

Return of Organization Exempt From Income Tax

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

- Do not enter Social Security numbers on this form as it may be made public.
- Information about Form 990 and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning, **2013**, and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C SECOND HARVEST OF SOUTH GEORGIA, INC. 1411 HARBIN CIRCLE VALDOSTA, GA 31601 F Name and address of principal officer: SAME AS C ABOVE	D Employer Identification Number 58-2208545 E Telephone number 229-244-2678 G Gross receipts \$ 31,563,842.
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for subordinates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> H(b) Are all subordinates included? Yes <input type="checkbox"/> No <input type="checkbox"/> If 'No,' attach a list. (see instructions)
J Website: ▶ <u>WWW.FEEDINGSGA.ORG</u>		H(c) Group exemption number ▶
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1996 M State of legal domicile: GA

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: <u>TO PROVIDE FOOD TO THE NEEDY PEOPLE IN SOUTH GEORGIA.</u>			
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3 Number of voting members of the governing body (Part VI, line 1a)	3		9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4		8
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5		54
	6 Total number of volunteers (estimate if necessary)	6		2,007
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		3,148.
	b Net unrelated business taxable income from Form 990-T, line 34	7b		-6,600.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year		Current Year
	9 Program service revenue (Part VIII, line 2g)	24,008,132.		29,278,906.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,868,305.		2,195,342.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,981.		6,413.
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	39,323.		50,459.
		25,917,741.		31,531,120.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	20,973,447.		28,301,789.
	14 Benefits paid to or for members (Part IX, column (A), line 4)			
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,013,139.		1,257,300.
	16a Professional fundraising fees (Part IX, column (A), line 11e)			
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>205,078.</u>			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,937,608.		3,241,419.
Net Assets or Fund Balances	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	24,924,194.		32,800,508.
	19 Revenue less expenses. Subtract line 18 from line 12	993,547.		-1,269,388.
			Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)		7,717,276.		8,575,452.
21 Total liabilities (Part X, line 26)		1,001,123.		3,138,436.
22 Net assets or fund balances. Subtract line 21 from line 20		6,716,153.		5,437,016.

Part II Signature Block

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

Sign Here	Signature of officer <u>FRANK RICHARDS II</u>	Date _____	Title CEO	
	Type or print name and title.			
Paid Preparer Use Only	Print/Type preparer's name _____	Preparer's signature NON-PAID PREPARER	Date _____	Check <input type="checkbox"/> if self-employed PTIN _____
	Firm's name ▶ _____	Firm's address ▶ _____		Firm's EIN ▶ _____
	Phone no. _____			_____
	May the IRS discuss this return with the preparer shown above? (see instructions) Yes <input type="checkbox"/> No <input type="checkbox"/>			

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO PROVIDE FOOD TO THE NEEDY PEOPLE IN SOUTH GEORGIA.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 31,461,601. including grants of \$) (Revenue \$)

PRODUCT COLLECTION, STORAGE AND DISTRIBUTION

THE ACTIVITIES CONSIST OF RECEIVING DONATED FOOD ITEMS WHICH ARE CLEANED AND REPACKAGED, IF NECESSARY. THE FOOD ITEMS ARE DISTRIBUTED TO OTHER NOT-FOR-PROFIT ORGANIZATIONS, WHICH IN TURN PROVIDE FOOD TO THE HUNGRY AND NEEDY. THE FOOD BANK IS OPEN FIVE DAYS A WEEK, FIFTY-TWO WEEKS A YEAR, EXCLUDING HOLIDAYS, AND HAS FOUR LOCATIONS. THE ORGANIZATION HELPS OVER FIVE HUNDRED PROGRAMS. FYE 12/31/2013, JUST OVER 18 MILLION POUNDS OF FOOD ITEMS WERE DISTRIBUTED.

4b (Code:) (Expenses \$ 520,552. including grants of \$) (Revenue \$ 967,138.)

KIDS CAFE PROGRAM

THE KIDS CAFE PROGRAM PROVIDES AFTER SCHOOL MEALS TO CHILDREN WHO ATTEND PARTNER SITES WITH THE FOOD BANK. EACH CHILD RECEIVES AN HOUR OF HOMEWORK ASSISTANCE AS WELL. THIS PROGRAM IS FUNDED BY CACFP.

