------------------------|---------------------------|--------------|---------|----------------|------|
| | (A) | (B) | | | - | 2) | | | (D) | (E) | | | (F) | |
| | Name and title | Average | (do | | Pos heck | |) than d | one | Reportable | Reportable | | | timate | |
| | | hours per week | | | | | is both or/trus | | · · | compensatio | | | nount | of |
| | | (list any | Η. | | | | | | from the | from related organization | | l | other pensa | tion |
| | | hours for | direct | | | | pe | | | (W-2/1099-MI | | | om th | |
| | | related | tee or | ustee | | | ensat | | (W-2/1099-MISC) | • | • | org | anizat | ion |
| | | organizations | al trus | onal tr | | loyee | comp | | | | | | d relat | |
| | | below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | rmer | | | | orga | anizati | ons |
| | | | 트 | Ë | 5 | - S | E E | 요 | | | | | | |
| | | | | | | | | | | | | | | |
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| | | | | | | | Н | | | | | | | |
| | | | | | | | | | | | | | | |
| | Sub-total | | | | | | | | 951,544. | | 0. | | 73, | 261. |
| С | Total from continuation sheets to Part V | II, Section A | | | | | l | > | 0. | | 0. | | | 0. |
| d | Total (add lines 1b and 1c) | | | | | | | | 951,544. | | 0. | | 73 | 261. |
| 2 | Total number of individuals (including but r | ot limited to th | ose | liste | ed al | bove | e) wh | o r | eceived more than \$100 | ,000 of reportab | ıle | | | |
| | compensation from the organization | | | | | | | | | | | | Vaa | NI a |
| _ | 5:11 | | | | | | | | | | | | Yes | No |
| 3 | Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i> | • | | | • | • | • | | • | | ļ | 3 | | Х |
| 4 | For any individual listed on line 1a, is the su | | | | | | | | her compensation from | | | 3 | | 21 |
| 7 | and related organizations greater than \$15 | • | | | | | | | • | ū | | 4 | Х | |
| 5 | Did any person listed on line 1a receive or | | | | | | | | | idual for services | | | | |
| _ | rendered to the organization? If "Yes," com | | | | | | | | | | | 5 | | х |
| Sec | tion B. Independent Contractors | • | | | | | | | | | | | | |
| 1 | Complete this table for your five highest co | mpensated in | depe | ende | ent c | onti | racto | rs t | that received more than | \$100,000 of cor | npens | ation f | rom | |
| | the organization. Report compensation for | the calendar y | ear (| endi | ng v | vith | or w | thir | n the organization's tax | year. | | | | |
| | (A) | | | | | | | | (B) | | | (C | | |
| | Name and business | address | | | | | | | Description of s | ervices | С | ompe | nsatio | n |
| MIQ | | | | | | | | | | | | | | |
| | 9 Network Place, Chicago, IL 606 | 01 | | | | | | _ | Shipping | | <u> </u> | 1 | ,591 | 756. |
| | 9 Design, LLC | | | | | | | | | | | | | |
| | Box 9605, Jackson, WY 83002 | | | | | | | 4 | IT consulting | | | | 578 | 429. |
| | o Zone, LLC North 16th Street, Omaha, NE 68: | 110 | | | | | | | Warehousing | | | | 166 | 191. |
| | | | | | | | | \dashv | | | | | | |
| | | | | | | | | | | | | | | |

Total number of independent contractors (including but not limited to those listed above) who received more than

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\$100,000 of compensation from the organization

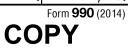
Page 9 54-1282616

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Part VIII Statement of Revenue

| | | Check if Schedule O conta | ins a response | e or note to any line | e in this Part VIII | | | |
|--|------|--|----------------|--|----------------------|--|---|---|
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | Revenue excluded from tax under sections 512 - 514 |
| nts nts | 1 a | Federated campaigns | 1a | | | | | |
| er al | k | Membership dues | 1b | | | | | |
| S, C | (| Fundraising events | 1c | | | | | |
| ar (| (| Related organizations | 1d | | | | | |
| ini, | • | Government grants (contribution | ons) 1e | | | | | |
| r io | f | All other contributions, gifts, grants | s, and | | | | | |
| la e | | similar amounts not included abov | e 1f | 309,216,742. | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | ç | Noncash contributions included in lines | 1a-1f: \$ | 306,696,369. | | | | |
| ရှိ ငိ | ł | Total. Add lines 1a-1f | | > | 309,216,742. | | | |
| | | | | Business Code | | | | |
| e e | 2 8 | Shipping and handling | | 900099 | 3,537,891. | 3,537,891. | | |
| ē š | k | RDP revenue | | 900099 | 880,912. | 880,912. | | |
| en S | (| Support fees | | 900099 | 755,118. | 755,118. | | |
| Program Service Revenue | C | Registration fees | | 900099 | 76,308. | 76,308. | | |
| <u>Б</u> . | • | | | | | | | |
| ه ا | f | 1 3 | | | | | | |
| | Ç | Total. Add lines 2a-2f | | | 5,250,229. | | | |
| | 3 | Investment income (including of | | | | | | |
| | | other similar amounts) | | Г | | | | |
| | 4 | Income from investment of tax | • | ' F | | | | |
| | 5 | Royalties | | | | | | |
| | | | (i) Real | (ii) Personal | | | | |
| | 6 a | | | | | | | |
| | k | | | | | | | |
| | (| ٠ , ا | | | | | | |
| | | Net rental income or (loss) | | | | | | |
| | 7 8 | Gross amount from sales of | (i) Securities | (ii) Other | | | | |
| | | assets other than inventory | | + | | | | |
| | K | Less: cost or other basis | | 1 | | | | |
| | | and sales expenses | | + | | | | |
| | | Gain or (loss) | | | | | | |
| | | d Net gain or (loss)a Gross income from fundraising | | ············· | | | | |
| nue | 0 6 | including \$ | of | 1 | | | | |
| , ve | | contributions reported on line | | 1 | | | | |
| , B | | Part IV, line 18 | | , | | | | |
| Other Rever | ŀ | Less: direct expenses | | | | | | |
| Ó | | Net income or (loss) from fund | | | | | | |
| | | Gross income from gaming act | | | | | | |
| | | Part IV, line 19 | | <u>, </u> | | | | |
| | k | Less: direct expenses | | | | | | |
| | | Net income or (loss) from gami | | | | | | |
| | | Gross sales of inventory, less r | | | | | | |
| | | and allowances | | a | | | | |
| | k | Less: cost of goods sold | | , | | | | |
| | | Net income or (loss) from sales | | > | | | | |
| | | Miscellaneous Revenue | | Business Code | | | | |
| | 11 a | Sublease income | | 900099 | 41,580. | | | 41,580. |
| | k | Miscellaneous | | 900099 | 22,411. | | | 22,411. |
| | c | | | | | | | |
| | C | All other revenue | | | | | | |
| | 6 | Total. Add lines 11a-11d | | > | 63,991. | | | |
| | 12 | Total revenue. See instructions. | | | 314,530,962. | 5,250,229. | 0. | 63,991. |

432009 11-07-14



Form 990 (2014) 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 respons | se or note to any line in | this Part IX | , , , , | |
|----|--|---|---|-------------------------------------|-----------------------------------|
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | 304,823,923. | 304,823,923. | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to foreign | | | | |
| 3 | | | | | |
| | organizations, foreign governments, and foreign | 20 000 | 20 000 | | |
| | individuals. See Part IV, lines 15 and 16 | 20,000. | 20,000. | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 634,847. | | 634,847. | |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 2,117,848. | 1,244,143. | 611,370. | 262,335. |
| 8 | Pension plan accruals and contributions (include | | | · | · |
| - | section 401(k) and 403(b) employer contributions) | 3,705. | 1,740. | 1,598. | 367. |
| 9 | Other employee benefits | 151,411. | 94,643. | 36,812. | 19,956. |
| 10 | | 205,522. | 96,515. | 88,656. | 20,351. |
| | Payroll taxes | 203,322. | 50,515. | 00,030. | 20,331. |
| 11 | Fees for services (non-employees): | | | | |
| а | Management | | | | |
| b | Legal | 15,816. | 7,427. | 6,823. | 1,566. |
| С | Accounting | 102,771. | | 102,771. | |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | 124. | | | 124. |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| | column (A) amount, list line 11g expenses on Sch O.) | 86,782. | 29,293. | 46,755. | 10,734. |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | 47,339. | 22,231. | 20,421. | 4,687. |
| 14 | Information technology | 649,414. | 304,970. | 280,139. | 64,305. |
| 15 | | , | , , , , , , , | | |
| | Royalties | 363,053. | 170,493. | 156,611. | 35,949. |
| 16 | Occupancy | 187,501. | 88,052. | 80,883. | 18,566. |
| 17 | Travel | 107,301. | 00,032. | 00,003. | 10,300. |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 54,178. | 25,442. | 23,371. | 5,365. |
| 20 | Interest | 94,649. | | 94,649. | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 186,294. | 87,485. | 80,362. | 18,447. |
| 23 | Insurance | 44,205. | 20,759. | 19,069. | 4,377. |
| 24 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) | | | | |
| а | Logistics | 1,844,091. | 1,844,091. | | |
| b | Miscellaneous | 209,639. | 152,357. | 46,588. | 10,694. |
| С | Dues & subscriptions | 30,445. | 13,263. | 13,974. | 3,208. |
| d | Equip. rental & maint. | 23,187. | 10,889. | 10,002. | 2,296. |
| e | All other expenses | 11,599. | 5,447. | 5,004. | 1,148. |
| 25 | Total functional expenses. Add lines 1 through 24e | 311,908,343. | 309,063,163. | 2,360,705. | 484,475. |
| 26 | Joint costs. Complete this line only if the organization | , , | , | _,,, | , |
| 20 | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | . 🗀 | | | | |
| | Check here if following SOP 98-2 (ASC 958-720) | | | | |

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Form 990 (2014) Part X | Balance Sheet

| Pan | . ^ | Balance Sneet | | | | | , |
|-------------|-----------|--|---------------------------------|--------------------------|--------------------------|------------|---------------------------|
| | | Check if Schedule O contains a response or not | e to ar | ny line in this Part X | | | |
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | | 148,975. | 1 | 257,633. |
| | 2 | Savings and temporary cash investments | | | | 2 | |
| | 3 | Pledges and grants receivable, net | | | 823,957. | 3 | 408,319. |
| | 4 | Accounts receivable, net | | | 4 | | |
| | 5 | Loans and other receivables from current and for | rmer c | officers, directors, | | | |
| | | trustees, key employees, and highest compensation | | | | | |
| | | Part II of Schedule L | | 5 | | | |
| | 6 | Loans and other receivables from other disquali | | | | | |
| | | section 4958(f)(1)), persons described in section | | | | | |
| | | employers and sponsoring organizations of sect | | | | | |
| ध्र | | employees' beneficiary organizations (see instr). | Comp | lete Part II of Sch L | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | | | 7 | |
| ⋖ | 8 | Inventories for sale or use | | 6,565,529. | 8 | 8,120,043. | |
| | 9 | Prepaid expenses and deferred charges | | 31,000. | 9 | 61,697. | |
| | 10a | Land, buildings, and equipment: cost or other | | | | | |
| | | basis. Complete Part VI of Schedule D | | 2,334,550. | | | |
| | b | Less: accumulated depreciation | 10b | 1,278,004. | 784,742. | 10c | 1,056,546. |
| | 11 | Investments - publicly traded securities | | | 11 | | |
| | 12 | Investments - other securities. See Part IV, line | | | 12 | | |
| | 13 | Investments - program-related. See Part IV, line | | | 13 | | |
| | 14 | Intangible assets | | 14 | | | |
| | 15 | Other assets. See Part IV, line 11 | 68,630. | 15 | 68,630. | | |
| | 16 | Total assets. Add lines 1 through 15 (must equ | 8,422,833. | 16 | 9,972,868. | | |
| | 17 | Accounts payable and accrued expenses | | 1,683,924. | 17 | 1,341,304. | |
| | 18 | Grants payable | | 18 | | | |
| | 19 | Deferred revenue | | | 454,721. | 19 | 704,953. |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete | Part IV | of Schedule D | | 21 | |
| es | 22 | Loans and other payables to current and former | office | rs, directors, trustees, | | | |
| ≣ | | key employees, highest compensated employee | | | | | |
| Liabilities | | Complete Part II of Schedule L | | | | 22 | |
| - | 23 | Secured mortgages and notes payable to unrela | | | 1,621,429. | 23 | 1,478,571. |
| | 24 | Unsecured notes and loans payable to unrelate | | | | 24 | |
| | 25 | Other liabilities (including federal income tax, pa | , | | | | |
| | | parties, and other liabilities not included on lines | 17-24 |). Complete Part X of | | | |
| | | Schedule D | | _ | 1,804,130. | 25 | 966,792. |
| _ | 26 | Total liabilities. Add lines 17 through 25 | | | 5,564,204. | 26 | 4,491,620. |
| | | Organizations that follow SFAS 117 (ASC 958 | | ck here X and | | | |
| Ses | | complete lines 27 through 29, and lines 33 an | | | 1 150 414 | | F 002 F62 |
| a | 27 | Unrestricted net assets | | | 1,178,414. | 27 | 5,203,563. |
| Ba | 28 | Temporarily restricted net assets | | ····· | 1,680,215. | 28 | 277,685. |
| 밀 | 29 | | | | | 29 | |
| 년 | | Organizations that do not follow SFAS 117 (A | 8), check here $ ightharpoonup$ | | | | |
| 5 | | and complete lines 30 through 34. | | | | | |
| set | 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| As | 31 | Paid-in or capital surplus, or land, building, or ed | | | | 31 | |
| Ę | 32 | Retained earnings, endowment, accumulated in | | — | 2 252 622 | 32 | F 404 646 |
| | 33 | Total net assets or fund balances | | II. | 2,858,629. | 33 | 5,481,248. |
| \bot | <u>34</u> | Total liabilities and net assets/fund balances | | | 8,422,833. | 34 | 9,972,868. |

Form **990** (2014)

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| Pa | rt XI Reconciliation of Net Assets | | | | |
|----|---|------------|------------|-------|------|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | |
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 314 | ,530, | 962. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 311 | ,908, | 343. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 2,622,619. | | |
| 4 | | | | | 629. |
| 5 | Net unrealized gains (losses) on investments | 5 | | | |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | | |
| | column (B)) | 10 | 5 | ,481, | 248. |
| Pa | rt XIII 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: | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | O. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | d on a | | | |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2 b | Х | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat | e basis, | | | |
| | consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | e audit, | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | Х | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Sch | | | | |
| 3а | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si | ngle Audit | | | |
| | Act and OMB Circular A-133? | | 3a | | Х |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | ired audit | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3b | | |

Form **990** (2014)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public . Inspection

Employer identification number

Name of the organization

Good360 54-1282616

| Pa | πı | Reason for Public (| Charity Status (| All organizations must c | omplete th | is part.) Se | ee instructions. | | | |
|-----|-------|---|---|--|---------------------|--------------------|-------------------------------------|-----------------------------------|--|--|
| he | organ | nization is not a private found | lation because it is: (| (For lines 1 through 11, | check only | one box.) | | | | |
| 1 | | A church, convention of ch | urches, or association | on of churches describe | ed in sectio | n 170(b)(1 | I)(A)(i). | | | |
| 2 | | A school described in sect | ion 170(b)(1)(A)(ii). (| Attach Schedule E.) | | | | | | |
| 3 | | A hospital or a cooperative | hospital service orga | anization described in s | ection 170 |)(b)(1)(A)(ii | ii). | | | |
| 4 | | A medical research organiz | ation operated in co | njunction with a hospita | al describe | d in sectio | n 170(b)(1)(A)(iii). Enter | the hospital's name, | | |
| | | city, and state: | | | | | | | | |
| 5 | | An organization operated for | 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 | Х | 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). (C | omplete Part II.) | | | | | | | |
| 8 | | A community trust describe | ed in section 170(b) | (1)(A)(vi). (Complete Pa | rt II.) | | | | | |
| 9 | | An organization that norma | Illy receives: (1) more | than 33 1/3% of its su | pport from | contribution | ons, membership fees, a | and gross receipts from | | |
| | | activities related to its exen | npt functions - subje | ct to certain exceptions | , and (2) no | more tha | n 33 1/3% of its suppor | t from gross investment | | |
| | | income and unrelated busin | ness taxable income | (less section 511 tax) f | rom busine | esses acqu | ired by the organization | after June 30, 1975. | | |
| | | See section 509(a)(2). (Con | mplete Part III.) | | | | | | | |
| 10 | Щ | An organization organized a | and operated exclus | ively to test for public s | afety. See | section 50 |)9(a)(4). | | | |
| 11 | | An organization organized a | and operated exclus | ively for the benefit of, t | o perform | the functio | ons of, or to carry out the | purposes of one or | | |
| | | more publicly supported or | ganizations describe | ed in section 509(a)(1) o | or section | 509(a)(2). | See section 509(a)(3). 0 | Check the box in | | |
| | _ | lines 11a through 11d that | describes the type o | of supporting organization | on and con | nplete lines | s 11e, 11f, and 11g. | | | |
| а | | | anization operated, s | supervised, or controlled | by its sup | ported org | ganization(s), typically by | giving | | |
| | | the supported organization | on(s) the power to re | gularly appoint or elect | a majority | of the dire | ctors or trustees of the s | supporting | | |
| | _ | organization. You must o | complete Part IV, Se | ections A and B. | | | | | | |
| b | | | anization supervised | d or controlled in connec | ction with it | ts support | ed organization(s), by ha | ving | | |
| | | control or management o | of the supporting org | anization vested in the | same perso | ons that co | ontrol or manage the sup | ported | | |
| | | organization(s). You mus | t complete Part IV, | Sections A and C. | | | | | | |
| С | | | grated. A supportin | g organization operated | l in connec | tion with, a | and functionally integrate | ed with, | | |
| | | its supported organizatio | n(s) (see instructions | s). You must complete | Part IV, Se | ections A, | D, and E. | | | |
| d | | | y integrated. A supp | orting organization ope | rated in co | nnection v | vith its supported organi | zation(s) | | |
| | | that is not functionally int | egrated. The organiz | zation generally must sa | atisfy a dist | ribution re | quirement and an attent | iveness | | |
| | | requirement (see instruct | • | | | | | | | |
| е | | ☐ Check this box if the orga | anization received a | written determination fr | om the IRS | that it is a | Type I, Type II, Type III | | | |
| | | functionally integrated, or | * * | nally integrated suppor | ting organi | zation. | | | | |
| f | | er the number of supported o | - | | | | | | | |
| g | | vide the following information | | | (iv) le the e | rganization | (a) Amount of monotonic | (vi) Amount of | | |
| | , | (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 | listed | in your | (v) Amount of monetary support (see | (vi) Amount of other support (see | | |
| | | g | | above or IRC section | | document? | Instructions) | Instructions) | | |
| | | | | (see instructions)) | Yes | No | | | | |
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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

| Sec | ction A. Public Support | | | | | | |
|------|--|-----------------------|---------------------|----------------------|---------------------------|---------------------|--------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 286,426,533. | 305,824,918. | 294,267,181. | 305,733,330. | 309,971,860. | 1502223822. |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 286,426,533. | 305,824,918. | 294,267,181. | 305,733,330. | 309,971,860. | 1502223822. |
| | 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) | | | | | | 967,630,791. |
| 6 | Public support. Subtract line 5 from line 4. | | | | | | 534,593,031. |
| | ction B. Total Support | | | | | | |
| | ndar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| | Amounts from line 4 | 286,426,533. | 305,824,918. | 294,267,181. | 305,733,330. | 309,971,860. | 1502223822. |
| | Gross income from interest, | , , | | | | , , | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar sources | 384. | | 39,600. | 41,580. | 41,580. | 123,144. |
| 9 | Net income from unrelated business | | | , | , | • | · |
| • | activities, whether or not the | | | | | | |
| | business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | 11,042. | 10,418. | 13,272. | 6,982. | 22,511. | 64,225. |
| 11 | Total support. Add lines 7 through 10 | , | , | , | , | , | 1502411191. |
| | Gross receipts from related activities, | etc. (see instruction | ons) | | | 12 | 20,957,537. |
| | First five years. If the Form 990 is for | • | , | | | | <u> </u> |
| | organization, check this box and stop | | | | - | | > |
| Sec | tion C. Computation of Publ | ic Support Pe | rcentage | | | | , |
| | Public support percentage for 2014 (I | | | olumn (f)) | | 14 | 35.58 % |
| 15 | Public support percentage from 2013 | Schedule A, Part | II, line 14 | | | 15 | 42.64 % |
| | 33 1/3% support test - 2014. If the o | | | | | nore, check this bo | x and |
| | stop here. The organization qualifies | as a publicly supp | orted organization | | | | X |
| b | 33 1/3% support test - 2013. If the o | | | | | | |
| | and stop here. The organization quali | fies as a publicly s | supported organiza | ation | | | |
| 17a | 10% -facts-and-circumstances test | | | | | | |
| | and if the organization meets the "fac | | | | | | |
| | meets the "facts-and-circumstances" | test. The organiza | tion qualifies as a | publicly supported | d organization | | > |
| b | 10% -facts-and-circumstances test | | | | | | |
| | more, and if the organization meets th | ne "facts-and-circu | mstances" test, ch | neck this box and | stop here. Explain | in Part VI how the | |
| | organization meets the "facts-and-circ | cumstances" test. | The organization of | qualifies as a publi | cly supported orga | nization | |
| 18 | Private foundation. If the organizatio | n did not check a | box on line 13, 16a | a, 16b, 17a, or 17b | o, check this box a | | |
| | | | | | | | |

Schedule A (Form 990 or 990-EZ) 2014

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

(Complete only if you checked the box on line 9 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 | , I | , | | | | |
|--|-------------------|----------------------|------------------------|--|----------------------|-------------|
| Calendar year (or fiscal year beginning in) ▶ | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 Gifts, grants, contributions, and | | | | | | |
| membership fees received. (Do not | | | | | | |
| include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, | | | | | | |
| merchandise sold or services per- | | | | | | |
| formed, or facilities furnished in any activity that is related to the | | | | | | |
| organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that | | | | | | |
| are not an unrelated trade or bus- | | | | | | |
| iness under section 513 | | | | | | |
| 4 Tax revenues levied for the organ- | | | | | | |
| ization's benefit and either paid to | | | | | | |
| or expended on its behalf | | | | | | |
| 5 The value of services or facilities | | | | | | |
| furnished by a governmental unit to | | | | | | |
| the organization without charge | | <u> </u> | | <u> </u> | | |
| 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) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (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 in 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 five years. If the Form 990 is for | the organization' | s first, second, thi | rd, fourth, or fifth t | ax year as a section | on 501(c)(3) organiz | zation, |
| | | | | | | > |
| Section C. Computation of Public | | | | | | |
| 15 Public support percentage for 2014 (lin | | | | | 15 | <u>%</u> |
| 16 Public support percentage from 2013 | | | | | 16 | <u>%</u> |
| Section D. Computation of Inves | | | | | | |
| 17 Investment income percentage for 20 | | | | | 17 | % |
| 18 Investment income percentage from 2 | | | | | 18 | % |
| 19a 33 1/3% support tests - 2014. If the | | | | | | |
| more than 33 1/3%, check this box an | | | | | | |
| b 33 1/3% support tests - 2013. If the o | • | | | • | • | |
| line 18 is not more than 33 1/3%, chec | | | | | | ▶∐ |
| 20 Private foundation If the organization | did not check a | hay on line 1/1 10 | a or 10h chack t | hie hay and eag in | etructione | ▶ |

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in *part VI* how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <code>part VI</code>, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- **8** Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

| | | Yes | No |
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| Pa | rt IV Supporting Organizations _(continued) | | | |
|----------|--|----------|-----------|----------|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | |
| | below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | | |
| С | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in part VI. | 11c | | |
| | tion B. Type I Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to | | | |
| | regularly appoint or elect at least a majority of the organization's 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 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 | | |
| Sec | tion C. Type II Supporting Organizations | | | |
| <u> </u> | tion of Type it supporting organizations | | Yes | No |
| 4 | Ware a majority of the examination's directors or trustees during the tay year also a majority of the directors | | 162 | 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 | _ | | |
| 800 | the supported organization(s). | 1 | | Щ |
| Sec | tion D. 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, (1) a written notice describing the type and amount of support provided during the prior tax | | | |
| | year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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 in (2), 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 | | <u> </u> |
| Sec | tion 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): | | | |
| а | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| С | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst | ructions | <u>).</u> | |
| 2 | Activities Test. Answer (a) and (b) below. | | Yes | No |
| а | 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 | | <u> </u> |
| b | Did the activities described in (a) 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 (a) and (b) below. | | | |
| а | 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? Provide details in <i>Part VI</i> . | 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 | | |

| Pa | rt V Type III Non-Functionally Integrated 509(a)(3) Supportin | g Orga | anizations | • |
|------|---|-----------|-------------------------------------|--------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | g trust o | n Nov. 20, 1970. See instr u | uctions. All |
| | other Type III non-functionally integrated supporting organizations must co | mplete S | Sections A through E. | |
| Sect | ion A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| _5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or | | | |
| | collection of gross income or for management, conservation, or | | | |
| | maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |
| Sect | ion B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year): | | | |
| a | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| c | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| е | Discount claimed for blockage or other | | | |
| | factors (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% 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 .035 | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | ion C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 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-functional | y-integra | ated Type III supporting org | anization (see |
| | instructions). | | | |

Schedule A (Form 990 or 990-EZ) 2014

| Sche | dule A (Form 990 or 990-EZ) 2014 Good 360 | | | 1-1282616 | Page 7 |
|-----------|--|------------------------------|-----------------------------------|---------------------|---------------|
| Par | t V Type III Non-Functionally Integrated 509 | (a)(3) Supporting Orga | anizations _(continued) | | |
| Secti | on D - Distributions | | , | Current Yea | r |
| 1 | Amounts paid to supported organizations to accomplish exe | mpt purposes | | | |
| 2 | Amounts paid to perform activity that directly furthers exemp | ot purposes of supported | | | |
| | organizations, in excess of income from activity | | | | |
| 3 | Administrative expenses paid to accomplish exempt purpose | es of supported organization | IS | | |
| 4 | Amounts paid to acquire exempt-use assets | | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | | |
| 8 | Distributions to attentive supported organizations to which the | | | | |
| | (provide details in Part VI). See instructions. | | | | |
| 9 | Distributable amount for 2014 from Section C, line 6 | | | | |
| 10 | Line 8 amount divided by Line 9 amount | | | | |
| | | (i) | (ii) | (iii) | |
| | | Excess Distributions | Underdistributions | Distributable | e |
| Secti | on E - Distribution Allocations (see instructions) | | Pre-2014 | Amount for 20 | |
| 1 | Distributable amount for 2014 from Section C, line 6 | | 110 2011 | 7 till odile 101 20 | |
| | Underdistributions, if any, for years prior to 2014 | | | | |
| _ | (reasonable cause required-see instructions) | | | | |
| 3 | Excess distributions carryover, if any, to 2014: | | | | |
| | Excess distributions carryover, if arry, to 2014. | | | | |
| a b | | | | | |
| | | | | | |
| | | | | | |
| d | Fig. 2040 | | | | |
| | From 2013 | | | | |
| | Total of lines 3a through e | | | | |
| | Applied to underdistributions of prior years | | | | |
| | Applied to 2014 distributable amount | | | | |
| <u>_i</u> | Carryover from 2009 not applied (see instructions) | | | | |
| <u>j</u> | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | | |
| 4 | Distributions for 2014 from Section D, | | | | |
| | line 7: \$ | | | | |
| a | Applied to underdistributions of prior years | | | | |
| b | Applied to 2014 distributable amount | | | | |
| | Remainder. Subtract lines 4a and 4b from 4. | | | | |
| 5 | Remaining underdistributions for years prior to 2014, if | | | | |
| | any. Subtract lines 3g and 4a from line 2 (if amount | | | | |
| | greater than zero, see instructions). | | | | |
| 6 | Remaining underdistributions for 2014. Subtract lines 3h | | | | |
| | and 4b from line 1 (if amount greater than zero, see | | | | |
| | instructions). | | | | |
| 7 | Excess distributions carryover to 2015. Add lines 3j | | | | |
| | and 4c. | | | | |
| 8 | Breakdown of line 7: | | | | |
| а | | | | | |
| b | | | | | |
| С | | | | | |
| d | Excess from 2013 | | | | |
| | Excess from 2014 | | | | |

Schedule A (Form 990 or 990-EZ) 2014

| Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions). |
|--|
| Schedule A, Part II, Line 10, Explanation for Other Income: |
| Other income |
| 2010 Amount: \$ 11,042. |
| 2011 Amount: \$ 10,418. |
| 2012 Amount: \$ 13,272. |
| 2013 Amount: \$ 6,982. |
| 2014 Amount: \$ 22,511. |
| |
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 ·

OMB No. 1545-0047

Name of the organization

Good360

Employer identification number

54-1282616

| 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 | | | | |
| | | | | | |
| , , | s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. | | | | |
| General Rule | | | | | |
| | n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. | | | | |
| Special Rules | | | | | |
| sections 509(a)(1) a any one contributo | n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, 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, 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, II, and III. | | | | | |
| year, contributions is checked, enter h purpose. Do not co | n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year \rightarrow \text{\tex | | | | |
| Caution. An organization th | nat is not covered by the General Bule and/or the Special Bules does not file Schedule B (Form 990, 990-F7, or 990-PF). | | | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

| Name of organization | Employer identification number |
|----------------------|--------------------------------|
| | |
| Good360 | 54-1282616 |

| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional | l spa | ce is needed. | |
|------------|---|-------|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| 1 | | \$_ | 173,179,512. | Person Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| 2 | | \$_ | 52,363,440. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| 3 | | \$_ | 16,558,359. | Person Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| 4 | | \$_ | 8,537,185. | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| 5 | | \$_ | 6,449,087. | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| | | \$_ | | Person Payroll Noncash Complete Part II for noncash contributions.) |

Name of organization Employer identification number

Good360 54-1282616

| Part II | Noncash Property (see instructions). Use duplicate copies of Pa | rt 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 |
| | Clothing & household items | | |
| 1 | | | |
| | | \$ 173,179,512. | 12/31/14 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| - | Clothing & household items | | |
| 2 | | | |
| | | \$51,883,440. | 12/31/14 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | Clothing & household items | | |
| 3 | | | |
| | | \$ 16,558,359. | 12/31/14 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | Clothing & household items | | |
| 4 | | _ | |
| | | \$ 8,537,185. | 12/31/14 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | Clothing & household items | | |
| 5 | | | |
| | | \$6,449,087. | 12/31/14 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| 400450 11.05 | | \$ | 990 990-F7 or 990-PF) (2014) |

| Name of orga | nization | | Employer identification number |
|---------------------------|--|---|---|
| Part III | Exclusively religious, charitable, etc., contribute year from any one contributor. Complete completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additional | s, charitable, etc., contributions of \$1,000 | 54-1282616 red in section 501(c)(7), (8), or (10) that total more than \$1,000 llowing line entry. For organizations o or less for the year. (Enter this info. once.) \$ |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| . - | | (e) Transfer of g | |
| | Transferee's name, address, an | nd 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 |
| | Transferee's name, address, ar | (e) Transfer of g | gift 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 |
| - | Transferee's name, address, ar | (e) Transfer of g | gift Relationship of transferor to transferee |
| (a) No. | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, an | (e) Transfer of g | gift Relationship of transferor to transferee |
| - | | | |

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 54-1282616

| | Good360 | | 54-1282616 |
|----|---|-------------|---------------------------------|
| Pa | rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds o | r Accou | unts.Complete if the |
| | organization answered "Yes" to Form 990, Part IV, line 6. | | |
| | (a) Donor advised funds | (b) Fur | ids 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 | |
| Ū | are the organization's property, subject to the organization's exclusive legal control? | | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be use | | |
| Ū | for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose con | | |
| | | J | Yes No |
| Pa | | | |
| 1 | Purpose(s) of conservation easements held by the organization (check all that apply). | 10, 1110 7 | · |
| • | Preservation of land for public use (e.g., recreation or education) Preservation of a historic | ally impa | tent land area |
| | Protection of natural habitat Preservation of a tristoric Protection of natural habitat | | |
| | Preservation of open space | J HISTORIC | structure |
| • | · · | | -#: |
| 2 | Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a | a conserv | ation easement on the last |
| | day of the tax year. | | Hold at the Fad of the Tay Voca |
| | - | | Held at the End of the Tax Year |
| a | Total number of conservation easements | | |
| b | Total acreage restricted by conservation easements | | |
| С. | Number of conservation easements on a certified historic structure included in (a) | 2c | |
| d | () 1 | | |
| _ | listed in the National Register | 2d | L |
| 3 | Number of conservation easements modified, transferred, released, extinguished, or terminated by the or | ganizatio | n 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, and enforcing conservation easements during | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the | • | \$ |
| 8 | Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(| | |
| _ | 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 sta | | |
| | include, if applicable, the text of the footnote to the organization's financial statements that describes the | organiza | tion's accounting for |
| Do | conservation easements. rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other | or Cimil | or Assets |
| Pa | | | di Assets. |
| | Complete if the organization answered "Yes" to Form 990, Part IV, line 8. | | |
| та | If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statemen | | • |
| | 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 SFAS 116 (ASC 958), to report in its revenue statement an | | |
| | 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 in 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 ga | ain, provid | le |
| | the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: | | |
| а | Revenue included in Form 990, Part VIII, line 1 | | \$ |
| b | Assets included in Form 990, Part X | | \$ |

| | | | | | | | | | | _ |
|----------|--|------------------------------|--------------|---------------|---------------------|--------------|---------------------|--------------|-------------|-----------|
| | dule D (Form 990) 2014 Good360 Till Organizations Maintaining C | allastiana of A | المالية | ovical T | | or Other | | 54-12826 | | Page 2 |
| | | | _ | | | | | | • | |
| 3 | Using the organization's acquisition, accession | on, and other recor | as, cneci | cany of the | tollowing tha | at are a sig | nificant | use of its | collection | items |
| _ | (check all that apply): Public exhibition | | | | | | | | | |
| a | | | | | hange progra | ams | | | | |
| b | Scholarly research | • | e(| Other | | | | | | |
| C | Preservation for future generations | lloctions and avalo | in how th | ov funtbort | ha araanizati | on's aven | nt nuvn | ooo in Dor | VIII | |
| 4 | Provide a description of the organization's co | | | | | | | ose in Pan | XIII. | |
| 5 | During the year, did the organization solicit o | | | | • | | | |] v | □ Na |
| Dai | to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be sold to raise funds rather than to be matter to be matter to be sold to raise funds rather than to be matter | | | | | | | | Yes | No_ |
| ı aı | reported an amount on Form 990, Par | | iete ii trie | organizatio | n answered | res to F | omi 990 | , Part IV, I | irie 9, or | |
| 10 | Is the organization an agent, trustee, custodi | | dian, for | oontribution | an or other or | sacta not in | naludad | | | |
| ıa | | | - | | | | | | Yes | ☐ No |
| L | on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and the arrangement in Part XI | | | | | | | | ⊥ res | L NO |
| D | in res, explain the arrangement in Part XIII | and complete the it | bilowing t | abie. | | | | | Amount | |
| _ | Designing belongs | | | | | | 10 | | Amount | |
| | Beginning balance | | | | | | | | | |
| | Additions during the year | | | | | | | | | |
| _ | Distributions during the year | | | | | | | | | |
| f O- | Ending balance | | | | | | | | Yes | No |
| | Did the organization include an amount on For If "Yes," explain the arrangement in Part XIII. | | | | | | | | | NO |
| Par | | | | | | | | | | Ш |
| ı uı | Endownient i dias. Complete ii | | 1 | rior year | (c) Two yea | | | ears back | (e) Four y | pare hack |
| 10 | Reginning of year balance | (a) Current year | (b) F | nor year | (C) TWO yea | IS DACK (C | i) Tillee y | Gais Dack | (e) i our y | Gais Dack |
| | Beginning of year balance | | | | | | | | | |
| | Contributions | | | | | | | | | |
| | Net investment earnings, gains, and losses | | | | | | | | | |
| | Grants or scholarships | | | | | | | | | |
| е | Other expenditures for facilities | | | | | | | | | |
| | and programs | | | | | | | | | |
| | Administrative expenses | | | | | | | | | |
| | End of year balance | | /!: 1 | ! | -\\ - | | | | | |
| 2 | Provide the estimated percentage of the curr | rent year end balan | | g, column (| a)) neid as: | | | | | |
| | Board designated or quasi-endowment | % | % | | | | | | | |
| | Permanent endowment | | | | | | | | | |
| C | The percentages in lines 2s. 2h, and 2s show | % | | | | | | | | |
| 20 | The percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages in lines 2a, 2b, and 2c should be the percentages and a percentage and | | ration the | t ara bald a | ad administa | rad far the | oraani- | ration | | |
| 3a | Are there endowment funds not in the posse | ssion of the organiz | zation tha | it are neid a | ina aaministe | erea for the | organiz | zation | T. | /aa Na |
| | by: | | | | | | | | | es No |
| | (i) unrelated organizations | | | | | | | | | |
| | (ii) related organizations | | | | | | | | | |
| | If "Yes" to 3a(ii), are the related organizations | | | | | | | | 3b | |
| Par | Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm | | owment 1 | urias. | | | | | | |
| ıaı | | | n Dart IV | lino 11a S | oo Form 900 | Dort V lir | no 10 | | | |
| | Complete if the organization answered | | | | | | | ,d | (d) Pools | volue |
| | Description of property | (a) Cost or of basis (invest | | | or other (other) | | umulate eciation | eu | (d) Book | value |
| 1- | Land | ` | incint) | Dasis | (otrior) | черг | COIGLIOIT | | | |
| | Land | | | | | | | | | |
| O | Buildings | | | | 751 /52 | | 261 | 012 | | 00 611 |

751,453.

371,561.

1,211,536.

Schedule D (Form 990) 2014

489,641.

566,905.

1,056,546.

261,812.

371,561.

644,631.

e Other.

c Leasehold improvements

d Equipment

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

| Part VII Investments - Other Securities. | | | | r ago (|
|--|-------------------|-----------------------------|------------------------|------------------------|
| Complete if the organization answered "Yes" to | | | | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of v | aluation: Cost or en | d-of-year market value |
| (1) Financial derivatives | | | | |
| (2) Closely-held equity interests | | | | |
| (3) Other | | | | |
| (A) | | | | |
| (B) | | | | |
| (C) | | | | |
| (D) | | | | |
| (E) | | | | |
| (F) | | | | |
| (G) | | | | |
| (H) | | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | | | | |
| Part VIII Investments - Program Related. | | | | |
| Complete if the organization answered "Yes" to | Form 990, Part IV | , line 11c. See Form 990, | Part X, line 13. | |
| (a) Description of investment | (b) Book value | (c) Method of v | aluation: Cost or en | d-of-year market value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | | | |
| Part IX Other Assets. | | • | | |
| Complete if the organization answered "Yes" to | Form 990, Part IV | , line 11d. See Form 990, | Part X, line 15. | |
| (a) Do | escription | | | (b) Book value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line | 15.) | | > | |
| Part X Other Liabilities. | | | | |
| Complete if the organization answered "Yes" to | Form 990, Part IV | , line 11e or 11f. See Form | n 990, Part X, line 25 | |
| 1. (a) Description of liability | | (b) Book value | | |
| (1) Federal income taxes | | | | |
| (2) Deferred rent and lease incentive | | 966,792. | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line is | 25.) | 966,792. | | |
| | | | | |

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2014



Schedule D (Form 990) 2014 Good 360 54-1282616 Page **4**

| Pai | | n of Revenue per Audited Fil | | with | Revenue per H | eturn. | |
|--------------|----------------------------|---|----------------------|------|---------------|------------|--------------------------|
| | | ganization answered "Yes" to Form 9 | | | | | 214 712 017 |
| 1 | · · | other support per audited financial s | | | | 1 | 314,712,917. |
| 2 | | e 1 but not on Form 990, Part VIII, line | 1 | . 1 | | | |
| a | | ses) on investments | | ea . | 101 055 | | |
| b | | e of facilities | | 2b | 181,955. | | |
| C | | grants | | 2c | | | |
| d | | III.) | | 2d | | 0- | 191 055 |
| e | 3 | | | | | 2e 3 | 181,955. 314,530,962. |
| 3 | | 1 | | | | 3 | 314,330,302. |
| 4 | | rm 990, Part VIII, line 12, but not on lir : included on Form 990, Part VIII, line | 1 | la | | | |
| a b | | III.) | | b | | | |
| C | | | | | | 4c | 0. |
| 5 | •••• | 3 and 4c. (This must equal Form 990, | | | | 5 | 314,530,962. |
| | | n of Expenses per Audited F | | | | _ | |
| | | ganization answered "Yes" to Form 9 | | | | | - |
| 1 | | es per audited financial statements | | | | 1 | 312,090,298. |
| 2 | | e 1 but not on Form 990, Part IX, line 2 | | | | | |
| а | | e of facilities | ı | 2a | 181,955. | | |
| b | | | | 2b | | | |
| С | | | | 2c | | | |
| d | | III.) | | 2d | | | |
| е | | | | | | 2e | 181,955. |
| 3 | | 1 | | | | 3 | 311,908,343. |
| 4 | | m 990, Part IX, line 25, but not on line | | | | | |
| а | Investment expenses not | included on Form 990, Part VIII, line | 7b4 | a | | | |
| b | Other (Describe in Part XI | III.) | 4 | lb | | | |
| С | Add lines 4a and 4b | | | | | 4c | 0. |
| | | 3 and 4c. (This must equal Form 990 | 0, Part I, line 18.) | | | 5 | 311,908,343. |
| | rt XIII Supplemental | | | | | | |
| | | ed for Part II, lines 3, 5, and 9; Part III nes 2d and 4b. Also complete this par | | | | 4; Part X, | line 2; Part XI, |
| | | | | | | | |
| Part | X, Line 2: | | | | | | |
| | • | | | | | | |
| GOOI | 0360 performed an ev | aluation of uncertain tax po | sitions for the yea | ırs | | | |
| ende | ed December 31, 2014 | and 2013, and determined th | at there were no | | | | |
| matt | ters that would requ | ire recognition in the finan | icial statements or | that | | | |
| | harra ann affact an | ! ha have aware ababii.a | | | | | |
| lla <u>y</u> | nave any effect on | its tax-exempt status. | | | | | |
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SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

Employer identification number

| Good36 | 5.0 | | | | | 54-1282616 | |
|--------------|--|--|---|--|--------------------------|---|--|
| Part | | rmation on A | ctivities Out | tside the United States. Comple | | | /es" on |
| | Form 990, Part IV | | | | oto ii trio organiz | ation anowered | 100 011 |
| 1 F | | | n maintain record | ds to substantiate the amount of its gr | ants and other a | ssistance, | |
| | | | | the selection criteria used to award the | | | Yes No |
| | or grantmakers. Desc Inited States. | ribe in Part V the | e organization's p | procedures for monitoring the use of it | s grants and oth | er assistance out | side the |
| 3 A | ctivities per Region. (T | he following Part | I, line 3 table ca | an be duplicated if additional space is | needed.) | | |
| | (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region) | is a progr describe s | ty listed in (d) ram service, specific type r(s) in region | (f) Total expenditures for and investments in region |
| | | | | | | | |
| North | America | 0 | 0 | Grantmaking | Product dona | tions | 20,000. |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| 3 a S | ub-total | 0 | 0 | | | | 20,000. |
| b T | otal from continuation | | | | | | |
| | heets to Part I | 0 | 0 | | | | 0. |
| | otals (add lines 3a nd 3b) | 0 | 0 | | | | 20,000. |

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

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Good 360 54-1282616 Page **2**