4c (Code:) (Expenses \$ 29,011. including grants of \$) (Revenue \$)

TEACHER'S HARVEST PROGRAM

THIS PROGRAM PROVIDES FREE LEARNING SUPPLIES TO TEACHER'S IN AT RISK SCHOOLS TO USE IN THEIR CLASSROOMS. FOR A SCHOOL TO QUALIFY, AT LEAST 80% OF THE STUDENTS MUST BE ENROLLED IN THE FEDERAL FREE AND REDUCED LUNCH PROGRAM.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 32,011,164.

Part IV Checklist of Required Schedules

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

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

BAA

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. <input type="text" value="6"/>		
1 b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. <input type="text" value="0"/>		
1 c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? <input type="checkbox"/>		X
2 a	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. <input type="text" value="54"/>		
2 b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <input type="checkbox"/>	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year? <input type="checkbox"/>	X	
3 b	If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O. <input type="checkbox"/>	X	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? <input type="checkbox"/>		X
4 b	If 'Yes,' enter the name of the foreign country: <input type="text"/> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? <input type="checkbox"/>		X
5 b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? <input type="checkbox"/>		X
5 c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? <input type="checkbox"/>		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? <input type="checkbox"/>		X
6 b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? <input type="checkbox"/>		
7	Organizations that may receive deductible contributions under section 170(c).		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? <input type="checkbox"/>		X
7 b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided? <input type="checkbox"/>		
7 c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? <input type="checkbox"/>		X
7 d	If 'Yes,' indicate the number of Forms 8282 filed during the year. <input type="text"/>		
7 e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/>		X
7 f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/>		X
7 g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? <input type="checkbox"/>		
7 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? <input type="checkbox"/>		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? <input type="checkbox"/>		
9	Sponsoring organizations maintaining donor advised funds.		
9 a	Did the organization make any taxable distributions under section 4966? <input type="checkbox"/>		
9 b	Did the organization make a distribution to a donor, donor advisor, or related person? <input type="checkbox"/>		
10	Section 501(c)(7) organizations. Enter:		
10 a	Initiation fees and capital contributions included on Part VIII, line 12. <input type="text"/>		
10 b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. <input type="text"/>		
11	Section 501(c)(12) organizations. Enter:		
11 a	Gross income from members or shareholders. <input type="text"/>		
11 b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) <input type="text"/>		
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? <input type="checkbox"/>		
12 b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. <input type="text"/>		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13 a	Is the organization licensed to issue qualified health plans in more than one state? <input type="checkbox"/>		
Note. See the instructions for additional information the organization must report on Schedule O.			
13 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. <input type="text"/>		
13 c	Enter the amount of reserves on hand. <input type="text"/>		
14 a	Did the organization receive any payments for indoor tanning services during the tax year? <input type="checkbox"/>		X
14 b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O. <input type="checkbox"/>		

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.

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ NONE
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make 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 makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
 ▶ FRANK RICHARDS 1411 HARBIN CIRCLE VALDOSTA GA 31601 229-244-2678

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JEROME TUCKER BOARD MEMBER	0 0							0.	0.	0.
(2) FRED WALKER BOARD MEMBER	0 0							0.	0.	0.
(3) DR. CHET BALLARD CHAIRMAN	0 0							0.	0.	0.
(4) ELIZA MCCALL CMO	45 0							39,963.	0.	6,346.
(5) JIM TUNISON TREASURER	0 0							0.	0.	0.
(6) BURKE MURPH II BOARD MEMBER	0 0							0.	0.	0.
(7) PHYLLIS HIERS BOARD MEMBER	0 0							0.	0.	0.
(8) WILLIAM HOLLAND BOARD ATTORNEY	0 0							0.	0.	0.
(9) JOANN JONES SECRETARY	0 0							0.	0.	0.
(10) FRANKLIN J RICHARDS II PRESIDENT & CEO	45 0	X		X				161,093.	0.	57,227.
(11) EMILY R BROOME GARRISON CFO	45 0			X				80,432.	0.	8,423.
(12) WILBURN O. ROBINSON COO	45 0			X				62,769.	0.	18,611.
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15) -----										
(16) -----										
(17) -----										
(18) -----										
(19) -----										
(20) -----										
(21) -----										
(22) -----										
(23) -----										
(24) -----										
(25) -----										
1 b Sub-total							344,257.	0.	90,607.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							344,257.	0.	90,607.	
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 1										