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|---|---|--------------------------|--------------------------------|--------------------------|---------------------------------|---|--|---|
| | | | | | | | | |
| | | | To assist those in | | | | Product | |
| | | North America | need | 0. | | 20,000. | distribution | FMV |
| | | | | | | | | |
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| | | | | | | | | |
| 2 Enter total number of | recipient organizatio | ns listed above that are | recognized as charities by the | foreign country, | recognized as tax-e | xempt by | <u> </u> | <u> </u> |
| | | | n 501(c)(3) equivalency letter | | | > . | | 1 |
| 3 Enter total number of other organizations or entities | | | | | | | | |

54-1282616 Good360 Page 3 Schedule F (Form 990) 2014

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|------------|--------------------------|--------------------------|---------------------------------|-----------------------------------|--|--|
| | | | | | | | |
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| Part IV | Foreign | Forms |
|---------|---------|-------|
| | | |

| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | Yes | X No |
|---|---|-----|------|
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) | Yes | X No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471) | Yes | X No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) | Yes | X No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) | Yes | X No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990) | Yes | X No |

Schedule F (Form 990) 2014

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

| Part I, Line 2: |
|---|
| |
| In an effort to protect the integrity of our donation programs for our |
| donors and nonprofits, Good360 is now taking both reactive and proactive |
| measures to ensure that member organizations who are requesting products |
| from Good360 are appropriate, approved exempt organizations in good |
| financial standing and are using the products received through Good360 in |
| an appropriate manner as outlined in Good360's security and compliance |
| agreement which has been signed by the organization in order to receive |
| these products. In addition to initial vetting, we have a security and |
| compliance team that takes the following ongoing monitoring measures a) |
| annual review of organizations financial and other records to ensure |
| organization is in good financial standing and follows all appropriate |
| charitable financial reporting standards b) signed security agreements |
| each order and membership renewal c) routine address check d) no |
| shipments to residential addresses e) random distribution list requests |
| made to charities f) surveys regarding use and distribution sent to |
| members g) monthly or quarterly "reminders" sent via email to members |
| |
| regarding Good360's restrictions and terms of use - (storage, |
| distribution and use) h) review delivery vendors quarterly report on |
| residential addresses i) webinars to include security and compliance |
| components to be review with new members. |
| |
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| |
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| |

SCHEDULE I (Form 990)

432101 10-15-14

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" to Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

| Name of the organization | | | | | - | | Employer identification number |
|--|--------------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Good360 | | | | | | | 54-1282616 |
| Part I General Information on Grants | | | | | | | |
| 1 Does the organization maintain records | | | | | | | |
| criteria used to award the grants or ass | sistance? | | | | | | Yes No |
| 2 Describe in Part IV the organization's p | | | | | | | |
| Part II Grants and Other Assistance to | = | | | | anization answered " | es" to Form 990, Part | IV, line 21, for any |
| recipient that received more than | T ' | - | <u> </u> | | (f) Method of | | T (1) D |
| Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Native American Heritage | | | | | | | |
| Association - 12085 Quaal Road - | | | | | | Product | |
| Black Hawk, SD 57718 | 46-0414390 | 501(c)(3) | 0. | 20,806,113. | FMV | Donations | To assist those in need |
| · | | | | | | | |
| Christian Appalachian | | | | | | | |
| Project/Operation Sharing - 441 K | Y | | | | | Product | |
| 2417 - Corbin, KY 40701 | 61-0661137 | 501(c)(3) | 0. | 9,790,292. | FMV | Donations | To assist those in need |
| | | | | | | | |
| CIS Development Foundation | | | | | | | |
| 77 Milltown Road | | L | _ | | | Product | |
| East Brunswick, NJ 08816 | 22-3304404 | 501(c)(3) | 0. | 5,050,643. | FMV | Donations | To assist those in need |
| SOS American Foundation | | | | | | | |
| 421 Leggett Street | | | | | | Product | |
| Scranton, PA 18508 | 65-1290368 | 501(c)(3) | 0. | 4,038,745. | FMV | Donations | To assist those in need |
| borancon, in rosso | 03 1230300 | 501(0)(3) | | 1,000,710. | | Jonasions | To applie enose in need |
| Center for People in Need | | | | | | | |
| 3901 N 27th St, Unit 1 | | | | | | Product | |
| Lincoln, NE 68521 | 06-1669552 | 501(c)(3) | 0. | 2,852,415. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Positive American Youth | | | | | | | |
| 780 Veterans Memorial Highway, Su | i | | | | | Product | |
| Mableton, GA 30126 | 26-2689562 | 501(c)(3) | 0. | 1,802,554. | FMV | Donations | To assist those in need |
| 2 Enter total number of section 501(c)(3) | and government of | rganizations listed in t | he line 1 table | | | | 4 11. |
| 3 Enter total number of other organization | | | | | | | \ |
| LHA For Paperwork Reduction Act Notice | e, see the Instruc | tions for Form 990. | | | | | Schedule I (Form 990) (2014) |

Schedule I (Form 990) Good 360 54-1282616

| Part II Continuation of Grants and Other | Assistance to Go | vernments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | |
|--|------------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Back 2 Basic Global Outreach | | | | | | | |
| | | | | | | Product | |
| 4445 S. Valley View, #4 Las Vegas, NV 89103 | 04-3815840 | 501(c)(3) | 0. | 1,429,673. | EM7 | Donations | To assist those in need |
| International Relief and | 04 3013040 | 501(0)(5) | · · | 1,425,075 | , r 11 v | Donacions | To assist those in need |
| Development, Inc 1621 North | | | | | | | |
| Kent Street, 4th Floor - | | | | | | Product | |
| Arlington, VA 22209 | 54-1889077 | 501(c)(3) | 0. | 1,262,287. | FMV | Donations | To assist those in need |
| | | | | _,,, | , | | |
| Public Force | | | | | | | |
| 6665 Highway 42 | | | | | | Product | |
| Rex, GA 30273 | 65-1180979 | 501(c)(3) | 0. | 931,390. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Operation Food Search | | | | | | | |
| 6282 Olive Boulevard | | | | | | Product | |
| Saint Louis, MO 63130 | 43-1241854 | 501(c)(3) | 0. | 688,579. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Serve the People, Inc. | | | | | | | |
| 1206 E 17th St, Suite 204 | | | | | | Product | |
| Santa Ana, CA 92701 | 27-0421556 | 501(c)(3) | 0. | 687,190. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Gap Ministries | | | | | | | |
| 2861 N Flowing Wells, #161 | | | | | | Product | L |
| Tucson, AZ 85704 | 86-0999503 | 501(c)(3) | 0. | 673,622. | ,FMV | Donations | To assist those in need |
| Name of Business and Manakin Chanak | | | | | | | |
| House of Praise and Worship Church | | | | | | Product | |
| 121 Volunteer Drive | 62-1869024 | 501(c)(3) | 0. | 662 252 | EM27 | Donations | Ma agaigt these in mand |
| Lexington, TN 38351 | 02-1009024 | 501(C)(3) | 0. | 662,253. | , FMV | Donacions | To assist those in need |
| United Way of the Plains | | | | | | | |
| 7319 E. 26th Court North | | | | | | Product | |
| Wichita, KS 67202 | 48-0547688 | 501(c)(3) | 0. | 609,549. | EW/ | Donations | To assist those in need |
| 110110a, 110 0/202 | 20 0347000 | 551(5)(5) | 1 | 005,545 | , v | Donactons | 10 abbibe enose in need |
| Stardust Non-Profit Building | | | | | | | |
| Supplies - 1720 W. Broadway Rd. | | | | | | Product | |
| #101 - Mesa, AZ 85202 | 86-0868376 | 501(c)(3) | 0. | 587,954. | FMV | Donations | To assist those in need |

Schedule I (Form 990)

Page 1



Good360 54-1282616

| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | | | | | | | |
|---|----------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Para Pickaikakia | | | | | | | |
| Agape Distribution | | | | | | D 3 b | |
| 205 S. Brooklyn Avenue | 30 0004500 | E01/->/2> | | 402 212 | E167 | Product | m |
| Sidney, OH 45365 | 30-0224502 | 501(c)(3) | 0. | 483,213. | ,rmv | Donations | To assist those in need |
| United Way of Essex and West | | | | | | | |
| Hudson - 303-309 Washington Street | | | | | | Product | |
| - Newark, NJ 07102 | 22-6069078 | 501(c)(3) | 0. | 435,590. | FMV | Donations | To assist those in need |
| | | | | 100,000 | , | | |
| Tennessee's Community Assistance | | | | | | | |
| Corp P.O. Box 485 - Morristown, | | | | | | Product | |
| TN 37815 | 62-1796161 | 501(c)(3) | 0. | 381,937. | , FMV | Donations | To assist those in need |
| | | | | · | | | |
| Elmer Back Gifting Center | | | | | | | |
| 95 Tyler Ave, Units K and L | | | | | | Product | |
| Newport News, VA 23601 | 54-1703803 | 501(c)(3) | 0. | 298,122. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Morningday Community Solutions | | | | | | | |
| 49 N Federal Hwy, #355 | | | | | | Product | |
| Pompano Beach, FL 33062 | 27-3394972 | 501(c)(3) | 0. | 280,472. | , FMV | Donations | To assist those in need |
| One Western at a miles | | | | | | | |
| One House at a Time | | | | | | Dungdorgh | |
| 411 Susquehanna Rd | 22 2046071 | E01/->/2> | | 276 040 | E1477 | Product | m |
| Ambler, PA 19002 | 23-3046871 | 501(c)(3) | 0. | 276,948. | , F'MV | Donations | To assist those in need |
| Outreach Nation Corp. | | | | | | | |
| 9155 Archibald Avenue, #104 | | | | | | Product | |
| Rancho Cucamonga, CA 91730 | 45-2973881 | 501(c)(3) | 0. | 236,595. | FM7/ | Donations | To assist those in need |
| Rancho cacamonga, en 31730 | 43 2373001 | 501(0)(3) | | 230,333. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Donacions | lo applie those in need |
| United Way of Greater Kansas City | | | | | | | |
| 801 W. 47th Street, Suite 500 | | | | | | Product | |
| Kansas City, MO 64112 | 44-0545812 | 501(c)(3) | 0. | 233,683. | FMV | Donations | To assist those in need |
| | | | 1 | | - | | |
| Moment of Truth Ministries | | | | | | | |
| 1730 E. Commerce Street | | | | | | Product | |
| San Antonio, TX 78203 | 26-2125378 | 501(c)(3) | 0. | 219,920. | , FMV | Donations | To assist those in need |

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Schedule I (Form 990)

| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | nedule I (Form 990), Pa | art II.) | |
|--|------------------|-------------------------------|--------------------------|---|--|--|---|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Providers Resource Clearinghouse - | | | | | | | |
| GIKI Denver - 14500 E. 33rd Place | | | | | | Product | |
| - Aurora, CO 80011 | 84-1214286 | 501(c)(3) | 0. | 219,430. | ,FMV | Donations | To assist those in need |
| African Cultural Alliance of North | | | | | | | |
| America - 5530 Chester Avenue - | | | | | | Product | |
| Philadelphia, PA 19143 | 23-3062024 | 501(c)(3) | 0. | 208,974. | FMV | Donations | To assist those in need |
| Prison to Peace Outreach, Inc. | | | | | | | |
| 1254 S. Waterman Ave. #39 | | | | | | Product | |
| San Bernardino, CA 92408 | 95-4521366 | 501(c)(3) | 0. | 199,541. | , FMV | Donations | To assist those in need |
| Walk in Power Ministries Services, | | | | | | | |
| Inc 233 Mitchell Street, Suite | | | | | | Product | |
| 540 - Atlanta, GA 30303 | 33-1147063 | 501(c)(3) | 0. | 194,301. | , FMV | Donations | To assist those in need |
| | | | | , | | | |
| Children's Wish Foundation | | | | | | | |
| International - 8615 Roswell Road | | | | | | Product | |
| - Atlanta, GA 30350 | 58-1642982 | 501(c)(3) | 0. | 187,078. | FMV | Donations | To assist those in need |
| The Breast Cancer Society, Inc. | | | | | | | |
| 6859 E. Rembrandt Avenue, Suite 12 | | | | | | Product | |
| Mesa, AZ 85212 | 26-0237089 | 501(c)(3) | 0. | 184,992. | ,FMV | Donations | To assist those in need |
| Feeding South Dakota | | | | | | | |
| 3511 N. 1st Avenue | | | | | | Product | |
| Sioux Falls, SD 57104 | 36-3293534 | 501(c)(3) | 0. | 184,153. | , FMV | Donations | To assist those in need |
| Amazing Grace Assembly of God | | | | | | | |
| PO Box 822562 | | | | | | Product | |
| Dallas, TX 75382 | 26-4539974 | 501(c)(3) | 0. | 144,879. | , FMV | Donations | To assist those in need |
| Wortgare Kentucky | | | | | | | |
| Westcare Kentucky 900 Grier Drive | | | | | | Product | |
| Las Vegas, NV 89119 | 20-2080016 | 501(c)(3) | 0. | 144,604. | FMV | Donations | To assist those in need |
| | 1 20 2000010 | F-1(0)(0) | 1 | 1 111,001, | ·r · | F-114010110 | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | nedule I (Form 990), Pa | art II.) | |
|--|------------------|-------------------------------|--------------------------|---|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| H.E.R.O.E.S. Care, Inc. | | | | | | | |
| 1306R W. Lark Industrial Drive | | | | | | Product | |
| Fenton, MO 63026 | 01-0777850 | 501(c)(3) | 0. | 139,904. | ,FMV | Donations | To assist those in need |
| Principles, Inc. | | | | | | | |
| 1680 N. Fair Oaks Avenue | | | | | | Product | |
| Pasadena, CA 91103 | 95-2769659 | 501(c)(3) | 0. | 138,550. | FMV | Donations | To assist those in need |
| Almost Heaven Habitat for Humanity | | | | | | | |
| PO Box 913 | | | | | | Product | |
| Franklin, WV 26807 | 55-0685778 | 501(c)(3) | 0. | 138,474. | FMV | Donations | To assist those in need |
| Gasper River Catholic Retreat | | | | | | | |
| Center, Inc 2695 Jackson Bridge | | | | | | Product | |
| Road - Bowling Green, KY 42101 | 64-0963648 | 501(c)(3) | 0. | 138,474. | FMV | Donations | To assist those in need |
| U.S. VETS - Long Beach | | | | | | | |
| 2001 River Avenue | | | | | | Product | |
| Long Beach, CA 90810 | 95-4382752 | 501(c)(3) | 0. | 138,474. | ,FMV | Donations | To assist those in need |
| United States Veterans Initiative | | | | | | | |
| 800 West Sixth Street, Suite 1505 | | | | | | Product | |
| Los Angeles, CA 90017 | 95-4382752 | 501(c)(3) | 0. | 138,474. | FMV | Donations | To assist those in need |
| Rose Brooks Center, Inc. | | | | | | | |
| PO Box 320599 | | | | | | Product | |
| Kansas City, MO 64132 | 51-0231573 | 501(c)(3) | 0. | 138,474. | FMV | Donations | To assist those in need |
| Eliot Community Human Services | | | | | | | |
| 186 Bedford Street | | | | | | Product | |
| Lexington, MA 02420 | 04-2316924 | 501(c)(3) | 0. | 128,690. | FMV | Donations | To assist those in need |
| Commonbond Communities | | | | | | | |
| 1080 Montreal Avenue | | | | | | Product | |
| St. Paul, MN 55116 | 41-1260469 | 501(c)(3) | 0. | 122,343. | .FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | r Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | T |
|--|--------------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Machon Chana Women's Institute, | | | | | | | |
| Inc 556 Crown St, #3B - | | | | | | Product | |
| Brooklyn, NY 11213 | 11-3307109 | 501(c)(3) | 0. | 119,170. | ,FMV | Donations | To assist those in need |
| Talbert House | | | | | | | |
| 2600 Victory Parkway | | | | | | Product | |
| Cincinnati, OH 45206 | 31-0713350 | 501(c)(3) | 0. | 118,712. | ,FMV | Donations | To assist those in need |
| Open Door Mission | | | | | | | |
| 2828 N. 23rd St E | | | | | | Product | |
| Omaha, NE 68110 | 47-0411375 | 501(c)(3) | 0. | 117,913. | , FMV | Donations | To assist those in need |
| · | | | | • | | | |
| North Star Foundation, Inc. | | | | | | | |
| PO Box 36 | | | | | | Product | |
| North Attleboro, MA 02761 | 04-3414626 | 501(c)(3) | 0. | 116,756. | FMV | Donations | To assist those in need |
| Think On These Things Ministries | | | | | | | |
| International, Inc PO Box | | | | | | Product | |
| 162522 - Atlanta, GA 30321 | 20-2493102 | 501(c)(3) | 0. | 115,070. | , FMV | Donations | To assist those in need |
| Bradley Center | | | | | | | |
| 5180 Campbell's Run Road | | | | | | Product | |
| Pittsburgh, PA 15205 | 25-0967464 | 501(c)(3) | 0. | 110,177. | ,FMV | Donations | To assist those in need |
| New Beginnings Outreach | | | | | | | |
| 18280 Al Highway 20 | | | | | | Product | |
| Hillsboro, AL 35643 | 27-0476337 | 501(c)(3) | 0. | 108,423. | FMV | Donations | To assist those in need |
| | 2, 61, 666, | | | 200,120 | | | 10 422120 011020 111 11004 |
| Giving Children Hope | | | | | | | |
| 8332 Commonwealth Avenue | | | | | | Product | |
| Buena Park, CA 90621 | 95-3464287 | 501(c)(3) | 0. | 107,713. | ,FMV | Donations | To assist those in need |
| Emergency Infant Services | | | | | | | |
| 222 S Houston Avenue | | | | | | Product | |
| Tulsa, OK 74127 | 73-1039524 | 501(c)(3) | 0. | 106,224. | .FMV | Donations | To assist those in need |

Schedule I (Form 990)



| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | nedule I (Form 990), Pa | art II.) | |
|--|------------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Senior Dwelling Supportive | | | | | | | |
| Services - 223 56th Place, NE - | | | | | | Product | |
| Washington, DC 20019 | 80-0662653 | 501(c)(3) | 0. | 103,960. | ,FMV | Donations | To assist those in need |
| Love for the Kids Foundation | | | | | | | |
| 1775 Wilwat Drive, Suite B | | | | | | Product | |
| Norcross, GA 30093 | 80-0665886 | 501(c)(3) | 0. | 103,360. | FMV | Donations | To assist those in need |
| LASOS, Inc. | | | | | | | |
| 31 W. Courtland St | | | | | | Product | |
| Bel Air, MD 21014 | 26-4503259 | 501(c)(3) | 0. | 100,777. | FMV | Donations | To assist those in need |
| Giving in Kindness in Arkansas | | | | | | | |
| 5816 Geyer Springs Cutoff | | | | | | Product | |
| Little Rock, AR 72206 | 26-3739038 | 501(c)(3) | 0. | 100,345. | ,FMV | Donations | To assist those in need |
| Foster Care to Success | | | | | | | |
| 21351 Gentry Dr, #130 | | | | | | Product | |
| Sterling, VA 20166 | 52-1238437 | 501(c)(3) | 0. | 96,806. | ,FMV | Donations | To assist those in need |
| Touch of Kindness | | | | | | | |
| PO Box 481270 | | | | | | Product | |
| Los Angeles, CA 90048 | 75-3002144 | 501(c)(3) | 0. | 94,430. | FMV | Donations | To assist those in need |
| Williams Helping Hands | | | | | | | |
| 1000 North State Street, Suite 301 | | | | | | Product | |
| Hemet, CA 92543 | 59-3838041 | 501(c)(3) | 0. | 86,466. | , FMV | Donations | To assist those in need |
| United Way of Tri-County | | | | | | | |
| 46 Park Street | | | | | | Product | |
| Framingham, MA 01702 | 04-2104231 | 501(c)(3) | 0. | 84,476. | , FMV | Donations | To assist those in need |
| United Way of Brevard County | | | | | | | |
| 937 Dixon Boulevard | | | | | | Product | |
| Cocoa, FL 32922 | 59-0836384 | 501(c)(3) | 0. | 79,215. | , FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | | | | | | | | |
|--|---|-------------------------------|--------------------------|---|--|--|---|--|--|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| Cornerstone Community Development | | | | | | | | | |
| Corporation - 1819 Martin Luther | | | | | | | | | |
| King Jr. Boulevard - Dallas, TX | | | | | | Product | | | |
| 75215 | 75-2623357 | 501(c)(3) | 0. | 78,410. | FMV | Donations | To assist those in need | | |
| The United Methodist Church of the | | | | | | | | | |
| Resurrection - 13720 Roe Avenue - | | | | | | Product | | | |
| Leawood, KS 66224 | 48-1107898 | 501(c)(3) | 0. | 76,110. | EM7 | Donations | To assist those in need | | |
| Leawood, KS 00224 | 40-1107090 | 501(0)(3) | 0. | 70,110. | FMV | Donacions | To assist those in need | | |
| Baby2Baby | | | | | | | | | |
| 6435 Wilshire Boulevard | | | | | | Product | | | |
| Los Angeles, CA 90048 | 95-4302067 | 501(c)(3) | 0. | 75,159. | FMV | Donations | To assist those in need | | |
| Action Center for Education & | | | 1 | , | | | | | |
| Community Development - 1414 | | | | | | | | | |
| Wheatley Street - Far Rockaway, NY | | | | | | Product | | | |
| 11691 | 75-3014243 | 501(c)(3) | 0. | 70,216. | FMV | Donations | To assist those in need | | |
| | | | | , == . | | | | | |
| Proverbs 31 Ministries | | | | | | | | | |
| 1450 West 23rd Street, #207 | | | | | | Product | | | |
| San Bernardino, CA 92411 | 56-2557780 | 501(c)(3) | 0. | 69,898. | FMV | Donations | To assist those in need | | |
| | | | | | | | | | |
| James McFarlin Community | | | | | | | | | |
| Development, Inc 12120 Fisher | | | | | | Product | | | |
| Road - Whitakers, NC 27891 | 58-2494455 | 501(c)(3) | 0. | 66,355. | FMV | Donations | To assist those in need | | |
| Heartland Henry Mission | | | | | | | | | |
| Heartland Hope Mission | | | | | | D | | | |
| 5210 S. 21st Street | 14 1060250 | E01/ \/2\ | | 62.150 | | Product | | | |
| Omaha, NE 68107 | 14-1869352 | 501(c)(3) | 0. | 63,158. | ,FMV | Donations | To assist those in need | | |
| FOCUS North America - Westminster | | | | | | | | | |
| 600 N. Bell Avenue, Bldg 1, Ste 11 | | | | | | Product | | | |
| Carnegie, PA 15106 | 26-4427803 | 501(c)(3) | 0. | 62,554. | EM7/ | Donations | To assist those in need | | |
| Carnegre, FA 13100 | 20-442/003 | DOT (C) (3) | 0. | 02,554. | ,r m v | DOMACTOMS | TO assist those in need | | |
| WestEd | | | | | | | | | |
| 810 Ohio Avenue | | | | | | Product | | | |
| Richmond, CA 94801 | | N/A | 0. | 59,658. | FMV | Donations | To assist those in need | | |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | nedule I (Form 990), Pa | art II.) | |
|--|------------------|-------------------------------|--------------------------|-----------------------------------|--|--|---|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| The Breast Cancer Society | | | | | | | |
| 3934 Miller Road | | | | | | Product | |
| Newtown Square, PA 19073 | 26-0237089 | 501(c)(3) | 0. | 54,490. | , FMV | Donations | To assist those in need |
| Goodwill Industries of Denver | | | | | | | |
| 6850 N. Federal Boulevard | | | | | | Product | |
| Denver, CO 80221 | 84-0405513 | 501(c)(3) | 0. | 50,000. | FMV | Donations | To assist those in need |
| Humane Ohio | | | | | | | |
| 3131 Tremainsville Road | | | | | | Product | |
| Toledo, OH 43613 | 34-1897582 | 501(c)(3) | 0. | 49,500. | FMV | Donations | To assist those in need |
| Tri-County Animal Rescue, Inc. | | | | | | | |
| 9562 Route 322 | | | | | | Product | |
| Shippenville, PA 16254 | 45-3950688 | 501(c)(3) | 0. | 49,500. | ,FMV | Donations | To assist those in need |
| All Our Children, Inc. | | | | | | | |
| PO Box 2802 | | | | | | Product | |
| West Memphis, AR 72303 | 71-0715853 | 501(c)(3) | 0. | 48,873. | FMV | Donations | To assist those in need |
| The Diaper Alliance | | | | | | | |
| 4606 James Savage Road | | | | | | Product | |
| Midland, MI 48642 | 27-2558400 | 501(c)(3) | 0. | 48,845. | FMV | Donations | To assist those in need |
| Mendocino Coast Children's Fund | | | | | | | |
| PO Box 1616 | | | | | | Product | |
| Mendocino, CA 95460 | 68-0367383 | 501(c)(3) | 0. | 48,581. | ,FMV | Donations | To assist those in need |
| Our Support for Children in Need | | | | | | | |
| 229 SE 2nd Ave, #5 | | | | | | Product | |
| Delray Beach, FL 33483 | 75-3238083 | 501(c)(3) | 0. | 48,334. | , FMV | Donations | To assist those in need |
| Greater Bethel CDC | | | | | | | |
| 94-21 Merrick Boulevard | | | | | | Product | |
| Jamaica, NY 11433 | 32-0000557 | 501(c)(3) | 0. | 46,137. | , FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | 1 |
|--|------------------|-------------------------------|--------------------------|---|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Feed The Children, Inc. | | | | | | | |
| PO Box 36 | | | | | | Product | |
| Oklahoma City, OK 73101 | 73-6108657 | 501(c)(3) | 0. | 45,734. | FMV | Donations | To assist those in need |
| Reaching the World Community | | | | | | | |
| Development - 4848 Stamp Road - | | | | | | Product | |
| Temple Hills, MD 20748 | 26-1640947 | 501(c)(3) | 0. | 45,438. | FMV | Donations | To assist those in need |
| Santa Claus Incorporated of | | | | · | | | |
| Greater San Bernardino - 824 E. | | | | | | | |
| 6th Street - San Bernardino, CA | | | | | | Product | |
| 92410 | 95-6101275 | 501(c)(3) | 0. | 44,629. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Catholic Charities of Ft. Worth, | | | | | | | |
| Inc 249 W. Thornhill Drive - | | | | | | Product | |
| Fort Worth, TX 76115 | 75-0808769 | 501(c)(3) | 0. | 43,635. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Goodness Outreach Depot | | | | | | | |
| 102 Bayne Road | 60 0510100 | F01/->/2> | | 40.607 | E107 | Product | m |
| Haslet, TX 76052 | 68-0512138 | 501(c)(3) | 0. | 42,607. | , F'MV | Donations | To assist those in need |
| Southern Minnesota Initiative | | | | | | | |
| Foundation - 525 Florence Avenue - | | | | | | Product | |
| Owatonna, MN 55060 | 36-3454285 | 501(c)(3) | 0. | 39,772. | FMV | Donations | To assist those in need |
| | 00 0101200 | | 1 | 05,772 | | | |
| Westchester Community Opportunity | | | | | | | |
| Program, Inc 2269 Saw Mill | | | | | | Product | |
| River Road - Elmsford, NY 10523 | 13-2547122 | 501(c)(3) | 0. | 39,772. | FMV | Donations | To assist those in need |
| | | | | | | | |
| You Are Not Alone Veterans | | | | | | | |
| Foundation - 224 Ann Drive - | | | | | | Product | |
| Middletown, DE 19709 | 27-1537878 | 501(c)(3) | 0. | 39,546. | FMV | Donations | To assist those in need |
| | | | | | | | |
| United Way of the Mid-Willamette | | | | | | | |
| Valley - 455 Bliler Avenue NE - | | | | | | Product | |
| Salem, OR 97301 | 93-0395586 | 501(c)(3) | 0. | 39,467. | FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | r Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | |
|--|--------------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
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| Basense of Hone The | | | | | | | |
| Essence of Hope, Inc. 1320 White Street SW | | | | | | Product | |
| Atlanta, GA 30310 | 14-1989286 | 501(c)(3) | 0. | 38,731, | EM7 | Donations | To assist those in need |
| Actanca, GA 30310 | 14-1909200 | 501(0)(3) | 1 | 30,731. | FMV | Donacions | TO assist those in need |
| El Reno Blessing Baskets, Inc. | | | | | | | |
| 400 S. Barker Avenue | | | | | | Product | |
| El Reno, OK 73036 | 01-0748848 | 501(c)(3) | 0. | 38,278, | FMV | Donations | To assist those in need |
| | | | | , , , , , , , , | | | |
| Things of My Very Own | | | | | | | |
| 1011 Cheyenne Road | | | | | | Product | |
| Scotia, NY 12372 | 90-0370316 | 501(c)(3) | 0. | 37,597. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Kids Klub Children's Charities | | | | | | | |
| 380 S. Raymond Avenue | | | | | | Product | |
| Pasadena, CA 91105 | 95-4716812 | 501(c)(3) | 0. | 37,210. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Adoptive and Foster Families of | | | | | | | |
| Maine - 294 Center Street - Old | | | | | | Product | |
| Town, ME 04468 | 01-0515363 | 501(c)(3) | 0. | 37,136. | FMV | Donations | To assist those in need |
| Mar Taraful Harris | | | | | | | |
| My Joyful Heart PO Box 502 | | | | | | Product | |
| | 32-0118912 | 501/a)/3) | 0. | 36,961, | EW17 | Donations | To assist those in need |
| Lockport, IL 60441 | 32-0116912 | 501(6)(3) | 1 | 30,901. | , FMV | Dollacions | To assist those in need |
| Acadiana CARES | | | | | | | |
| PO Box 3865, | | | | | | Product | |
| Lafayette, LA 70502 | 58-1717018 | 501(c)(3) | 0. | 36,405. | FMV | Donations | To assist those in need |
| | 1 | | | | | | |
| Be Perfect Foundation | | | | | | | |
| 720 Indigo Court | | | | | | Product | |
| Pomona, CA 91767 | 26-1485814 | 501(c)(3) | 0. | 36,009. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Pet Angels Rescue, Inc. | | | | | | | |
| 10424 S Coltrane Road | | | | | | Product | |
| Guthrie, OK 73044 | 20-8905732 | 501(c)(3) | 0. | 36,000. | FMV | Donations | To assist those in need |

Schedule I (Form 990)



| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | inizations in the U | nited States (Scr | ledule i (Form 990), Pa | art II.) | 1 |
|--|------------------|-------------------------------|--------------------------|---|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| United Breast Cancer Foundation, | | | | | | | |
| Inc PO Box 2421 - Huntington, | | | | | | Product | |
| NY 11743 | 11-3571208 | 501(c)(3) | 0. | 35,543, | FMV | Donations | To assist those in need |
| | 11 00/1200 | | | 00,010 | | 30 | 10 000100 011000 111 11000 |
| Inside Out Youth Homes, Inc. | | | | | | | |
| 535 S Fountain Avenue | | | | | | Product | |
| Springfield, OH 45506 | 26-0187699 | 501(c)(3) | 0. | 34,717. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Ahiara Development Union USA | | | | | | | |
| 9888 Bissonnet, Suite 600 | | | | | | Product | |
| Houston, TX 77036 | 76-0633134 | 501(c)(3) | 0. | 34,047. | FMV | Donations | To assist those in need |
| Tabana Garata Ghairtana Barrara | | | | | | | |
| Johnson County Christmas Bureau Association - 9503 Johnson Drive - | | | | | | Product | |
| Shawnee, KS 66203 | 48-0884400 | 501(c)(3) | 0. | 33,986. | EM17 | Donations | To assist those in need |
| Blawnee, RD 00203 | 40 0004400 | 501(0)(3) | · · | 33,300. | , r m v | Donacions | TO absist those in need |
| Habitat for Humanity Buffalo, Inc. | | | | | | | |
| 1675 South Park Avenue | | | | | | Product | |
| Buffalo, NY 14220 | 22-2746890 | 501(c)(3) | 0. | 33,923. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Just a Chance | | | | | | | |
| 292 N. San Jacinto Street | | | | | | Product | |
| Hemet, CA 92543 | 71-1000108 | 501(c)(3) | 0. | 33,635. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Youth For Tomorrow 11835 Hazel Circle Drive | | | | | | Product | |
| Bristow, VA 20136 | 52-1342268 | 501(c)(3) | 0. | 33,540. | EM7 | Donations | To assist those in need |
| Elibeon, vii 20130 | 32 1342200 | 501(0)(3) | | 33,340. | , 117 | Donacions | TO UBBIBE CHOSE IN NECC |
| Noras Women of Purpose | | | | | | | |
| 7103 Rosemont Road | | | | | | Product | |
| Dallas, TX 75217 | 45-3619858 | 501(c)(3) | 0. | 32,149. | FMV | Donations | To assist those in need |
| | | | | | | | |
| All God's Little Children | | | | | | | |
| 5833 Oakleaf Way | | | | | | Product | |
| Stone Mountain, GA 30087 | 04-3613843 | 501(c)(3) | 0. | 31,782. | FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | 1 |
|--|------------------|-------------------------------|--------------------------|---|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Gospel of Grace | | | | | | | |
| 1001-09 South 2nd Street | | | | | | Product | |
| Plainfield, NJ 07060 | 22-3812612 | 501(c)(3) | 0. | 31,673. | FMV | Donations | To assist those in need |
| The Salvation Army ARC | | | | | | | |
| 3949 Forest Park Boulevard | | | | | | Product | |
| St. Louis, MO 63108 | 43-0653583 | 501(c)(3) | 0. | 31,380. | FMV | Donations | To assist those in need |
| Asian American Drug Abuse Program | | | | | | | |
| 2900 Crenshaw Boulevard | | | | | | Product | |
| Los Angeles, CA 90016 | 95-2848695 | 501(c)(3) | 0. | 30,823, | EM7 | Donations | To assist those in need |
| | JJ 20400JJ | 501(0)(3) | | 30,023 | ,r m v | Donacions | lo absist those in need |
| Pentecostal Gospel Temple | | | | | | | |
| Ministries - 900 S. State Road 7 - | | | | | | Product | |
| Margate, FL 33068 | 65-0823983 | 501(c)(3) | 0. | 30,503. | EM7 | Donations | To assist those in need |
| margade, 11 55000 | 03 0023303 | 501(0)(0) | | 30,303, | | Donastons | lo appres enege in need |
| Sharing & Caring | | | | | | | |
| 203 S. Pauley Street | | | | | | Product | |
| Tehachapi, CA 93561 | 77-0470149 | 501(c)(3) | 0. | 30,382. | FMV | Donations | To assist those in need |
| Nurtury | | | | | | | |
| 38 Horadan Way | | | | | | Product | |
| Roxbury Crossing, MA 02119 | | N/A | 0. | 29,553, | FMV | Donations | To assist those in need |
| Braswell Rehabilitation Institute | | | | | | | |
| for Dvlpmnt and Growth and Educ. | | | | | | | |
| Services - 1977 N. Garey Ave, Ste | | | | | | Product | |
| 6 - Pomona, CA 91767 | 95-3077722 | 501(c)(3) | 0. | 29,518. | FMV | Donations | To assist those in need |
| | | | | | | | |
| The Resource Center for Community | | | | | | | |
| Action, Inc 3940 Hwy 20 SE - | | | | | | Product | |
| Conyers, GA 30013 | 65-1283239 | 501(c)(3) | 0. | 29,025. | FMV | Donations | To assist those in need |
| Grandma's House of Hope | | | | | | | |
| 1505 E. 17th St, #116 | | | | | | Product | |
| Santa Ana, CA 92705 | 26-0391438 | 501(c)(3) | 0. | 28,823. | FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | nedule I (Form 990), Pa | art II.) | r age |
|--|------------------|-------------------------------|--------------------------|---|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| International Association of | | | | | | | |
| Academics - 2532 Silver Star Road | | | | | | Product | |
| - Orlando, FL 32804 | 27-2009085 | 501(c)(3) | 0. | 27,753. | FMV | | To assist those in need |
| | | | - • | | , | | |
| Turtle Mountain Band of Chippewa | | | | | | | |
| Indians - 4180 Hwy 281 West - | | | | | | Product | |
| Belcourt, ND 58316 | 45-0223071 | 501(c)(3) | 0. | 27,111. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Hawkwing, Inc. | | | | | | | |
| 237 Oak Street | | | | | | Product | |
| Glastonbury, CT 06033 | 06-1600366 | 501(c)(3) | 0. | 26,963. | , FMV | Donations | To assist those in need |
| w 1 1. 1. 01.11. 3. 7. 11 | | | | | | | |
| Multicultural Child and Family | | | | | | | |
| Hope Center - 2021 South 19th St. | 35 3366636 | E01/->/2> | | 26.600 | E167 | Product | m |
| - Tacoma, WA 98405 | 35-2266626 | 501(c)(3) | 0. | 26,690. | , FMV | Donations | To assist those in need |
| Hope Through Housing Foundation | | | | | | | |
| 9065 Haven Ave, Ste 100 | | | | | | Product | |
| Rancho Cucamonga, CA 91730 | 33-0802554 | 501(c)(3) | 0. | 26,146. | FMV | Donations | To assist those in need |
| | | | - | , | | | |
| Summit Family Center, Inc. | | | | | | | |
| 4319 Covington Hwy., Ste 306A | | | | | | Product | |
| Decatur, GA 30035 | 68-0527049 | 501(c)(3) | 0. | 25,977. | , FMV | Donations | To assist those in need |
| West Contra Costa Unified School | | | | | | | |
| District (Early Learning | | | | | | | |
| Department) - 4300 Cutting Blvd. | | | | | | Product | |
| Portable #901 - Richmond, CA 94804 | | 501(c)(3) | 0. | 25,852. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| I58 Network | | | | | | | |
| 8270 W 80th Ave #2 | | | | | | Product | L |
| Arvada, CO 80005 | 20-8248709 | 501(c)(3) | 0. | 25,514. | , ⊮'M∇ | Donations | To assist those in need |
| American Arab Center for Civil and | | | | | | | |
| Human Rights - 13104 West Warren | | | | | | Product | |
| Ave, Suite 10 - Dearborn, MI 48126 | 51-1466133 | 501(c)(3) | 0. | 25,423. | EMA | | To assist those in need |
| mvc, buice iv bearboin, Mi 40120 | 21 1400133 | Por(C/(J/ | 1 0, | 25,425. | , <u>r</u> v | Poliacions | TO ASSIST CHOSE IN NEED |

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| Part II Continuation of Grants and Other | Assistance to de | | | Titled States (SCI) | leddie i (i oiiii 990), i i | 1 | 1 |
|--|------------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| My Brother's Keeper, Inc. | | | | | | | |
| 534 Washington Street | | | | | | Product | |
| South Easton, MA 02375 | 04-3088412 | 501(c)(3) | 0. | 25,303. | FMV | Donations | To assist those in need |
| Young Marines of the Marine Corps | | | | | | | |
| League, Inc 175 N. Clinton | | | | | | Product | |
| Avenue - Rochester, NY 14604 | 16-0743248 | 501(c)(3) | 0. | 24,938. | FMV | Donations | To assist those in need |
| Affordable Housing Initiatives, | | | | | | | |
| Inc 612 Tranquility Glen - | | | | | | Product | |
| Escondido, CA 92027 | 91-1794223 | 501(c)(3) | 0. | 24,915. | FMV | Donations | To assist those in need |
| Resurrection Life Church Rockford | | | | | | | |
| 3233 Ten Mile Road | | | | | | Product | |
| Rockford, MI 49341 | 01-0579071 | 501(c)(3) | 0. | 24,689. | FMV | Donations | To assist those in need |
| Catholic Charities Indianapolis | 01 00/20/1 | | | 22,000 | | | 10 452150 011050 111 1100 |
| 1400 N. Meridian Street, c/o | | | | | | | |
| Senior Companion Program - | | | | | | Product | |
| Indianapolis, IN 462 | 35-0867980 | 501(c)(3) | 0. | 24,680. | FMV | Donations | To assist those in need |
| Ontario Jesucristo es la Verdad | | | | | | | |
| 705 S Cypress Avenue | | | | | | Product | |
| Ontario, CA 91762 | 31-1449097 | 501(c)(3) | 0. | 24,660. | FMV | Donations | To assist those in need |
| Choices Adolescent Treatment | | | | | | | |
| Center, Inc 4521 Karnack | | | | | | Product | |
| Highway - Marshall, TX 75672 | 75-2569957 | 501(c)(3) | 0. | 24,484. | FMV | Donations | To assist those in need |
| Ronald McDonald House of New York | | | | | | | |
| 405 E. 73rd Street | | | | | | Product | |
| | 13-2933654 | 501/a)/3) | 0. | 24 427 | EM77 | Donations | To assist those in need |
| New York, NY 10021 | 13-2333034 | 501(c)(3) | 1 | 24,427. | T. I.I. A | Poliacions | TO ABBIBL CHOSE III HEEC |
| Birthright of Georgetown, Inc. | | | | | | Day day at | |
| PO Box 3455 | E7 1133650 | E01/~\/3\ | | 02.050 | EW7 | Product | Ma agaigh bloom in |
| Pawleys Island, SC 29585 | 57-1133650 | 501(c)(3) | 0. | 23,950. | 'L.W∧ | Donations | To assist those in nee |

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| Part II Continuation of Grants and Other | Assistance to Go | vernments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | |
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| Macon Amusaka Galif Ghanibias Tra | | | | | | | |
| Team Amvets Calif. Charities, Inc. 1213 S. Dale Avenue | | | | | | Product | |
| Anaheim, CA 92804 | 45-3591166 | 501(c)(3) | 0. | 23,737. | FMV | Donations | To assist those in need |
| | 10 0071100 | | | 20,707 | | | |
| The John J. Driscoll United Labor | | | | | | | |
| Agency - 56 Town Line Road - Rocky | | | | | | Product | |
| Hill, CT 06067 | 06-0987695 | 501(c)(3) | 0. | 23,718. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Seniors Of Ohio, Inc. | | | | | | | |
| 266 E. Main Street | | | | | | Product | |
| Columbus, OH 43215 | 90-0602396 | 501(c)(3) | 0. | 23,328. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Hebron Interfaith Human Services | | | | | | D 3 b | |
| 20 Pendelton Drive Hebron, CT 06248 | 22-3004882 | 501(c)(3) | 0. | 23,246. | EW17 | Product Donations | To assist those in need |
| Hebron, CI 00240 | 22-3004002 | 501(0)(3) | 0. | 25,240. | FMV | Donacions | To assist those in need |
| The Salt and Light Company | | | | | | | |
| 1060 Monmouth Road | | | | | | Product | |
| Mount Holly, NJ 08060 | 22-2709739 | 501(c)(3) | 0. | 22,438. | FMV | Donations | To assist those in need |
| · | | | | • | | | |
| Youth Rebuilding New Orleans | | | | | | | |
| 1801 Transcontinental Drive | | | | | | Product | |
| Metairie, LA 70001 | 71-1028434 | 501(c)(3) | 0. | 22,438. | FMV | Donations | To assist those in need |
| | | | | | | | |
| KEYS for the Homeless Foundation | | | | | | | |
| PO Box 32027 | 20 1047300 | F01/-\/2\ | | 22 102 | T107 | Product | m |
| Washington, DC 20007 | 20-1947389 | 501(c)(3) | 0. | 22,192. | , F'MV | Donations | To assist those in need |
| Orange County Foundation for | | | | | | | |
| Oncology C&F - PO Box 6023 - | | | | | | Product | |
| Orange, CA 92863 | 95-3786863 | 501(c)(3) | 0. | 21,990. | FMV | Donations | To assist those in need |
| - ' | | | | , | | | |
| Bayfront Youth & Family Services | | | | | | | |
| 324 E. Bixby Road | | | | | | Product | |
| Long Beach, CA 90807 | 33-0891900 | 501(c)(3) | 0. | 21,890. | FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | 1 |
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| Lowell Public Schools | | | | | | | |
| 43 Highland Street | | | | | | Product | |
| Lowell, MA 01852 | | 501(c)(3) | 0. | 21,693 | FMV | Donations | To assist those in need |
| Roots Community Health Center | | | | | | | |
| 4107 Broadway | | | | | | Product | |
| Oakland, CA 94611 | 26-2583954 | 501(c)(3) | 0. | 21,615. | FMV | Donations | To assist those in need |
| Kennedy Austin Foundation | | | | | | | |
| 2501 N. Garey Avenue | | | | | | Product | |
| Pomona, CA 91768 | 20-5601495 | 501(c)(3) | 0. | 21,090. | FMV | Donations | To assist those in need |
| Emmanuel Apostolic Church | | | | | | | |
| 6114 SW 35th Ct | | | | | | Product | |
| Miramar, FL 33023 | 65-0389835 | 501(c)(3) | 0. | 19,950. | FMV | Donations | To assist those in need |
| Anoka Hennepin School District | | | | | | | |
| 2727 N. Ferry Street | | | | | | Product | |
| Anoka, MN 55303 | | 501(c)(3) | 0. | 19,886. | FMV | Donations | To assist those in need |
| Charleston County School District | | | | | | | |
| 75 Calhoun St. Floor 2 | | | | | | Product | |
| Charleston, SC 29401 | | 501(c)(3) | 0. | 19,886. | FMV | Donations | To assist those in need |
| Communities In Schools Of North | | | | | | | |
| Carolina, Inc 222 North Person | | | | | | Product | |
| Street - Raleigh, NC 27601 | 56-1677831 | 501(c)(3) | 0. | 19,886. | FMV | Donations | To assist those in need |
| Community Foundation of Greater | | | | | | | |
| Dubuque - 700 Locust Street - | | | | | | Product | |
| Dubuque, IA 52001 | 42-1526614 | 501(c)(3) | 0. | 19,886. | FMV | Donations | To assist those in need |
| Houston Area Urban League, Inc. | | | | | | | |
| 1301 Texas Avenue | | | | | | Product | |
| Houston, TX 77002 | 74-1611455 | 501(c)(3) | 0. | 19,886. | FMV | Donations | To assist those in need |