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a 45,574.				
	b Membership dues	1 b				
	c Fundraising events	1 c 20,679.				
	d Related organizations	1 d 1,110,110.				
	e Government grants (contributions)	1 e 1,813,813.				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 26,288,730.				
	g Noncash contributions included in lines 1a-1f: \$	25,818,405.				
	h Total. Add lines 1a-1f	▶ 29,278,906.				
PROGRAM SERVICE REVENUE	2 a <u>SHARED MAINTENANCE FEES</u>	Business Code 624200	2,107,816.	2,107,816.		
	b <u>MEMBERSHIP DUES & ASSESSMENTS</u>		34,600.		34,600.	
	c <u>DELIVERY & INCIDENTAL FEE</u>	624200	34,476.	34,476.		
	d <u>MEMBER AGENCY CATERING</u>	722320	18,450.	18,450.		
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f	▶	2,195,342.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		3,313.		3,313.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other		3,100.		
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)		3,100.		
	d Net gain or (loss)	▶	3,100.	3,100.		
	8 a Gross income from fundraising events (not including.. \$ 20,679. of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b	2,055.		
c Net income or (loss) from fundraising events		▶	-2,055.		-2,055.	
9 a Gross income from gaming activities. See Part IV, line 19	a	42,432.				
	b Less: direct expenses	b	30,667.			
	c Net income or (loss) from gaming activities	▶	11,765.		-30,667.	
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue		Business Code				
11 a <u>PALLET RECYCLING</u>	900099	21,810.		21,810.		
b <u>OTHER INCOME</u>	900004	9,207.		9,207.		
c <u>RECYCLING</u>	900099	6,584.		6,584.		
d All other revenue	WKS	3,148.		3,148.		
e Total. Add lines 11a-11d	▶	40,749.				
12 Total revenue. See instructions	▶	31,531,120.	2,163,842.	3,148.	42,792.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	27,212,874.	27,212,874.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	1,088,915.	1,088,915.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	434,864.	43,468.	219,651.	171,745.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	693,796.	657,122.	22,770.	13,904.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	39,171.	26,048.	7,577.	5,546.
10 Payroll taxes	89,469.	59,595.	17,174.	12,700.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	19,000.		19,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	392.		392.	
g Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,171.		2,171.	
12 Advertising and promotion	8,196.			8,196.
13 Office expenses	82,730.		82,730.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	41,566.		41,566.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,208.		2,208.	
20 Interest	27,591.	10,058.	17,533.	
21 Payments to affiliates	20,114.	9,690.	10,424.	
22 Depreciation, depletion, and amortization	235,736.	212,975.	22,761.	
23 Insurance	20,180.		20,180.	
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 O.)				
a <u>PURCH FOOD - SNAP, NET AFFIL</u>	667,119.	667,119.		
b <u>WAREHOUSE EXPENSE</u>	528,981.	528,981.		
c <u>KIDS CAFE</u>	520,552.	520,552.		
d <u>TRANSPORTATION</u>	498,365.	498,365.		
e All other expenses	566,518.	475,402.	98,129.	-7,013.
25 Total functional expenses. Add lines 1 through 24e	32,800,508.	32,011,164.	584,266.	205,078.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash – non-interest-bearing	888,359.	1	1,054,356.
	2 Savings and temporary cash investments	271,219.	2	240,917.
	3 Pledges and grants receivable, net	147,813.	3	287,721.
	4 Accounts receivable, net	30,356.	4	46,001.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,423,785.		
	b Less: accumulated depreciation	10b 1,512,132.	1,893,974.	10c 1,911,653.
	11 Investments – publicly traded securities		11	
	12 Investments – other securities. See Part IV, line 11		12	
	13 Investments – program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	4,485,555.	15	5,034,804.
16 Total assets. Add lines 1 through 15 (must equal line 34)	7,717,276.	16	8,575,452.	
LIABILITIES	17 Accounts payable and accrued expenses	200,138.	17	671,638.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	570,693.	23	2,408,428.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	230,292.	25	58,370.
	26 Total liabilities. Add lines 17 through 25	1,001,123.	26	3,138,436.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	6,142,368.	27	4,660,957.
	28 Temporarily restricted net assets	573,785.	28	776,059.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	6,716,153.	33	5,437,016.
34 Total liabilities and net assets/fund balances	7,717,276.	34	8,575,452.	

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Form 990 (2013)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	31,531,120.
2	Total expenses (must equal Part IX, column (A), line 25)	2	32,800,508.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,269,388.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,716,153.
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) SEE SCHEDULE O	9	-9,749.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,437,016.

Part XII Financial Statements and Reporting

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

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

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SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization SECOND HARVEST OF SOUTH GEORGIA, INC.	Employer identification number 58-2208545
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III – Functionally integrated
 - d Type III – Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11 g (i)	
(ii) A family member of a person described in (i) above?	11 g (ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11 g (iii)	

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)	1,624,605.	26261785.	24796637.	24197054.	29205765.	106085846.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
4 Total. Add lines 1 through 3.	1,624,605.	26261785.	24796637.	24197054.	29205765.	106085846.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						0.
6 Public support. Subtract line 5 from line 4.						106085846.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4.	1,624,605.	26261785.	24796637.	24197054.	29205765.	106085846.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	7,524.	3,660.	1,656.	1,981.	3,313.	18,134.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.	-10,093.	-5,494.	-1,717.	-24,280.	-6,600.	-48,184.
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.) SEE PART IV.	11,011.	11,473.	5,735.	30,645.	37,601.	96,465.
11 Total support. Add lines 7 through 10.						106152261.
12 Gross receipts from related activities, etc (see instructions).					12	0.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here .						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)).	14	99.94 %
15 Public support percentage from 2012 Schedule A, Part II, line 14.	15	99.94 %
16a 33-1/3% support test – 2013. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	<input checked="" type="checkbox"/>	
b 33-1/3% support test – 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test – 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
b 10%-facts-and-circumstances test – 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.	<input type="checkbox"/>	

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

Calendar year (or fiscal yr beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 IV.)						
13 Total Support. (Add lns 9,10c, 11 and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17.	18	%

19a 33-1/3% support tests – 2013. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization.

b 33-1/3% support tests – 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization.

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

Part IV

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).

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	2013	2012	2011	2010	2009
MISCELLANEOUS	\$ 37,601.	\$ 30,645.	\$ 5,735.	\$ 11,473.	\$ 11,011.
TOTAL	<u>\$ 37,601.</u>	<u>\$ 30,645.</u>	<u>\$ 5,735.</u>	<u>\$ 11,473.</u>	<u>\$ 11,011.</u>

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

PUBLIC DISCLOSURE COPY
Schedule of Contributors

OMB No. 1545-0047

2013

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

Name of the organization SECOND HARVEST OF SOUTH GEORGIA, INC.	Employer identification number 58-2208545
--	--

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

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

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules

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

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year. ▶ \$ _____

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) 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).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, Schedule B (Form 990, 990-EZ, or 990-PF) (2013) **or 990-PF.**

Name of organization SECOND HARVEST OF	Employer identification number 58-2208545
--	---

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	----- ----- -----	\$ 1,094,555.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	----- ----- -----	\$ 8,193,921.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	----- ----- -----	\$ 1,396,214.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	----- ----- -----	\$ 863,135.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	----- ----- -----	\$ 1,233,870.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	----- ----- -----	\$ 2,434,709.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization SECOND HARVEST OF	Employer identification number 58-2208545
--	---

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	----- ----- -----	\$ 710,324.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	----- ----- -----	\$ 805,522.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9	----- ----- -----	\$ 939,265.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
10	----- ----- -----	\$ 794,262.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

SECOND HARVEST OF

58-2208545

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	FOOD INVENTORY ----- ----- -----	\$ 413,287.	VARIOUS
2	FOOD INVENTORY ----- ----- -----	\$ 8,193,921.	VARIOUS
3	FOOD INVENTORY ----- ----- -----	\$ 1,396,214.	VARIOUS
4	FOOD INVENTORY ----- ----- -----	\$ 863,135.	VARIOUS
5	FOOD INVENTORY ----- ----- -----	\$ 1,233,870.	VARIOUS
6	FOOD INVENTORY ----- ----- -----	\$ 2,434,709.	VARIOUS