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| Reconnecting McDowell, Inc. | | | | | | | |
| 30 Central Avenue | | | | | | Product | |
| Welch, WV 24801 | | N/A | 0. | 19,886. | ,FMV | Donations | To assist those in need |
| Newburgh Enlarged City School | | | | | | | |
| District - 191 Washington Street - | | | | | | Product | |
| Newburgh, NY 12550 | | 501(c)(3) | 0. | 19,886. | , FMV | Donations | To assist those in need |
| Pacer Center, Inc. | | | | | | | |
| 8161 Normandale Boulevard | | | | | | Product | |
| Minneapolis, MN 55437 | 41-1306304 | 501(c)(3) | 0. | 19,886. | , FMV | Donations | To assist those in need |
| Rosemount Apple Valley Eagan | | | | | | | |
| Public Schools - 3455 153 Street | | | | | | Product | |
| West - Rosemount, MN 55068 | | 501(c)(3) | 0. | 19,886. | , FMV | Donations | To assist those in need |
| · | | | | , | | | |
| United Way For Greater Austin | | | | | | | |
| 2000 E. MLK Jr. Boulevard | | | | | | Product | |
| Austin, TX 78702 | 74-1193439 | 501(c)(3) | 0. | 19,886. | ,FMV | Donations | To assist those in need |
| Valley of The Sun United Way | | | | | | | |
| 1515 E. Osborn Road | | | | | | Product | |
| Phoenix, AZ 85014 | 86-0104419 | 501(c)(3) | 0. | 19,886. | , FMV | Donations | To assist those in need |
| YMCA of the Triangle Area | | | | | | | |
| 1839 South Main Street | | | | | | Product | |
| Wake Forest, NC 27587 | 56-0591307 | 501(c)(3) | 0. | 19,886. | , FMV | Donations | To assist those in need |
| Kids Come First | | | | | | | |
| 1556 S. Sultana Avenue | | | | | | Product | |
| Ontario, CA 91761 | 33-0969025 | 501(c)(3) | 0. | 19,700. | , FMV | Donations | To assist those in need |
| Home & Away Ministries | | | | | | | |
| 39404 Grand Avenue | | | | | | Product | |
| North Branch, MN 55056 | 30-0157388 | 501(c)(3) | 0. | 19,697. | FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | nedule I (Form 990), Pa | art II.) | |
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| Infinity Community Development | | | | | | | |
| Corp 1309 S. 10th Street - | | | | | | Product | |
| Camden, NJ 08104 | 90-0742341 | 501(c)(3) | 0. | 19,241. | FMV | Donations | To assist those in need |
| Community Action Network, Inc. | | | | | | | |
| 3975 Copper Spring Road | | | | | | Product | |
| Springville, TN 38256 | 61-1492579 | 501(c)(3) | 0. | 19,032. | , FMV | Donations | To assist those in need |
| American GI Forum National | | | | | | | |
| Veterans Outreach - 611 N. Flores | | | | | | | |
| Street, Suite 200 - San Antonio, | | | | | | Product | |
| TX 78205 | 74-2033203 | 501(c)(3) | 0. | 18,880. | , FMV | Donations | To assist those in need |
| 77-1 | | | | | | | |
| Volunteers of America of Los Angeles - 3600 Wilshire Blvd, | | | | | | Product | |
| Suite 1500 - Los Angeles, CA 90010 | 95-1691330 | 501(c)(3) | 0. | 18,757. | EM7 | Donations | To assist those in need |
| Barre 1300 Hos imperes, en 30010 | 73 1071330 | 301(0)(3) | | 10,737. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Donacions | TO UBBIBL CHOSE IN NECU |
| Faith-Hope-Love-Charity, Inc. | | | | | | | |
| 3175 S. Congress Avenue, Suite 310 | | | | | | Product | |
| Palm Springs, FL 33461 | 65-0464807 | 501(c)(3) | 0. | 18,706. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Gonave Vision Group, Inc. | | | | | | | |
| 48 N. Kirkman Road, Suite 2 | | | | | | Product | |
| Orlando, FL 32811 | 27-0676115 | 501(c)(3) | 0. | 18,399. | , FMV | Donations | To assist those in need |
| Food Depot | | | | | | | |
| 1222 A Siler Road | | | | | | Product | |
| Santa Fe, NM 87507 | 85-0416803 | 501(c)(3) | 0. | 18,282. | EMA | Donations | To assist those in need |
| panea 10, MI 0,50, | 03 0110003 | 301(0)(3) | | 10,202. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Jonations | TO UDDIEG CHOSE IN MEEU |
| Trinity Temple C.O.G.I.C. | | | | | | | |
| 1028 O Street | | | | | | Product | |
| Bakersfield, CA 93304 | 23-7002419 | 501(c)(3) | 0. | 18,213. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Operation Homefront California | | | | | | | |
| 8318 Miramar Mall | | | | | | Product | |
| San Diego, CA 92121 | 20-3051279 | 501(c)(3) | 0. | 17,953. | , FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | nedule I (Form 990), Pa | art II.) | |
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| Collaborative For Children | | | | | | | |
| 1111 North Loop, W, Suite 600 | | | | | | Product | |
| Houston, TX 77008 | 76-0228065 | 501(c)(3) | 0. | 17,898. | FMV | Donations | To assist those in need |
| Hearts & Lives | | | | | | | |
| PO Box 4644 | | | | | | Product | |
| Blue Jay, CA 92317 | 20-0867845 | 501(c)(3) | 0. | 17,432. | FMV | Donations | To assist those in need |
| Threshold, Inc. | | | | | | | |
| 3550 N Goldenrod Rd | | | | | | Product | |
| Winter Park, FL 32792 | 59-1674609 | 501(c)(3) | 0. | 17,317. | FMV | Donations | To assist those in need |
| Exceptional Care for Children | | | | | | | |
| 11 Independence Way | | | | | | Product | |
| Newark, DE 19713 | 23-2966490 | 501(c)(3) | 0. | 17,288. | FMV | Donations | To assist those in need |
| CS Academy | | | | | | | |
| 1443 W. 63rd Street | | | | | | Product | |
| Chicago, IL 60636 | 27-2411662 | 501(c)(3) | 0. | 17,130. | FMV | Donations | To assist those in need |
| Erica Raes Kids, Inc. | | | | | | | |
| 965 N. Picadilly Road | | | | | | Product | |
| Aurora, CO 80018 | 27-1905914 | 501(c)(3) | 0. | 17,126. | FMV | Donations | To assist those in need |
| United Veterans Beacon House, Inc. | | | | | | | |
| 1715 Union Boulevard | | | | | | Product | |
| Bay Shore, NY 11706 | 11-3246402 | 501(c)(3) | 0. | 17,038. | FMV | Donations | To assist those in need |
| America's Disaster Relief - New | | | | | | | |
| York - 4291 Albany Street, Unit | | | | | | Product | |
| 151 - Albany, NY 12205 | 26-0630630 | 501(c)(3) | 0. | 16,903. | FMV | Donations | To assist those in need |
| YWCA of Adams County Nebraska | | | | | | | |
| 604 N. Street Joseph Avenue | | | | | | Product | |
| Hastings, NE 68901 | 47-0386539 | 501(c)(3) | 0. | 16,843. | , FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | nedule I (Form 990), Pa | art II.) | |
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| Community Psychiatric Institute | | | | | | | |
| 67 Sanford Street, | | | | | | Product | |
| East Orange, NJ 07018 | 23-7184194 | 501(c)(3) | 0. | 16,823. | FMV | Donations | To assist those in need |
| Soaring To Achieve Results | | | | | , | | |
| Systematically Developmental | | | | | | | |
| Center - 1801 NW 186th Street - | | | | | | Product | |
| Miami Gardens, FL 33056 | 20-3993492 | 501(c)(3) | 0. | 16,792. | , FMV | Donations | To assist those in need |
| New Directions, Inc. | | | | | | | |
| PO Box 80611 | | | | | | Product | |
| Lansing, MI 48908 | 61-1569185 | 501(c)(3) | 0. | 16,484. | EM7 | Donations | To assist those in need |
| Tambing, iii 10300 | 01 1303103 | 501(0)(0) | | 10,101. | ,,,,,,, | Donastons | lo apple enege in need |
| Epic Repertory Theatre Company | | | | | | | |
| 7455 Bonnie Drive | | | | | | Product | |
| Village of Lakewood, IL 60014 | 13-4167142 | 501(c)(3) | 0. | 15,912. | FMV | Donations | To assist those in need |
| | | | | , | | | |
| Western Kansas Child Advocacy | | | | | | | |
| Center - 109 E. 9th Street - Scott | | | | | | Product | |
| City, KS 67871 | 20-1055623 | 501(c)(3) | 0. | 15,910. | FMV | Donations | To assist those in need |
| United Way of Greater Cincinnati | | | | | | | |
| 3025 Bathgate Street | | | | | | Product | |
| Cincinnati, OH 45229 | 31-0537502 | 501(c)(3) | 0. | 15,909. | FMV | Donations | To assist those in need |
| | | | | | , | | |
| Armenian Missionary Assoc. of | | | | | | | |
| America - 31 W. Century Road - | | | | | | Product | |
| Paramus, NJ 07652 | 13-5670954 | 501(c)(3) | 0. | 15,887. | , FMV | Donations | To assist those in need |
| | | | | · | | | |
| Miracles Outreach Community | | | | | | | |
| Development - PO Box 310603 - | | | | | | Product | |
| Tampa, FL 33680 | 27-0003754 | 501(c)(3) | 0. | 15,840. | FMV | Donations | To assist those in need |
| | | | | | | | |
| One Heart for Women and Children | | | | | | | |
| 2040 North Rio Grand Avenue | | | _ | . <u>.</u> | | Product | L |
| Orlando, FL 32804 | 30-0584360 | 501(c)(3) | 0. | 15,795. | , ⊮'MV | Donations | To assist those in need |

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| Chadan Bradanh | | | | | | | |
| Shadow Project | | | | | | D 3 b | |
| 6663 SW Beaverton Hillsdale | CF 11CC0CC | E01/-\/2\ | | 15 551 | E1477 | Product | m |
| Portland, OR 97225 | 65-1166066 | 501(c)(3) | 0. | 15,551. | , FMV | Donations | To assist those in need |
| New York Women of Destiny, Inc. | | | | | | | |
| 366 Woodfield Road | | | | | | Product | |
| | 04-3601520 | 501(c)(3) | 0. | 15,463, | EM77 | Donations | To assist those in need |
| West Hempstead, NY 11552 Lutheran Social Services of South | 04-3601320 | 501(0)(3) | 1 | 15,465. | ,rmv | Donacions | To assist those in need |
| Dakota, Inc - 705 East 41st | | | | | | | |
| Street, Suite 200 - Sioux Falls, | | | | | | Product | |
| | 46 0224721 | E01/~\/2\ | 0. | 15 204 | EMZ | Donations | ma aggist these in mad |
| SD 57105 | 46-0224731 | 501(c)(3) | 0. | 15,294. | , FMV | Donacions | To assist those in need |
| New Joy Divine M.B. Church | | | | | | | |
| 7625 S. Halsted Street | | | | | | Product | |
| | 36-3896804 | 501(c)(3) | 0. | 15,282. | EM77 | Donations | To assist those in need |
| Chicago, IL 60620 | 30-3090004 | 501(0)(3) | | 13,202. | , F H V | Donacions | To assist those in need |
| DIOS International Missionary | | | | | | | |
| Church - 4335 W. Adams Boulevard - | | | | | | Product | |
| | 95-4706764 | 501(c)(3) | 0. | 15,243, | EM77 | Donations | To assist those in need |
| Los Angeles, CA 90018 | 95-4700704 | 501(0)(3) | 1 | 15,245. | , FMV | Donacions | To assist those in need |
| Priceless Parrot Preserve, Inc. | | | | | | | |
| 3 Deer Leap Road | | | | | | Product | |
| Ridge, NY 11961 | 11-3624130 | 501(c)(3) | 0. | 15,078, | EW. | Donations | To assist those in need |
| Riage, NI 11301 | 11 3024130 | 501(0)(3) | | 13,070. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Donacions | lo apprise enose in need |
| Drumondawmin Healthy Families, | | | | | | | |
| Inc 2100 N. Eutaw Place - | | | | | | Product | |
| Baltimore, MD 21217-4139 | 14-1918174 | 501(c)(3) | 0. | 14,991, | EW7 | Donations | To assist those in need |
| Barelmore, MB 21217 4133 | 14 1510174 | 501(0)(3) | | 14,551. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Donacions | lo applie those in need |
| Down Syndrome Guild of Greater | | | | | | | |
| Kansas City - 5960 Dearborn St, | | | | | | Product | |
| • | 43-1427760 | 501(c)(3) | 0. | 14,937. | EM77 | Donations | To assist those in need |
| #100 - Shawnee Mission, KS 66204 | 42-142//00 | 501(0/(3/ | 1 | 14,537 | , r m v | Dollacions | TO ASSIST CHOSE IN HEED |
| Earthen Vessels Outreach | | | | | | | |
| 4740 Friendship Avenue | | | | | | Product | |
| - | 12_1621629 | 501(a)(3) | | 14 020 | EM77 | | To aggigt those in need |
| Pittsburgh, PA 15224 | 42-1631628 | 501(c)(3) | 0. | 14,930. | 'Luv | Donations | To assist those in need |

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| Daniel C. Warden, Trans | | | | | | | |
| Poor & Needy, Inc. 5212 Trotters Glen Drive, Suite 10 | | | | | | Product | |
| Upper Marlboro, MD 20772 | 36-4659896 | 501(c)(3) | 0. | 14,888. | EW/A | Donations | To assist those in need |
| epper sandaren, en erre | | | | | , | | |
| Clifton Heights Senior Center | | | | | | | |
| 6827 South Broadway | | | | | | Product | |
| St. Louis, MO 63111 | 84-1628468 | 501(c)(3) | 0. | 14,678. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| American Foundation for Disabled | | | | | | | |
| Children, Inc 12 Winding Creek | | | | | | Product | |
| Way - Ormond Beach, FL 32174 | 13-3636844 | 501(c)(3) | 0. | 14,452. | , FMV | Donations | To assist those in need |
| Hannat Mahamaala Intamatianal | | | | | | | |
| Harvest Tabernacle International Ministries - 3467 Hunters Hill | | | | | | Product | |
| Drive - Lithonia, GA 30038 | 58-2626838 | 501(c)(3) | 0. | 14,217. | EM77 | Donations | To assist those in need |
| Drive - Bremonia, GA 30036 | 30-2020030 | 501(0)(3) | 0. | 14,217. | FHV | Donacions | To assist those in need |
| Changing Faces, Inc. | | | | | | | |
| 4124 Odie Lane | | | | | | Product | |
| Santa Maria, CA 93455 | 31-1601637 | 501(c)(3) | 0. | 14,104. | , FMV | Donations | To assist those in need |
| · | | | | • | | | |
| Baptist Bible College c/o Graduate | | | | | | | |
| School - 628 E. Kearney Street - | | | | | | Product | |
| Springfield, MO 65803 | 44-0567840 | 501(c)(3) | 0. | 14,000. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| St. Vrain Valley School District | | | | | | _ | |
| 2929 Clover Basin Drive | | | | | | Product | L |
| Longmont, CO 80503 | | 501(c)(3) | 0. | 13,920. | ,FMV | Donations | To assist those in need |
| The Fountain of Life Grace Springs | | | | | | | |
| 15853 Commerce Court | | | | | | Product | |
| Upper Marlboro, MD 20774 | 52-2255819 | 501(c)(3) | 0. | 13,731. | FMV | Donations | To assist those in need |
| TEPOL MALLOUD, MD EVIIT | 32 2233013 | | · · · | 13,731. | ,,,,,, | | 15 abbibo onobe in need |
| Cranio Care Bears | | | | | | | |
| 151 Nickerson Street | | | | | | Product | |
| Seattle, WA 98109 | 45-1741139 | 501(c)(3) | 0. | 13,543. | FMV | Donations | To assist those in need |

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| Revelations Family Enrichment | | | | | | | |
| Center - 34 Deloss Street - | | | | | | Product | |
| Framingham, MA 01702 | 43-2083631 | 501(c)(3) | 0. | 13,294. | FMV | Donations | To assist those in need |
| Unidos For La Musica | | | | | | | |
| 4055 E. Gausti Road, Suite 108 | | | | | | Product | |
| Ontario, CA 91761 | 27-4530036 | 501(c)(3) | 0. | 13,271. | ,FMV | Donations | To assist those in need |
| Catholic Charities of the Diocese | | | | | | | |
| of Pueblo, Inc 429 W. 10th | | | | | | Product | |
| Street - Pueblo, CO 81003 | 84-0471001 | 501(c)(3) | 0. | 13,126. | , FMV | Donations | To assist those in need |
| Chabad the Beaches, Inc. | | | | | | | |
| 521 Ala N | | | | | | Product | |
| Ponte Vedra Beach, FL 32082 | 14-1902635 | 501(c)(3) | 0. | 13,098. | FMV | Donations | To assist those in need |
| The Villa Center, Inc. | | | | | | | |
| 910 N. French Street | | | | | | Product | |
| Santa Ana, CA 92701 | 95-2312323 | 501(c)(3) | 0. | 12,938. | FMV | Donations | To assist those in need |
| Educating Communities for | | | | | | | |
| Parenting - 919 Walnut St, Fl 10 - | | | | | | Product | |
| Philadelphia, PA 19107 | 23-2344278 | 501(c)(3) | 0. | 12,713. | , FMV | Donations | To assist those in need |
| Family & Children Faith Coalition, | | | | | | | |
| Inc 5911 W. Flagler St - Miami, | | | | | | Product | |
| FL 33144 | 65-1003163 | 501(c)(3) | 0. | 12,686. | , FMV | Donations | To assist those in need |
| Swanrider | | | | | | | |
| 7605 E. Pinnacle Peak Road, #15, | | | | | | | |
| c/o Inspiration Gallery - | | | | | | Product | |
| Scottsdale, AZ 85 | 20-1788353 | 501(c)(3) | 0. | 12,593. | ,FMV | Donations | To assist those in need |
| Goshen International Community | | | | | | | |
| Services - 1731 Alcazar Drive - | | | | | | Product | |
| Miramar, FL 33023 | 45-4795849 | 501(c)(3) | 0. | 12,511. | FMV | Donations | To assist those in need |

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| Galifornia Ghaha Bashan Barraha | | | | | | | |
| California State Foster Parents | | | | | | Droduat | |
| Association - 17601 Starr Drive - | 68-0195828 | 501(c)(3) | 0. | 12 502 | EW17 | Product Donations | The aggist these in need |
| Cottonwood, CA 96022 | 08-0195828 | 501(0)(3) | 1 | 12,503. | , FMV | Donacions | To assist those in need |
| Community Development Institute | | | | | | | |
| 7836 S. Union Avenue | | | | | | Product | |
| Chicago, IL 60620 | 36-4060341 | 501(c)(3) | 0. | 12,443. | FMV | Donations | To assist those in need |
| enrouge, 11 court | 30 1000311 | 501(0)(0) | | 12,113. | | Jonations | To upping shope in need |
| St. Luke Church of the Living Word | | | | | | | |
| 40338 Barnhardt Road | | | | | | Product | |
| New London, NC 28127 | 56-1493582 | 501(c)(3) | 0. | 12,439. | FMV | Donations | To assist those in need |
| · | | | | , | | | |
| No Man is an Island, Inc. | | | | | | | |
| 14018 Coral Bean Drive | | | | | | Product | |
| Sugar Land, TX 77498 | 27-2100576 | 501(c)(3) | 0. | 12,398. | FMV | Donations | To assist those in need |
| · | | | | • | | | |
| Maryland Center for Veterans | | | | | | | |
| Education & Training - 301 N. High | | | | | | Product | |
| Street - Baltimore, MD 21202 | 52-1815710 | 501(c)(3) | 0. | 12,397. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Commonwealth Community Development | | | | | | | |
| Services - 80 Afton Parkway - | | | | | | Product | |
| Portsmouth, VA 23702 | 26-2793299 | 501(c)(3) | 0. | 12,315. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Circle of Light Associates | | | | | | | |
| 8759 Annetta Avenue | | | | | | Product | |
| St. Louis, MO 63147 | 43-1589828 | 501(c)(3) | 0. | 12,143. | FMV | Donations | To assist those in need |
| | | | | | | | |
| G.L.A.D Greater Love Adoption | | | | | | | |
| Decision - 5000 First Avenue - | | | | | | Product | |
| Evansville, IN 47724 | 35-1703879 | 501(c)(3) | 0. | 11,944. | FMV | Donations | To assist those in need |
| 01 11 10 0 | | | | | | | |
| ChildCareGroup | | | | | | | |
| 8585 North Stemmons Freeway, Suite | 75 000000 | E01/->/2> | | 44 000 | E107 | Product | m |
| Dallas, TX 75247 | 75-0800634 | bor(c)(3) | 0. | 11,932. | , F.W∧ | Donations | To assist those in need |