BAA

Name of organization

Employer identification number

SECOND HARVEST OF

58-2208545

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	FOOD INVENTORY ----- ----- -----	\$ 710,324.	VARIOUS
8	FOOD INVENTORY ----- ----- -----	\$ 805,522.	VARIOUS
9	FOOD INVENTORY ----- ----- -----	\$ 939,265.	VARIOUS
10	FOOD INVENTORY ----- ----- -----	\$ 794,262.	
-----	----- ----- -----	\$	-----
-----	----- ----- -----	\$	-----

Name of organization: **SECOND HARVEST OF** Employer identification number: **58-2208545**

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8) or (10)

organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ **N/A**

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

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

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 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

2013

Open to Public Inspection

Name of the organization

Employer identification number

SECOND HARVEST OF
SOUTH GEORGIA, INC.

58-2208545

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

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

Part II Conservation Easements.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements	2 a
b Total acreage restricted by conservation easements	2 b
c Number of conservation easements on a certified historic structure included in (a)	2 c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2 d

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

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

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

Yes No

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

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

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

Yes No

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

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues 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 gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If 'Yes,' explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1 c |
| d Additions during the year | 1 d |
| e Distributions during the year | 1 e |
| f Ending balance | 1 f |
- 2 a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Yes No

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance	9,893.	8,833.	9,008.	7,953.	0.
b Contributions					
c Net investment earnings, gains, and losses	2,586.	1,060.	175.	1,155.	
d Grants or scholarships					
e Other expenditures for facilities and programs				0.	
f Administrative expenses	106.	280.	350.	100.	
g End of year balance	12,373.	9,613.	8,833.	9,008.	0.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Temporarily restricted endowment 100.00 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|-----|----|
| (i) unrelated organizations | X | |
| (ii) related organizations | | X |
- b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? Yes No
- 4 Describe in Part XIII the intended uses of the organization's endowment funds. SEE PART XIII

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land		371,873.		371,873.
b Buildings		1,149,889.	274,364.	875,525.
c Leasehold improvements		5,548.	3,616.	1,932.
d Equipment		1,538,648.	1,016,753.	521,895.
e Other		357,827.	217,399.	140,428.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 1,911,653.

Part VII Investments – Other Securities.

N/A

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		

Part VIII Investments – Program Related.

N/A

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4) CONSTRUCTION IN PROGRESS	2,110,637.
(5) DEPOSITS	
(6) INVENTORIES FOR DISTRIBUTION	2,894,461.
(7) INVESTMENT IN COMM FOUND SO GA, INC.	12,373.
(8) OTHER RECEIVABLES	17,333.
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15.)	5,034,804.

Part X Other Liabilities.

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED EXPENSES	42,891.
(3) PAYROLL TAXES PAYABLE	15,479.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	58,370.

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. **SEE PART XIII.**

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	31,563,841.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains on investments	2a		
	b Donated services and use of facilities	2b		
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.) SEE PART XIII	2d	32,721.	
	e Add lines 2a through 2d	2e		32,721.
3	Subtract line 2e from line 1		3	31,531,120.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	31,531,120.

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	32,810,258.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.) SEE PART XIII	2d	9,750.	
	e Add lines 2a through 2d	2e		9,750.
3	Subtract line 2e from line 1		3	32,800,508.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	32,800,508.

Part XIII Supplemental Information.

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

PART V. LINE 4 - INTENDED USES OF ENDOWMENT FUND

THE ENDOWMENT FUND WAS ESTABLISHED TO RECEIVE FUTURE FUNDS TO HANDLE FACILITY EXPANSIONS.

PART X - FIN 48 FOOTNOTE

ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES: THE ORGANIZATION EVALUATES ANY INCOME TAX BENEFITS GENERATED FROM UNCERTAIN TAX POSITIONS USING A MORE-LIKELY-THAN-NOT OF BEING SUSTAINED UPON EXAMINATION ANALYSIS. IF A TAX BENEFIT IS NOT MORE-LIKELY-THAN-NOT OF BEING SUSTAINED UPON EXAMINATION, THE ORGANIZATION RECORDS A

Part XIII Supplemental Information (continued)

PART X - FIN 48 FOOTNOTE (CONTINUED)

LIABILITY FOR THE RECOGNIZED INCOME TAX BENEFIT. THE ORGANIZATION RECOGNIZES ACCRUED INTEREST ASSOCIATED WITH UNCERTAIN TAX POSITIONS AS PART OF INTEREST EXPENSE AND PENALTIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS AS PART OF OTHER EXPENSES.