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| Heart Of Florida United Way Inc. | | | | | | | |
| 1940 Traylor Boulevard | | | | | | Product | |
| Orlando, FL 32804 | 59-0808854 | 501(c)(3) | 0. | 11,932. | ,FMV | Donations | To assist those in need |
| Phoenix House Foundation | | | | | | | |
| 34-01 Vernon Boulevard | | | | | | Product | |
| Astoria, NY 11106 | 23-7013149 | 501(c)(3) | 0. | 11,881. | FMV | Donations | To assist those in need |
| Successful Opportunities for an | | | | | | | |
| Unprivileged Life - 2986 First | | | | | | Product | |
| Street, #G - La Verne, CA 91750 | 35-2341634 | 501(c)(3) | 0. | 11,678. | , FMV | Donations | To assist those in need |
| Haganna Chanal of Pollflower | | | | | | | |
| Hosanna Chapel of Bellflower 10930 Porta Drive | | | | | | Product | |
| Los Alamitos, CA 90720 | 95-3196998 | 501(c)(3) | 0. | 11,606. | EW/ | Donations | To assist those in need |
| nos mamieos, en 30720 | 33 3130330 | 501(0)(3) | | 11,000. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Donacions | TO abbibe chose in need |
| Eastside Baby Corner | | | | | | | |
| 1510 NW Maple Street, PO Box 712 | | | | | | Product | |
| Issaquah, WA 98027 | 91-1617032 | 501(c)(3) | 0. | 11,583. | ,FMV | Donations | To assist those in need |
| A Godsent Foundation | | | | | | | |
| 1224 Hughmont Drive | | | | | | Product | |
| Pflugerville, TX 78660 | 45-2602290 | 501(c)(3) | 0. | 11,545. | FMV | Donations | To assist those in need |
| United Church of Praise | | | | | | | |
| International Ministries - 564 Bay | | | | | | Product | |
| Street - Staten Island, NY 10304 | 32-0284111 | 501(c)(3) | 0. | 11,483. | , FMV | Donations | To assist those in need |
| Living Word Church | | | | | | | |
| 5900 Forest Boulevard | | | | | | Product | |
| East St. Louis, IL 62204 | 44-0597787 | 501(c)(3) | 0. | 11,462. | EMA | Donations | To assist those in need |
| | 44 0331101 | 501(0/(3/ | 1 | 11,402. | , F 1.1 V | Donactons | TO ABBIBC CHOSE IN NEED |
| Main Attractions Dance Boosters | | | | | | | |
| 36493 Crimson Lane | | | | | | Product | |
| New Baltimore, MI 48047 | 27-3785262 | 501(c)(3) | 0. | 11,128. | ,FMV | Donations | To assist those in need |

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| Overgement House | | | | | | | |
| Overcomers House 4012 Wrexham Drive | | | | | | Product | |
| Snellville, GA 30039 | 35-2376065 | 501(c)(3) | 0. | 11,113. | EM7 | Donations | To assist those in need |
| bicliville, on soos | 33 2370003 | 501(0)(3) | | 11,113 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Donacions | lo applibe enobe in need |
| FANI Foundation Organization | | | | | | | |
| 2520 Davis Blvd, Suite E | | | | | | Product | |
| Naples, FL 34104 | 51-0634737 | 501(c)(3) | 0. | 11,055. | FMV | Donations | To assist those in need |
| | | | | , | | | |
| Vineyard Christian Fellowship | | | | | | | |
| 1928 E. 300th Street | | | | | | Product | |
| Wickliffe, OH 44092 | 34-1422707 | 501(c)(3) | 0. | 11,034. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Captain Hope's Kids, Inc. | | | | | | | |
| 10555 Newkirk Street, #580 | | | | | | Product | |
| Dallas, TX 75220 | 75-2284779 | 501(c)(3) | 0. | 11,017. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Widows Jar Ministries, Inc. | | | | | | _ | |
| 7160 E. 86th Street | == 2005400 | 504 () (2) | | 40.004 | | Product | L |
| Indianapolis, IN 46250 | 75-3205190 | 501(c)(3) | 0. | 10,991. | , F'MV | Donations | To assist those in need |
| Friends of Yates | | | | | | | |
| 1418 Garfield Avenue | | | | | | Product | |
| Kansas City, KS 66104 | 48-0908425 | 501(c)(3) | 0. | 10,921. | FMV | Donations | To assist those in need |
| | 10 0300120 | | 1 | 10,521. | , | | |
| Edinburg Christian Church - A | | | | | | | |
| Small Hand - 210 Center Street - | | | | | | Product | |
| Edinburg, VA 22824 | 54-1098005 | 501(c)(3) | 0. | 10,879. | , FMV | Donations | To assist those in need |
| | | | | · | | | |
| Sankofa Community Outreach | | | | | | | |
| 2580 W. Camp Wisdom Road, Suite 10 | | | | | | Product | |
| Grand Prairie, TX 75052 | 45-5617324 | 501(c)(3) | 0. | 10,726. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| New Bethel Sounds of Praise | | | | | | | |
| 501 Greyback Road | | | | | | Product | |
| Summerville, SC 29483 | 57-1080203 | 501(c)(3) | 0. | 10,584. | , FMV | Donations | To assist those in need |

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| Will County Center For Community | | | | | | | |
| Concerns - 304 W. Scott Street - | | | | | | Product | |
| Joliet, IL 60432 | 36-3473739 | 501(c)(3) | 0. | 10,579. | , FMV | Donations | To assist those in need |
| · | | | | , | | | |
| Interfaith Human Services of | | | | | | | |
| Putnam - 53 Grove Street - Putnam, | | | | | | Product | |
| CT 06260 | 06-1587623 | 501(c)(3) | 0. | 10,454. | FMV | Donations | To assist those in need |
| New Bethel Temple Church of God in | | | | | | | |
| Christ - 5344 Longwood Drive - | | | | | | Product | |
| Memphis, TN 38111 | 62-1349077 | 501(c)(3) | 0. | 10,447. | FMV | Donations | To assist those in need |
| | 02 2025077 | | | 20,117 | | | 10 455120 011020 111 11004 |
| Habitat for Humanity of Summit | | | | | | | |
| County - 2301 Romig Road - Akron, | | | | | | Product | |
| OH 44320 | 34-1518873 | 501(c)(3) | 0. | 10,408. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Latin American Project | | | | | | | |
| 2921 S. Orlando Drive, #210 | 00 0364500 | F01/ \/2\ | | 10 255 | | Product | |
| Sanford, FL 32773 | 90-0364788 | 501(c)(3) | 0. | 10,375. | , F'MV | Donations | To assist those in need |
| Community Life Line | | | | | | | |
| 1919 State Street | | | | | | Product | |
| East St. Louis, IL 62205 | 36-4552773 | 501(c)(3) | 0. | 10,228. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Bleeding Disorders Alliance | | | | | | | |
| Illinois - 210 S. DesPlaines - | 26 0200156 | F01/ \/2\ | | 10 102 | | Product | |
| Chicago, IL 60661 | 36-2390156 | 501(c)(3) | 0. | 10,193. | ,FMV | Donations | To assist those in need |
| AIDS Services Center, Inc. | | | | | | | |
| 6003 Sunnyslope Avenue | | | | | | Product | |
| Van Nuys, CA 91401 | 95-4165358 | 501(c)(3) | 0. | 10,170. | FMV | Donations | To assist those in need |
| • | | | | , | | | |
| Star of Hope Mission | | | | | | | |
| PO Box 4052, 6897 Ardmore | | | | | | Product | |
| Houston, TX 77054 | 74-1152599 | 501(c)(3) | 0. | 10,166. | FMV | Donations | To assist those in need |

Schedule I (Form 990)

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | nedule I (Form 990), Pa | art II.) | |
|--|------------------|-------------------------------|--------------------------|---|--|--|---|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Palace of Joy C&S Church | | | | | | | |
| 199 Schenectady Avenue | | | | | | Product | |
| Brooklyn, NY 11213 | 20-4929457 | 501(c)(3) | 0. | 10,142. | .FMV | Donations | To assist those in need |
| United Way Of San Antonio & Bexar | | | | | | | |
| County - 700 S. Alamo Street - San | | | | | | Product | |
| Antonio, TX 78205 | 74-1272381 | 501(c)(3) | 0. | 10,124. | FMV | Donations | To assist those in need |
| Autism Society of Greater Orlando, | /1 12/2001 | | 1 | 10,221 | , | | |
| Inc 13125 S. John Young | | | | | | | |
| Parkway, #952, c/o Extra Space | | | | | | Product | |
| Storage - Orlando, FL 32837 | 59-3407128 | 501(c)(3) | 0. | 10,107. | , FMV | Donations | To assist those in need |
| | | | | · | | | |
| United Way Of The National Capital | | | | | | | |
| Area - 843 North President Street | | | | | | Product | |
| - Jackson, MS 39202 | 64-0303075 | 501(c)(3) | 0. | 9,963. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Communities In Schools Of | | | | | | | |
| Tennessee - 401 Commerce Street - | | | | | | Product | |
| Nashville, TN 37219 | 46-1196944 | 501(c)(3) | 0. | 9,943. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Osborne Association, Inc. | | | | | | Product | |
| 809 Westchester Avenue | 13-5563028 | 501(c)(3) | 0. | 9,943. | EM2 | Donations | To assist those in need |
| Bronx, NY 10455 | 13-3303028 | 501(0)(3) | 1 | 3,343. | , FMV | Donacions | To assist those in need |
| School District of Osceola County | | | | | | | |
| FL 1200 Vermont Avenue - Saint | | | | | | Product | |
| Cloud, FL 34769 | | 501(c)(3) | 0. | 9,943. | FMV | Donations | To assist those in need |
| | | | - | , | | | |
| The United Way Of Northeast | | | | | | | |
| Louisiana, Inc 1201 Hudson Lane | | | | | | Product | |
| - Monroe, LA 71201 | 72-0498515 | 501(c)(3) | 0. | 9,943. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Compassionate Hands, Inc. | | | | | | | |
| PO Box 1112 | | | | | | Product | |
| Ellenwood, GA 30294 | 58-2330096 | 501(c)(3) | 0. | 9,897. | , FMV | Donations | To assist those in need |

Schedule I (Form 990)



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|--|----------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
| Golden Care Plus | | | | | | | |
| 680 Broadway Avenue, #601 | | | | | | Product | |
| Paterson, NJ 07514 | 20-2040399 | 501(c)(3) | 0. | 9,845. | FMV | Donations | To assist those in need |
| Pleasant Grove Church | | | | | | | |
| PO Box 706 | | | | | | Product | |
| Grand Junction, TN 38039 | 86-1139859 | 501(c)(3) | 0. | 9,733. | FMV | Donations | To assist those in need |
| KYJO Enterprises, Inc. | | | | | | | |
| 114 E. Shaw Avenue, #210 | | | | | | Product | |
| Fresno, CA 93710 | 16-1772058 | 501(c)(3) | 0. | 9,513. | FMV | Donations | To assist those in need |
| Michael S Dream Foundation | | | | | | | |
| 705 Norwood House Road | | | | | | Product | |
| Downingtown, PA 19335 | 45-4714638 | 501(c)(3) | 0. | 9,481. | FMV | Donations | To assist those in need |
| , | | | | , , | | | |
| Boys & Girls Club of the Highland | | | | | | | |
| 709 Northington Street | | | | | | Product | |
| Burnet, TX 78611 | 74-2907284 | 501(c)(3) | 0. | 9,434. | FMV | Donations | To assist those in need |
| YMCA of the East Bay | | | | | | | |
| 2330 Broadway | | | | | | Product | |
| Oakland, CA 94612 | 94-1156317 | 501(c)(3) | 0. | 9,408. | FMV | Donations | To assist those in need |
| One Small Step | | | | | | | |
| 1100 N. Alma School Road, #9, | | | | | | Product | |
| Chandler, AZ 85224 | 26-2024218 | 501(c)(3) | 0. | 9,367. | FMV | Donations | To assist those in nee |
| | | | | | | | |
| Lookingglass Theatre Company | | | | | | | |
| 875 N. Michigan Avenue, Suite 1430 | | | | | | Product | |
| Chicago, IL 60611 | 36-3653114 | 501(c)(3) | 0. | 9,343. | FMV | Donations | To assist those in nee |
| Community Homeownership Center, | | | | | | | |
| Inc 1284 W. 20th Street - | | | | | | Product | |
| Jacksonville, FL 32209 | 36-4646012 | 501(c)(3) | 0. | 9,338. | FMV | Donations | To assist those in nee |

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| Bring Hanah Home, Inc. | | | | | | | |
| PO Box 113 | | | | | | Product | |
| Bloomington, IN 47402 | 45-3805846 | 501(c)(3) | 0. | 9,247. | ,FMV | Donations | To assist those in need |
| Interfaith Emergency Services, | | | | | | | |
| Inc 450 NW 2nd Street - Ocala, | | | | | | Product | |
| FL 34475 | 59-2349840 | 501(c)(3) | 0. | 9,146. | ,FMV | Donations | To assist those in need |
| The Salvation Army | | | | | | | |
| 218 Fourth Street | | | | | | Product | |
| Cynthiana, KY 41031 | 58-0660607 | 501(c)(3) | 0. | 9,121. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Sisters of Hope Community Outreach | | | | | | | |
| 440 Front Street | 45-3082984 | E01/a)/3) | 0. | 0 070 | EM7 | Product Donations | ma assist these in mand |
| Garrett, KY 41630 | 45-3062964 | 501(c)(3) | 1 | 8,978. | ,FMV | Donacions | To assist those in need |
| Jewish Learning Center-OHR | | | | | | | |
| Menachem Mendel - 411 W. 41st | | | | | | Product | |
| Street - Miami, FL 33140 | 65-0808208 | 501(c)(3) | 0. | 8,970. | , FMV | Donations | To assist those in need |
| National Stuttering Association | | | | | | | |
| 119 W. 40th Street, 14th Floor | | | | | | Product | |
| New York, NY 10018 | 94-2420533 | 501(c)(3) | 0. | 8,902. | FMV | Donations | To assist those in need |
| , | | | | ,,,,,, | | | |
| YMCA of the Pikes Peak Region | | | | | | | |
| 316 North Tejon | | | | | | Product | |
| Colorado Springs, CO 80903 | 84-0404266 | 501(c)(3) | 0. | 8,888. | FMV | Donations | To assist those in need |
| nonPareil Institute | | | | | | | |
| 5240 Tennyson Parkway, Suite 105 | | | | | | Product | |
| Plano, TX 75024 | 26-3351005 | 501(c)(3) | 0. | 8,784. | , FMV | Donations | To assist those in need |
| • | | | | , | | | |
| Girl Scouts of Northern California | | | | | | | |
| 1650 Harbor Bay Parkway, #100 | | | | | | Product | |
| Alameda, CA 94502 | 94-1551410 | 501(c)(3) | 0. | 8,771. | , FMV | Donations | To assist those in need |

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| National Network of Abortion Funds | | | | | | | |
| 250 W. Continental Rd, #500 | | | | | | Product | |
| Green Valley, AZ 85622 | 45-2824469 | 501(c)(3) | 0. | 8,735. | EM77 | Donations | To assist those in need |
| Green variey, AZ 03022 | 43-2024403 | 501(0)(3) | 1 | 0,733. | FHV | Donacions | To assist those in need |
| Oorah, Inc. | | | | | | | |
| 1805 Swarthmore Avenue | | | | | | Product | |
| Lakewood, NJ 08701 | 22-3746051 | 501(c)(3) | 0. | 8,690. | FMV | Donations | To assist those in need |
| | | | | ,,,,,,, | , | | |
| Iglesia Wesleyana Cristo Te Ama | | | | | | | |
| 125 W. Wilson Street | | | | | | Product | |
| Mt. Airy, NC 27030 | 32-0097118 | 501(c)(3) | 0. | 8,680. | , FMV | Donations | To assist those in need |
| International Society of Jack | | | | , | | | |
| Daniels Collectors - 16615 Keegans | | | | | | | |
| Ridge Way Drive - Houston, TX | | | | | | Product | |
| 77083 | 26-3363942 | 501(c)(3) | 0. | 8,576. | , FMV | Donations | To assist those in need |
| | | | | , | | | |
| Rujohn Foundation | | | | | | | |
| 10235 W. Sample Rd, #205 | | | | | | Product | |
| Coral Springs, FL 33065 | 42-1630608 | 501(c)(3) | 0. | 8,537. | , FMV | Donations | To assist those in need |
| · | | | | • | | | |
| Stanton Housing Authority | | | | | | | |
| 408 East Carpenter | | | | | | Product | |
| Stanton, TX 79782 | 75-6005391 | 501(c)(3) | 0. | 8,490. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Reading Recreation Commission | | | | | | | |
| 320 S. 3rd Street | | | | | | Product | |
| Reading, PA 19602 | 38-3860043 | 501(c)(3) | 0. | 8,440. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Veterans Assistance Foundation, | | | | | | | |
| Inc 312 Superior Avenue - | | | | | | Product | |
| Tomah, WI 54660 | 39-1798221 | 501(c)(3) | 0. | 8,388. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Carpenter's Shop Center | | | | | | | |
| 1601 University Boulevard N | | | | | | Product | |
| Jacksonville, FL 32211 | 20-2828807 | 501(c)(3) | 0. | 8,375. | , FMV | Donations | To assist those in need |

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| Hillsborough County Foster Parent | | | | | | | |
| Association - 9391 N. Florida | | | | | | Product | |
| Avenue - Tampa, FL 33612 | 59-1721045 | 501(c)(3) | 0. | 8,360. | ,FMV | Donations | To assist those in need |
| | | | | | | | |
| Volunteers of America North | | | | | | D 3 b | |
| Louisiana - 4521 Jamestown, #5 - | TO 1000053 | F01 () (2) | | | | Product | |
| Baton Rouge, LA 70808 | 72-1020853 | 501(c)(3) | 0. | 8,232. | , FMV | Donations | To assist those in need |
| Hands of Hope Outreach | | | | | | | |
| 1636 Armstrong Avenue | | | | | | Product | |
| San Francisco, CA 94124 | 90-0580381 | 501(c)(3) | 0. | 8,201. | FMV | Donations | To assist those in need |
| The Family Nurturing Center | | | | | | | |
| Jackson County Children's Relief - | | | | | | | |
| 212 N. Oakdale Avenue - Medford, | | | | | | Product | |
| OR 97501 | 16-1726574 | 501(c)(3) | 0. | 8,187. | FMV | Donations | To assist those in need |
| Partnerships for America | | | | | | | |
| 5475 NW St. James Drive | | | | | | Product | |
| Port St. Lucie, FL 34983 | 27-3181777 | 501(c)(3) | 0. | 8,169, | FMV | Donations | To assist those in need |
| , | | | | , , , , , , | | | |
| Bishops Creek Development Corp. | | | | | | | |
| 3500 W. Mother Daniels Way | | | | | | Product | |
| Milwaukee, WI 53209 | 20-1150352 | 501(c)(3) | 0. | 8,155. | FMV | Donations | To assist those in need |
| Ministerial Alliance of Grove | | | | | | | |
| Oklahoma - PO Box 451626 - Grove, | | | | | | Product | |
| OK 74345 | 73-1491982 | 501(c)(3) | 0. | 7,993. | FMV | Donations | To assist those in need |
| 33, 131, 32 | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| Mad River Lions Club Community | | | | | | | |
| Outreach - 846 Crestmont Drive - | | | | | | Product | |
| Dayton, OH 45431 | 31-1713334 | 501(c)(3) | 0. | 7,941. | FMV | Donations | To assist those in need |
| Friends of Chahad on Campus | | | | | | | |
| Friends of Chabad on Campus 7018 Forsyth Blvd, #1E | | | | | | Product | |
| St. Louis, MO 63105 | 34-2049857 | 501(c)(3) | 0. | 7,913, | EM7/ | Donations | To assist those in need |
| DC. HOUTS, NO 03103 | 34 2043037 | Por(c/(3/ | 1 0. | 1,313 | , <u>r</u> v | Poliacions | TO ASSIST CHOSE IN NEED |

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| Retirement Housing Foundation | | | | | | | |
| 911 N. Studebaker Road | | | | | | Product | |
| Long Beach, CA 90815 | 95-2249495 | 501(c)(3) | 0. | 7,885. | EMA | Donations | To assist those in need |
| 20119 2011011, 011 20010 | 70 222727 | | 1 | ,,,,,,,, | , | | |
| Clothes The Deal | | | | | | | |
| PO Box 2170 | | | | | | Product | |
| Downey, CA 90242 | 95-4592893 | 501(c)(3) | 0. | 7,882. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Altus ASYA AFB Youth Center | | | | | | | |
| 1866 West River Drive | | | | | | Product | |
| Altus Air Force Base, OK 73523 | | N/A | 0. | 7,834. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Compass Housing Alliance | | | | | | | |
| 77 South Washington Street | | 504 () (2) | | | L | Product | L |
| Seattle, WA 98104 | 91-0578229 | 501(c)(3) | 0. | 7,666. | ,FMV | Donations | To assist those in need |
| Reginald Edward Holloway McKenzie | | | | | | | |
| Foundation - 1876 Smithfield | | | | | | Product | |
| Avenue - Ellenwood, GA 30294 | 72-1600057 | 501(c)(3) | 0. | 7,644. | FMV | Donations | To assist those in need |
| Trende Ellenweed, en eele | 72 1000037 | 301(0)(0) | | ,,011. | ,,,,,,, | Donastons | lo ubbibe enere in neeu |
| Universal Aid for Children | | | | | | | |
| 1350 E. Sunrise Blvd., Suite #126 | | | | | | Product | |
| Ft. Lauderdale, FL 33304 | 59-1739205 | 501(c)(3) | 0. | 7,644. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Beattyville Housing & Development | | | | | | | |
| Corp, Inc 813 Highway 52 West - | | | | | | Product | |
| Beattyville, KY 41311 | 61-1254002 | 501(c)(3) | 0. | 7,617. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| United Way of Central New York | | | | | | | |
| PO Box 2129 | | | _ | | | Product | |
| Syracuse, NY 13220-2129 | 15-0532073 | 501(c)(3) | 0. | 7,599. | , FMV | Donations | To assist those in need |
| Wildownoog Myogo Child Downlow | | | | | | | |
| Wilderness Trace Child Development Center - 409 Stewarts Lane N - | | | | | | Product | |
| | 61_1230722 | 501(c)(3) | 0. | 7 505 | EM7 | Donations | To assist those in need |
| Danville, KY 40422 | 61-1230722 | hor(c)(2) | <u> </u> | 7,585. | F. 1.1 A | Pollacions | Lo apprac chose in need |

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| Contro Do Ninos Ins | | | | | | | |
| Centro De Ninos, Inc. 4850 East Cesar E. Chavez Avenue | | | | | | Product | |
| Los Angeles, CA 90022 | 95-3146855 | 501(c)(3) | 0. | 7,569. | FMV | Donations | To assist those in need |
| | 70 0110000 | | | ., | | | |
| The Safehouse of Shelby County, | | | | | | | |
| Inc PO Box 275 - Pelham, AL | | | | | | Product | |
| 35124 | 63-1007280 | 501(c)(3) | 0. | 7,457. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Zion Keepers, Inc. | | | | | | | |
| 5428 Field Green Drive | | | | | | Product | |
| Stone Mountain, GA 30088 | 58-2600360 | 501(c)(3) | 0. | 7,446. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Foundations Child Care Center | | | | | | | |
| 1517 Grant Street | 07 1075040 | F01/-\/2\ | | 7 444 | T.V.7 | Product | m |
| Elkhart, IN 46514 | 27-1275848 | 501(c)(3) | 0. | 7,444. | FMV | Donations | To assist those in need |
| Paradise Christian School & | | | | | | | |
| Development Center - 6184 W. 21st | | | | | | Product | |
| Court - Hialeah, FL 33016 | 65-0320987 | 501(c)(3) | 0. | 7,420. | FMV | Donations | To assist those in need |
| , | | | - | , | | | |
| Boys & Girls Clubs of Whatcom | | | | | | | |
| County - 1715 Kentucky Street - | | | | | | Product | |
| Bellingham, WA 98229 | 91-0836427 | 501(c)(3) | 0. | 7,414. | FMV | Donations | To assist those in need |
| | | | | | | | |
| Infant Crisis Services | | | | | | | |
| 4224 N. Lincoln Boulevard | | | | | | Product | |
| Oklahoma City, OK 73105 | 73-1378766 | 501(c)(3) | 0. | 7,408. | FMV | Donations | To assist those in need |
| Habitat fan Humanita af Ossala | | | | | | | |
| Habitat for Humanity of Omaha | | | | | | Dradust | |
| 1701 N. 24th Street | 36_320262F | 501/a)/3\ | 0. | 7 206 | EM77 | Product Donations | To aggist these in need |
| Omaha, NE 68110 | 36-3283625 | 501(c)(3) | 0. | 7,386. | LMA | Dollacions | To assist those in need |
| Save Our History | | | | | | | |
| 5911 East Highland, c/o Fastenal C | | | | | | Product | |
| , 0,0 1 ab condition | | I | 1 | | 1 | Donations | To assist those in need |

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| Catholic Charities San | | | | | | | |
| Bernardino/Riverside - 23623 | | | | | | _ | |
| Sunnymead Boulevard, #E - Moreno | | | | | | Product | |
| Valley, CA 92553 | 95-3516461 | 501(c)(3) | 0. | 7,381. | ,FMV | Donations | To assist those in need |
| Children's Hometown Holiday | | | | | | | |
| 1100 W. Auglaize Street | | | | | | Product | |
| Wapakoneta, OH 45895 | 56-2512415 | 501(c)(3) | 0. | 7,359. | , FMV | Donations | To assist those in need |
| Basket of Hope | | | | | | | |
| 3558 S. Jefferson Avenue | | | | | | Product | |
| St. Louis, MO 63118 | 43-1789081 | 501(c)(3) | 0. | 7,350. | EM7 | Donations | To assist those in need |
| St. Hours, No osiro | 43 1703001 | 501(0)(3) | · · | 7,330. | , | Donacions | TO UBBIBC CHOSE IN HEED |
| Maslow Project | | | | | | | |
| 500 Monroe Street | | | | | | Product | |
| Medford, OR 97501 | 27-0734969 | 501(c)(3) | 0. | 7,339. | FMV | Donations | To assist those in need |
| Junior League of Boca Raton, Inc. | | | | | | | |
| 261 NW 13th Street | | | | | | Product | |
| Boca Raton, FL 33432 | 23-7402731 | 501(c)(3) | 0. | 7,313. | , FMV | Donations | To assist those in need |
| · | | | | , | | | |
| Together We Can Make A Difference | | | | | | | |
| Initiatives - 722 North Perry | | | | | | Product | |
| Street - Napoleon, OH 43545 | 27-0759384 | 501(c)(3) | 0. | 7,313. | , FMV | Donations | To assist those in need |
| The Women and Children's Center of | | | | | | | |
| the Sierras - 255 W. Peckham Lane | | | | | | Product | |
| - Reno, NV 89509 | 80-0159352 | 501(c)(3) | 0. | 7,313. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| House of James | | | | | | | |
| 15957 Halsted Street | | | | | | Product | |
| Harvey, IL 60426 | 65-1190220 | 501(c)(3) | 0. | 7,308. | ,FMV | Donations | To assist those in need |
| Back to School is Cool - Lake | | | | | | | |
| County - 18286 Apshawa Road - | | | | | | Product | |
| Clermont, FL 34715 | 27-2909578 | 501(c)(3) | 0. | 7,295. | FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to Go | vernments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | |
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| Los Angeles Family School | | | | | | | |
| 2646 Griffith Park Boulevard | | | | | | Product | |
| Los Angeles, CA 90039 | 95-2825348 | 501(c)(3) | 0. | 7,276. | EW17 | Donations | To assist those in need |
| HOS Aligeres, CA 90039 | 93-2023340 | 501(0)(3) | 0. | 7,270. | E MV | Donacions | To assist those in need |
| Reaching Our Community's Kids | | | | | | | |
| 2300 E. Gordonville Road | | | | | | Product | |
| Midland, MI 48640 | 38-3541096 | 501(c)(3) | 0. | 7,221. | FMV | Donations | To assist those in need |
| | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| Restoring Hope Ministries - Hope | | | | | | | |
| House - 108 Clark Road, #46 - | | | | | | Product | |
| Naugatuck, CT 06770 | 68-0664346 | 501(c)(3) | 0. | 7,110. | FMV | Donations | To assist those in need |
| | | | | • | | | |
| Jeremiah 29 Foundation | | | | | | | |
| 118 W. Division Street | | | | | | Product | |
| Stilwell, OK 74960 | 27-5047436 | 501(c)(3) | 0. | 7,104. | FMV | Donations | To assist those in need |
| Morehead State University, | | | | · | | | |
| Build-A-Bed Project - 627 E. Main | | | | | | | |
| Street, 204 Education Services | | | | | | Product | |
| Building - Morehead, KY 40351 | 61-1014029 | 501(c)(3) | 0. | 7,000. | FMV | Donations | To assist those in need |
| | | | | | | | |
| St. Vincent DePaul Society St. | | | | | | | |
| Hilary Church - 2750 W. Market | | | | | | Product | |
| Street - Akron, OH 44333 | 04-3723025 | 501(c)(3) | 0. | 7,000. | FMV | Donations | To assist those in need |
| Welter Herring Home Tre | | | | | | | |
| Walter Hoving Home, Inc. | | | | | | Dungdorgh | |
| P.O. Box 194 | 12 2752267 | E01/-\/2\ | | 6 001 | 77.677 | Product | m |
| Garrison, NY 10524 | 13-2753267 | 501(c)(3) | 0. | 6,981. | F.W∧ | Donations | To assist those in need |
| Green Extreme Homes Community | | | | | | | |
| = | | | | | | Product | |
| Development Corp - 2320 King | 45 3643006 | E01/~\/2\ | 0 | 6 050 | EWY. | | ma agaigt these in mand |
| Arthur Blvd - Lewisville, TX 75056 | 45-3642906 | 501(c)(3) | 0. | 6,959. | LWA | Donations | To assist those in need |
| Healing House, Inc | | | | | | | |
| 4400 St. John Avenue | | | | | | Product | |
| 4400 St. John Avenue | | | | | | | |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | |
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| Dornetual Help Home | | | | | | | |
| Perpetual Help Home PO Box 4305 | | | | | | Product | |
| Victoria, TX 77903 | 74-2737837 | 501(c)(3) | 0. | 6,932. | ,FMV | Donations | To assist those in need |
| | | | | | | | |
| Faith Association | | | | | | _ | |
| 4610 Bristol Bay Way, Apartment 30 | | | | | | Product | L |
| Tampa, FL 33619 | 45-0651715 | 501(c)(3) | 0. | 6,914. | ,FMV | Donations | To assist those in need |
| City Reach Ministries | | | | | | | |
| 12236 SW 128 Street | | | | | | Product | |
| Miami, FL 33186 | 20-3251548 | 501(c)(3) | 0. | 6,816, | , FMV | Donations | To assist those in need |
| | | | | , | | | |
| Catholic Charities, Diocese of | | | | | | | |
| Metuchen - 610 Lake Avenue - Bay | | | | | | Product | |
| Head, NJ 08742 | 22-2423496 | 501(c)(3) | 0. | 6,803. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Christ Disciples Int'l Ministries | | | | | | | |
| 772 E. 213th Street | 20-8144855 | E01/a)/3) | 0. | 6 772 | EM7 | Product | m |
| Bronx, NY 10467 | 20-8144855 | 501(c)(3) | 0. | 6,773. | , FMV | Donations | To assist those in need |
| Galveston Sustainable Communities | | | | | | | |
| Alliance - 306 22nd Street, Suite | | | | | | Product | |
| 200 - Galveston, TX 77550 | 45-2473846 | 501(c)(3) | 0. | 6,731. | . FMV | Donations | To assist those in need |
| | | | | | | | |
| Center for Creative Arts, Inc. | | | | | | | |
| 2727 Second Ave, #131 | | | | | | Product | |
| Detroit, MI 48201 | 58-2598993 | 501(c)(3) | 0. | 6,683. | , FMV | Donations | To assist those in need |
| Keia Healthcare | | | | | | | |
| 7609 British Gardens Lane | | | | | | Product | |
| Charlotte, NC 28215 | 20-4972705 | 501(c)(3) | 0. | 6,683, | EMA | Donations | To assist those in need |
| | 20 37/2/03 | 501(0)(0) | · · | 0,000 | , + * | Donacions | 10 applies suose in need |
| Chaldean and Middle Eastern Social | | | | | | | |
| Services - 436 S. Magnolia Ave, | | | | | | Product | |
| #201 - El Cajon, CA 92020 | 20-3502737 | 501(c)(3) | 0. | 6,676. | .FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to GC | | | lilled States (SCII | T | | I |
|--|------------------|-------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
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| Forgiven Ministry, Inc. | | | | | | | |
| PO Box 117 | | | | | | Product | |
| Taylorsville, NC 28681 | 56-2225945 | 501(c)(3) | 0. | 6,612. | FMV | Donations | To assist those in nee |
| Children's Council of San | | | | | | | |
| Francisco - 445 Church Street - | | | | | | Product | |
| San Francisco, CA 94114 | 94-2221305 | 501(c)(3) | 0. | 6,516. | , FMV | Donations | To assist those in nee |
| Young Marines of the Marine Corps | | | | | | | |
| League, Inc 11605 Southeast | | | | | | | |
| McGillivray Boulevard., c/o Elks | | | | | | Product | |
| Lodge #823 - Vancouver, WA 98683 | 38-2346425 | 501(c)(3) | 0. | 6,504. | , FMV | Donations | To assist those in nee |
| | | | | | | | |
| Clothes to Kids of Denver | | | | | | | |
| 2890 S. Colorado Boulevard., Suite | | | | | | Product | |
| Denver, CO 80222 | 26-2148733 | 501(c)(3) | 0. | 6,501. | ,FMV | Donations | To assist those in nee |
| News Therepoputia Community Inc | | | | | | | |
| Nova Therapeautic Community, Inc. 8502 Mormon Bridge Road | | | | | | Product | |
| Omaha, NE 68152 | 47-0671877 | 501(c)(3) | 0. | 6,497. | EMA | Donations | To assist those in nee |
| omana, NE 00132 | 47 0071077 | 501(0)(3) | | 0,437 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Donacions | TO ABBIBE CHOSE IN NEC |
| Schekinah Baptist Church | | | | | | | |
| 839 NW 206 Street | | | | | | Product | |
| Miami, FL 33169 | 27-3168730 | 501(c)(3) | 0. | 6,424. | .FMV | Donations | To assist those in nee |
| | | | | | | | |
| Safe Hands, Inc. | | | | | | | |
| 9605 Clark Road #500, | | | | | | Product | |
| Dallas, TX 75249 | 75-2937202 | 501(c)(3) | 0. | 6,413. | , FMV | Donations | To assist those in nee |
| | | | | | | | |
| Pretty Single Mothers | | | | | | | |
| 5042 Wilshire Boulevard., Suite 87 | 0= 0=0::=: | 504 () (2) | _ | | L | Product | L |
| Los Angeles, CA 90036 | 27-0734451 | 501(c)(3) | 0. | 6,412. | , F'MV | Donations | To assist those in nee |
| Whole Man Ministries | | | | | | | |
| P.O. Box 21173 | | | | | | Product | |
| Winston-Salem, NC 27120 | 26-0136378 | 504 () (2) | 0. | 6,410. | L | Donations | To assist those in nee |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | nedule I (Form 990), Pa | art II.) | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Child Development, Inc. | | | | | | | |
| 1936 E. Deere Avenue, Suite 220 | | | | | | Product | |
| Santa Ana, CA 92705 | 77-0008333 | 501(c)(3) | 0. | 6,393. | ,FMV | Donations | To assist those in need |
| Drug Abuse Prevention Center | | | | | | | |
| 2232 South Silverdale Road | | | | | | Product | |
| Castle Rock, WA 98611 | 91-0872574 | 501(c)(3) | 0. | 6,378. | ,FMV | Donations | To assist those in need |
| Latin American Project | | | | | | | |
| 108 SE 4th Street | | | | | | Product | |
| Lees Summit, MO 64063 | 43-1604974 | 501(c)(3) | 0. | 6,358. | , FMV | Donations | To assist those in need |
| Joshua Center for Neurological | | | | | | | |
| Disorders - 400 E. Bannister Road | | | | | | Product | |
| Suite A - Kansas City, MO 64131 | 43-1782066 | 501(c)(3) | 0. | 6,267. | FMV | Donations | To assist those in need |
| Spirit of Sharing | | | | | | | |
| 3355 Mission Avenue, Suite 111 | | | | | | Product | |
| Oceanside, CA 92058 | 20-1931001 | 501(c)(3) | 0. | 6,256. | , FMV | Donations | To assist those in need |
| Community Development Resource | | | | | | | |
| Services - 1503 Rouse Road - | | | | | | Product | |
| Kinston, NC 28504 | 27-2061458 | 501(c)(3) | 0. | 6,219. | , FMV | Donations | To assist those in need |
| Holy Redeemer Church of God in | | | | | | | |
| Christ - 3500 W. Mother Daniels | | | | | | Product | |
| Way - Milwaukee, WI 53209 | 39-1562581 | 501(c)(3) | 0. | 6,217. | , FMV | Donations | To assist those in need |
| New Covenant Christian School | | | | | | | |
| Foundation - 452 Ebenezer Road - | | | | | | Product | |
| Lebanon, PA 17046 | 23-2211039 | 501(c)(3) | 0. | 6,170. | , FMV | Donations | To assist those in need |
| Little Red Wagon Foundation | | | | | | | |
| 9709 Wydella Street | | | | | | Product | |
| Riverview, FL 33569 | 20-2736631 | 501(c)(3) | 0. | 6,129. | , FMV | Donations | To assist those in need |

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|---|-----------------|-------------------------------|--------------------------|-----------------------------------|--|--|---|
| Cedars-Sinai Medical Center | | | | | | | |
| 5500 Wilshire Boulevard, 10th | | | | | | | |
| Floor, Suite CFK 1000 - Los | | | | | | Product | |
| Angeles, CA 90048 | 95-1644600 | 501(c)(3) | 0. | 6,095. | FMV | Donations | To assist those in nee |
| Twice As Nice - Mother & Child | | | | | | | |
| PO Box 302 | | | | | | Product | |
| Lake Villa, IL 60046 | 27-3434770 | 501(c)(3) | 0. | 6,062. | FMV | Donations | To assist those in need |
| Wital Education Tra | | | | | | | |
| Vital Education, Inc. 1503 S. US Highway 301, Suite 25 | | | | | | Product | |
| Tampa, FL 33619 | 65-0519652 | 501(c)(3) | 0. | 6,047. | EM7 | Donations | To assist those in nee |
| Tampa, TE 55015 | 03 0313032 | 501(6)(3) | | 0,047 | , I IIV | Donacions | To applie those in nec |
| Holy Family Services | | | | | | | |
| 5819 N. FM 88 | | | | | | Product | |
| Weslaco, TX 78596 | 74-2282624 | 501(c)(3) | 0. | 6,040. | FMV | Donations | To assist those in nee |
| Community Partners of Tarrant | | | | | | | |
| County - 2700 Ben Avenue - Fort | | | | | | Product | |
| Worth, TX 76103 | 75-2913202 | 501(c)(3) | 0. | 6,038. | FMV | Donations | To assist those in nee |
| Dellutri's Christmas Foundation | | | | | | | |
| 5075 SW 73 Avenue | | | | | | Product | |
| Davie, FL 33314 | 65-0453261 | 501(c)(3) | 0. | 6,030. | FMV | Donations | To assist those in nee |
| Chamberlains Children Center | | | | | | | |
| Chamberlains Children Center 1850 San Benito Street | | | | | | Product | |
| Hollister, CA 95023 | 94-2357401 | 501(c)(3) | 0. | 6,002. | EM7/ | Donations | To assist those in nee |
| | 34-233/4UI | 501(0)(3) | 0. | 0,002. | h. t.t A | Donactons | TO ASSIST CHOSE III Nee |
| Freedom Assembly | | | | | | | |
| 10866 Washington Boulevard | | | | | | Product | |
| Culver City, CA 90232 | 95-4450035 | 501(c)(3) | 0. | 6,000. | FMV | Donations | To assist those in nee |
| Mount Vernon Neighborhood Health | | | | | | | |
| Center, Inc 107 West 4th Street | | | | | | Product | |
| - Mount Vernon, NY 10550 | 13-3315508 | 501(c)(3) | 0. | 5,981. | FMV | Donations | To assist those in nee |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | - |
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| Flowing Wells Extension Program, | | | | | | | |
| Inc 1444 West Prince Road - | | | | | | Product | |
| Tucson, AZ 85705 | 86-0300466 | 501(c)(3) | 0. | 5,966. | ,FMV | Donations | To assist those in need |
| | | | | | | | |
| Hendricks Elementary School | | | | | | | |
| 3400 W. Orange Grove Road | | | | | | Product | |
| Tucson, AZ 85741 | | 501(c)(3) | 0. | 5,966. | FMV | Donations | To assist those in need |
| Homer Davis Elementary | | | | | | | |
| 4250 North Romero Road | | | | | | Product | |
| Tucson, AZ 85705 | | 501(c)(3) | 0. | 5,966. | FMV | Donations | To assist those in need |
| | | | | , | | | |
| United Way of the Midlands | | | | | | | |
| 1805 Harney Street | | | | | | Product | |
| Omaha, NE 68102 | | 501(c)(3) | 0. | 5,966. | FMV | Donations | To assist those in need |
| Gibault, Inc. | | | | | | | |
| 6401 S US Highway 41 | | | | | | Product | |
| Terre Haute, IN 47802 | 35-0868093 | 501(c)(3) | 0. | 5,946. | FMV | Donations | To assist those in need |
| | | | | | | | |
| H.O.P.E. Inc. | | | | | | | |
| 1645 W. 135th Street | 45 5547020 | E01/->/2> | | F 022 | E147 | Product | m |
| Gardena, CA 90249 | 45-5547839 | 501(c)(3) | 0. | 5,933. | , FMV | Donations | To assist those in need |
| Big Sandy Rancheria | | | | | | | |
| 37387 Auberry Mission Road | | | | | | Product | |
| Auberry, CA 93602 | 77-0109394 | 501(c)(3) | 0. | 5,932. | FMV | Donations | To assist those in need |
| Children a Chault Till III | | | | | | | |
| Children & Charity International | | | | | | D | |
| 1614 17th St, NW, Apt 306 | 75 3131645 | E01/~\/3\ | | F 007 | ENG. | Product | ma aaalah hh ! |
| Washington, DC 20009 | 75-3121647 | 501(c)(3) | 0. | 5,927. | ,rm∨ | Donations | To assist those in need |
| Moore 4 You C.D.C. | | | | | | | |
| 982 Hegeman Avenue | | | | | | Product | |
| Brooklyn, NY 11208 | 11-3590766 | 501(c)(3) | 0. | 5,919. | FMV | Donations | To assist those in need |

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| MAD Dads | | | | | | | |
| PO Box 8980 | | | | | | Product | |
| Minneapolis, MN 55408 | 01-0774996 | 501(c)(3) | 0. | 5,876. | ,FMV | Donations | To assist those in need |
| Marie Louise Community Foundation, | | | | | | | |
| Inc 112 SE 23rd Avenue - | | | | | | Product | |
| Boynton Beach, FL 33435 | 20-5248662 | 501(c)(3) | 0. | 5,807. | , FMV | Donations | To assist those in need |
| Community Education Group, Inc. | | | | | | | |
| 3233 Pennsylvania Avenue, SE, | | | | | | Product | |
| Washington, DC 20020 | 52-1853388 | 501(c)(3) | 0. | 5,791. | , FMV | Donations | To assist those in need |
| Tabernacle of Israel Ministries | | | | | | | |
| 115-33 204th Street, 1st Floor | | | | | | Product | |
| Saint Albans, NY 11412 | 46-2686989 | 501(c)(3) | 0. | 5,700. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| The Last Straw Horse Rescue | | | | | | | |
| 6859 W Waddell Drive | | | | | | Product | |
| Golden Valley, AZ 86413 | 27-4274703 | 501(c)(3) | 0. | 5,683. | FMV | Donations | To assist those in need |
| Go4thegoal Foundation | | | | | | | |
| 215 Cuthbert Boulevard | | | | | | Product | |
| Cherry Hill, NJ 08002 | 20-5065314 | 501(c)(3) | 0. | 5,678. | ,FMV | Donations | To assist those in need |
| Making Kids Count | | | | | | | |
| 485 Garver Drive | | | | | | Product | |
| Youngstown, OH 44512 | 27-3159463 | 501(c)(3) | 0. | 5,648. | , FMV | Donations | To assist those in need |
| West Islip Youth Enrichment | | | | | | | |
| Services - PO Box 105 - West | | | | | | Product | |
| Islip, NY 11795 | 11-2832268 | 501(c)(3) | 0. | 5,620. | ,FMV | Donations | To assist those in need |
| Matt Leinart Foundation | | | | | | | |
| 5534 Olive Street | | | | | | Product | |
| Montclair, CA 91763 | 20-4637949 | 501(c)(3) | 0. | 5,569. | FMV | Donations | To assist those in need |

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| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | |
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| Voung Life Chekane | | | | | | | |
| Young Life - Spokane 3223 N. Marguerite Road | | | | | | Product | |
| Spokane, WA 99212 | 84-0385934 | 501(c)(3) | 0. | 5,535. | EM77 | Donations | To assist those in need |
| bpokane, wa 33212 | 04 0303334 | 501(0)(3) | 1 | 3,333. | , r 11 v | Donacions | lo assist those in need |
| Xclaimed Ministries, Inc. | | | | | | | |
| 10871 Western Avenue | | | | | | Product | |
| Stanton, CA 90680 | 20-5961413 | 501(c)(3) | 0. | 5,518. | FMV | Donations | To assist those in need |
| | 20 0302120 | | | 0,020. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 53114313112 | |
| Love A Life, Inc | | | | | | | |
| 4035 Lillian Hall Lane | | | | | | Product | |
| Orlando, FL 32812 | 27-1567762 | 501(c)(3) | 0. | 5,503. | FMV | Donations | To assist those in need |
| | | | | , | | | |
| Second Chance International | | | | | | | |
| Ministries - 4842 Old National | | | | | | Product | |
| Highway - College Park, GA 30337 | 45-4349396 | 501(c)(3) | 0. | 5,490. | , FMV | Donations | To assist those in need |
| | | | | , | | | |
| Geological Society of America | | | | | | | |
| 125 Broad Street, Suite 5 | | | | | | Product | |
| Boston, MA 02110 | 13-1659623 | 501(c)(3) | 0. | 5,453. | , FMV | Donations | To assist those in need |
| | | | | • | | | |
| Agape Ministries of Shelby, Inc. | | | | | | | |
| 215 Merit Drive | | | | | | Product | |
| Shelby, NC 28150 | 35-2242747 | 501(c)(3) | 0. | 5,448. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Prince George High School | | | | | | | |
| 4 South 8th Avenue, Apartment B | | | | | | Product | |
| Hopewell, VA 23860 | | 501(c)(3) | 0. | 5,419. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Fortes Women's Facility | | | | | | | |
| 3330 Cobb Parkway, Suite 324-PMB 2 | | | | | | Product | |
| Acworth, GA 30101 | 58-2535996 | 501(c)(3) | 0. | 5,409. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Anderson School | | | | | | | |
| 10040 Cottonwood Road | | | | | | Product | |
| Bozeman, MT 59718 | 26-4300557 | 501(c)(3) | 0. | 5,319. | , FMV | Donations | To assist those in need |

Schedule I (Form 990)



| Part II Continuation of Grants and Other | Assistance to Go | overnments and Orga | nizations in the U | nited States (Sch | edule I (Form 990), Pa | art II.) | |
|---|------------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Iglacia Cristiana Agana | | | | | | | |
| Iglesia Cristiana Agape 27 N. Mojave Road | | | | | | Product | |
| Las Vegas, NV 89101 | 45-3677490 | 501(c)(3) | 0. | 5,316. | EM7 | Donations | To assist those in need |
| Lub Vogab, NV 09101 | 13 3077130 | 301(0)(0) | | 3,310, | ,,,,,, | Donastons | lo apprise energe in need |
| Lessie Bates Davis Neighborhood | | | | | | | |
| House - 1200 North 13th Street - | | | | | | Product | |
| East St. Louis, IL 62208 | 37-0662522 | 501(c)(3) | 0. | 5,302. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Westcare Gulfcoast-Florida, Inc. | | | | | | | |
| PO. Box 94738 | | | | | | Product | |
| Las Vegas, NV 89193 | 59-3714627 | 501(c)(3) | 0. | 5,261. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Grace United Methodist Church of | | | | | | | |
| Cape Coral - 13 SE 21st Place - | | | | | | Product | L |
| Cape Coral, FL 33990 | 59-1992446 | 501(c)(3) | 0. | 5,245. | ,FMV | Donations | To assist those in need |
| Dathways to Drospority Ins | | | | | | | |
| Pathways to Prosperity, Inc. 900 N. Seacrest Boulevard | | | | | | Product | |
| Boynton Beach, FL 33435 | 27-3550271 | 501(c)(3) | 0. | 5,215. | EW/ | Donations | To assist those in need |
| Boyncon Beach, FE 33433 | 27 3330271 | 501(0)(3) | | 3,213. | , r m v | Donacions | lo assist those in need |
| Butterflies and Wildflowers | | | | | | | |
| 1007 Kaycee Drive | | | | | | Product | |
| Raymore, MO 64083 | 27-1779140 | 501(c)(3) | 0. | 5,201. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Habersham County Senior Center | | | | | | | |
| 217 Scoggins Drive | | | | | | Product | |
| Demorest, GA 30535 | 58-2317890 | 501(c)(3) | 0. | 5,174. | , FMV | Donations | To assist those in need |
| | | | | | | | |
| Sara Institute | | | | | | | |
| 143 East First Street | | | | | | Product | |
| Perris, CA 92570 | 26-2147107 | 501(c)(3) | 0. | 5,171. | ,FMV | Donations | To assist those in need |
| Above Olem Weingenden Meg-1 | | | | | | | |
| Ahavas Olam Weingarden Torah Center - 26101 Stratford Place - | | | | | | Product | |
| | 20-3302399 | 501(c)(3) | 0. | 5 1 <i>6</i> 2 | EM7/ | Donations | To assist those in need |
| Oak Park, MI 48237 | 20-3302339 | hor(c)(2) | <u> </u> | 5,163. | F. 7.1 A | Pollacions | To assist those in need |

Schedule I (Form 990)



| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|-------------------------------|--------------------------|---|--|--|------------------------------------|
| Children's Aid Society | | | | | | | |
| 2141 14th Avenue South | | | | | | Product | |
| Birmingham, AL 35205 | 63-0288823 | 501(c)(3) | 0. | 5,155. | FMV | Donations | To assist those in nee |
| Never Alone Never Afraid | | | | | | | |
| 14 Herkimer Street | | | | | | Product | |
| Mastic, NY 11950 | 11-3493520 | 501(c)(3) | 0. | 5,150. | FMV | Donations | To assist those in need |
| Downtown Outreach Ministries | | | | | | | |
| 414 W. Court Street | | | | | | Product | |
| Flint, MI 45803 | 38-2971961 | 501(c)(3) | 0. | 5,146. | FMV | Donations | To assist those in need |
| Christmas Cheer Agency of Alamance | | | | | | | |
| County - 1018 Valleydale Drive - | | | | | | Product | |
| Burlington, NC 27215 | 31-1645511 | 501(c)(3) | 0. | 5,126. | FMV | Donations | To assist those in nee |
| Heart Ministry Center | | | | | | | |
| 2222 Binney Street | | | | | | Product | |
| Omaha, NE 68110 | 81-0614816 | 501(c)(3) | 0. | 5,101. | FMV | Donations | To assist those in nee |
| Kingdom City Church | | | | | | | |
| 422 Riverwind Drive | | | | | | Product | |
| Pearl, MS 39208 | 75-3127860 | 501(c)(3) | 0. | 5,095. | FMV | Donations | To assist those in need |
| Freedom Ranch, Inc. | | | | | | | |
| PO Box 690657 | | | | | | Product | |
| Tulsa, OK 74169 | 73-1305160 | 501(c)(3) | 0. | 5,044. | FMV | Donations | To assist those in nee |
| Birthday Blessings | | | | | | | |
| 3418 CR 7520 | | | | | | Product | |
| West Plains, MO 65775 | 80-0908097 | 501(c)(3) | 0. | 5,033. | FMV | Donations | To assist those in nee |
| Buddy Cruise, Inc. | | | | | | | |
| 6011 Palomaglade Drive | | | | | | Product | |
| Lithia, FL 33547 | 94-3450962 | 501(c)(3) | 0. | 5,032. | FMV | Donations | To assist those in nee |

Schedule I (Form 990)



| (a) Name and address of | (b) EIN | (c) IRC section | (d) Amount of | (e) Amount of | (f) Method of | (g) Description of | (h) Purpose of grant |
|------------------------------------|------------|-----------------|---------------|------------------------|---|---------------------|-------------------------|
| organization or government | (b) EIN | if applicable | cash grant | non-cash assistance | valuation (book, FMV, appraisal, other) | non-cash assistance | or assistance |
| pilepsy Foundation of San Diego | | | | | | | |
| County - 2055 El Cajon Boulevard - | | | | | | Product | |
| San Diego, CA 92104 | 95-1981182 | 501(c)(3) | 0. | 5,031. | , FMV | 1 | To assist those in need |
| | | | | | | | |
| City Care, Inc. | | | | | | | |
| 2400 General Pershing Boulevard | | 504 () (0) | | | | Product | L |
| Oklahoma City, OK 73107 | 73-1497381 | 501(c)(3) | 0. | 5,029. | , F'MV | Donations | To assist those in need |
| Sathgate Educational Complex | | | | | | | |
| 1595 Bathgate Avenue | | | | | | Product | |
| Bronx, NY 10457 | 69-0210637 | 501(c)(3) | 0. | 5,026. | FMV | Donations | To assist those in need |
| | | | | | | | |
| nfallible Helping Hands | | | | | | | |
| PO Box 170531 | | | | | | Product | |
| filwaukee, WI 53217 | 27-0431058 | 501(c)(3) | 0. | 5,001. | FMV | Donations | To assist those in need |
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Schedule I (Form 990)



| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non- cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---|--------------------------|--------------------------|---------------------------------------|---|--|
| | | | | | |
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| | | | | | |
| Part IV Supplemental Information. Provide the information | equired in Part I, lin | ie 2, Part III, colum | n (b), and any other a | dditional information. | |
| Part I, Line 2: | | | | | |
| In an effort to protect the integrity of our dona | tion programs | for our | | | |
| donors and nonprofits, Good360 is now taking both | reactive and | proactive | | | |
| measures to ensure that member organizations who | are requesting | products | | | |
| From Good360 are appropriate, approved 501(c)(3) | | | | | |
| · | | | | | |
| inancial standing and are using the products rec | eived through | Good360 in | | | |
| an appropriate manner as outlined in Good360's se | curity ad comp | liance | | | |
| agreement which has been signed by the organizati | on in order to | receive | | | |
| these products in addition to initial vetting, we | have a securi | tv and | | | |

Page 2

Schedule I (Form 990) (2014)

Good360

Good360 54-1282616 Schedule I (Form 990) Page 2 Part IV Supplemental Information compliance team that takes the following ongoing monitoring measures a) annual review of charities 990's and financial records to ensure

organization is in good financial standing an follows all appropriate charitable financial reporting standards b) signed security agreements for each order and membership renewal c) routine address check-no shipments to residential addresses d) random distribution list requests made to charities e) surveys regarding use and distribution sent to members f) monthly or quarterly "reminders" sent via email to members regarding Good360's restrictions and terms of use - (storage, distribution and use) g) review delivery vendors quarterly report on residential addresses h) webinars to include security and compliance components to be reviewed with new members.

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

Employer identification number Good360 54-1282616

| | · | | Yes | No |
|------------|---|----|-----|----|
| 1 a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, | | | |
| | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. | | | |
| | First-class or charter travel Housing allowance or residence for personal use | | | |
| | Travel for companions Payments for business use of personal residence | | | |
| | Tax indemnification and gross-up payments Health or social club dues or initiation fees | | | |
| | Discretionary spending account Personal services (e.g., 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 in line 1a? | 2 | | |
| | | | | |
| 3 | Indicate which, if any, of the following the filing 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. | | | |
| | Compensation committee Written employment contract | | | |
| | Independent compensation consultant X Compensation survey or study | | | |
| | Form 990 of other organizations X Approval by the board or compensation committee | | | |
| | | | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing | | | |
| | organization or a related organization: | | | |
| а | Receive a severance payment or change-of-control payment? | 4a | | Х |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | | Х |
| С | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | | Х |
| | 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 in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the revenues of: | | | |
| а | The organization? | 5a | | Х |
| | Any related organization? | 5b | | Х |
| | If "Yes" to line 5a or 5b, describe in Part III. | | | |
| 6 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the net earnings of: | | | |
| а | The organization? | 6a | | Х |
| | Any related organization? | 6b | | Х |
| | If "Yes" to line 6a or 6b, describe in Part III. | | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments | | | |
| | not described in lines 5 and 6? If "Yes," describe in Part III | 7 | | Х |
| 8 | Were any amounts reported in 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 | | Х |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in | | | |
| | Regulations section 53.4958-6(c)? | 9 | | |

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

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014 Good 360 Fage **2**

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 in 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 are not listed on Form 990, Part VII.

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

| | | (B) Breakdown of | W-2 and/or 1099-MI | SC compensation | (C) Retirement and other deferred | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) |
|----------------------|------|--------------------------|---|-------------------------------------|-----------------------------------|-------------------------|------------------------------------|--|
| (A) Name and Title | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | compensation | Denents | (6)(1)-(0) | reported as deferred in prior Form 990 |
| (1) Cindy Hallberlin | (i) | 267,215. | 0. | 0. | 0. | 20,685. | 287,900. | 0. |
| CEO | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (2) Shabab Gruberg | (i) | 159,298. | 0. | 0. | 0. | 13,901. | 173,199. | 0. |
| CIO | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (3) Melissa Lanning | (i) | 143,189. | 0. | 0. | | 14,428. | 157,617. | 0. |
| СМО | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
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| | (i) | | | | | | | |
| | (ii) | | | | | | | |

| Schedule J (Form 990) 2014 Good360 | 54-1282616 | Page 3 |
|---|--|---------------|
| 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. | |
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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.

Good360

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number 54-1282616

Part I Types of Property (d) (a) (b) (c) Check if Number of Noncash contribution Method of determining amounts reported on contributions or applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1a Art - Works of art 1 Art - Historical treasures Art - Fractional interests 3 Books and publications 4,135,045. 4 299,228,480. Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded 9 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles Food inventory 19 Drugs and medical supplies 20 21 Taxidermy Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 Other > (Office suppl. Х 36 2,317,359. FMV 25 25 26 Other Х 1,015,485. 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 IV, 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 is not required to be used for Х exempt purposes for the entire holding period? 30a **b** If "Yes." describe the arrangement in Part II. Х Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a **b** If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) (2014)

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

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 990-EZ.

2014

Open to Public Inspection

Name of the organization

Information about Schedule 0 (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection

Employer identification number

Good360 54-1282616 Form 990, Part VI, Section B, line 11: The federal Form 990 is presented to the Board of Directors before it is filed with the Internal Revenue Service. Form 990, Part VI, Section B, Line 12c: Questionnaire of related party transactions and conflicts of interest is distributed to all Board of Directors, officers and employees with a response requested prior to filing of the federal Form 990 return. Form 990, Part VI, Section B, Line 15a: The Board uses comparability data for CEO comparing the information against similar organizations. Board minutes are taken of deliberations and decisions. Form 990, Part VI, Line 17, List of States receiving copy of Form 990: AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY Form 990, Part VI, Section C, Line 19: Good360 makes its governing documents and conflict of interest policy available upon request. The financial statements are made available through Guidestar and the organization's website.

| Form 886 | 8 (Rev. 1·2014) | | | | | Page 2 | |
|---|--|---------------|--|-----------------------|---|--|--|
| • If you a | are filing for an Additional (Not Automatic) 3-Month E | Extension, o | complete only Part II and check this | s box | | > X | |
| Note. On | ly complete Part II if you have already been granted ar | automatic | 3-month extension on a previously f | led Form | 8868. | | |
| If you a | are filing for an Automatic 3-Month Extension, comp | | | | | | |
| Part II | Additional (Not Automatic) 3-Month | Extensio | n of Time. Only file the origin | al (no c | opies nee | ded). | |
| | | | Enter filer's | identifyir | ng number, | see <u>instructions</u> | |
| Type or | , , | | | | Employer identification number (EIN) or | | |
| print | | | | | | | |
| File by the | | | | | 54-12826 | 516 | |
| due date for filing your | notificer, street, and room of suite no. If a P.O. box, see instructions. | | | Social se | curity numb | er (SSN) | |
| return. See instructions. | i and a second s | | | | | | |
| manachona. | City, town or post office, state, and ZIP code. For a | foreign add | Iress, see instructions. | | | | |
| | Alexandria, VA 22314 | | | | | | |
| | | | | | | | |
| Enter the | Return code for the return that this application is for (| file a separa | te application for each return) | ••••• | | 0 1 | |
| <u> </u> | | | T | | | | |
| Application | | Return | Application | | | Return | |
| Is For | | Code | Is For | | | | |
| Form 990 or Form 990-EZ | | 01 | E 4044 A | | | | |
| Form 990-BL | | 02 | Form 1041-A | | 08 | | |
| Form 4720 (individual) | | 03 | Form 4720 (other than individual) | <u>dividual)</u> | | | |
| Form 990-PF | | 04 | Form 5227 Form 6069 | <u>_</u> | | | |
| Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) | | 05 06 | Form 8870 | | | 11 12 | |
| STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a p | | | | i a rabe f ila | | | |
| 010112 | Michael Avis, CPA | 00 011 00101 | mario di montino di conocioni di conocioni di pro- | rousiy mic | | | |
| ■ The b | ooks are in the care of > 1330 Braddock Place, | Suita 60 | 0 - Alexandria VA 22314 | | | | |
| | none No. ► (703) 299-7566 | Buice or | Fax No. ► | | | | |
| | organization does not have an office or place of busine | es in the Ur | | | | ▶ □ | |
| | is for a Group Return, enter the organization's four dig | | | | | | |
| | | | ach a list with the names and EINs of | | | | |
| | | | 15. 2015 | <u> </u> | 0.0 1110 0.110 | 110,011 10 1011 | |
| | For calendar year2014_, or other tax year beginning, and ending | | | | | | |
| | If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return | | | | | | |
| | Change in accounting period | | | | | | |
| 7 Sta | te in detail why you need the extension | | | | | | |
| | Additional time is needed to gather information necessary to file a | | | | | | |
| COI | mplete and accurate return. | | | | | | |
| | <u> </u> | | | | | | |
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| | | | | | | | |
| 8a If th | nis application is for Forms 990-BL, 990-PF, 990-T, 472 | 0, or 6069, | enter the tentative tax, less any | | | _ | |
| nor | nonrefundable credits. See instructions. | | | 8a | \$ | 0. | |
| b If th | nis application is for Forms 990-PF, 990-T, 4720, or 606 | 69, enter an | y refundable credits and estimated | | | | |
| tax | tax payments made. Include any prior year overpayment allowed as a credit and any amount paid | | | | | | |
| _ | eviously with Form 8868. | | | 8b | \$ | 0. | |
| c Bal | ance due. Subtract line 8b from line 8a. Include your | payment wit | h this form, if required, by using | | | | |
| EF | TPS (Electronic Federal Tax Payment System). See ins | | | 8c | \$ | 0, | |
| | | | st be completed for Part II o | - | | | |
| Under pen | alties of perjury, I declare that I have examined this form, inclu | uding accomp | panying schedules and statements, and to | the best o | f my knowled | ge and belief, | |
| | orrect, and complete, and that I am authorized to prepare this | | | | | , , _ | |
| Signature | Title ▶ | CPA | | Date | >8-1 | Control of the contro | |
| | γ | | | | Form 8 | ชีซีซีซี (Rev. 1-2D14) | |