2013

SCHEDULE D, PART XIII - SUPPLEMENTAL INFORMATION PAGE 4

SECOND HARVEST OF
SOUTH GEORGIA, INC.

58-2208545

**SCHEDULE D, PART XI, LINE 2D
OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990**

DIRECT EXPENSES OF SPEC EVENTS	\$	32,721.
TOTAL	\$	<u>32,721.</u>

**SCHEDULE D, PART XII, LINE 2D
OTHER EXPENSES AND LOSSES PER AUDITED F/S**

990-T EXPENSES	\$	9,748.
DIFF ON AUDIT		2.
TOTAL	\$	<u>9,750.</u>

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
 ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
 ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization **SECOND HARVEST OF
SOUTH GEORGIA, INC.**

Employer identification number
58-2208545

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

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

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

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 GRIZZARD COMMUN POB 534215 ATLANTA GA 30353	DIRECT MAIL		X	124,830.	16,630.	108,200.
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total▶				124,830.	16,630.	108,200.

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

GA

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

REVENUE	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
	LEGAL FOOD FRE (event type)	(event type)	NONE (total number)	(add column (a) through column (c))
1	Gross receipts	11,060.		11,060.
2	Less: Charitable contributions	11,060.		11,060.
3	Gross income (line 1 minus line 2)			
DIRECT EXPENSES	4	Cash prizes		
	5	Noncash prizes		
	6	Rent/facility costs		
	7	Food and beverages		
	8	Entertainment		
	9	Other direct expenses		
	10	Direct expense summary. Add lines 4 through 9 in column (d)		
11	Net income summary. Subtract line 10 from line 3, column (d)			

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

REVENUE	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
				(add column (a) through column (c))
1	Gross revenue		42,432.	42,432.
DIRECT EXPENSES	2	Cash prizes	5,000.	5,000.
	3	Noncash prizes	13,689.	13,689.
	4	Rent/facility costs		
	5	Other direct expenses	11,978.	11,978.
	6	Volunteer labor	<input type="checkbox"/> Yes <u>0</u> % <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <u>0</u> % <input checked="" type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)			30,667.
8	Net gaming income summary. Subtract line 7 from line 1, column (d)			11,765.

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

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

b If 'No,' explain: _____

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

b If 'Yes,' explain: _____

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	0.3 %
b An outside facility	13b	99.8 %

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

Name ▶ DOUG GRINER

Address ▶ 1411 HARBIN CIRCLE, VALDOSTA, 31601

- 15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes No
- b If 'Yes,' enter the amount of gaming revenue received by the organization ▶ \$ 324. and the amount of gaming revenue retained by the third party ▶ \$ 3,967.
- c If 'Yes,' enter name and address of the third party:

Name ▶ GREAT AMERICAN MDSE & EVENTS

Address ▶ 16043 N 82ND ST, SCOTTSDALE, AZ 85260

16 Gaming manager information:

Name ▶ DOUG GRINER

Gaming manager compensation ▶ \$

Description of services provided ▶ COORDINATES DUCK RACE ADOPTIONS & TRACK

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions

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

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

PART I, LINE 2B - FUNDRAISER ADDITIONAL INFORMATION

ORGANIZATION EMPLOYED A CHIEF MARKETING OFFICER, WHOSE RESPONSIBILITIES INCLUDE FUNDRAISING AND GRANT WRITING.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered 'Yes' 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

2013

**Open to Public
Inspection**

Name of the organization

SECOND HARVEST OF

Employer identification number

58-2208545

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. SEE PART IV

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ----- -----							
(2) ----- -----							
(3) ----- -----							
(4) ----- -----							
(5) ----- -----							
(6) ----- -----							
(7) ----- -----							
(8) ----- -----							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 477

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 ANIMAL FEED	62		1,088,915.	FEEDING AMERICA VALUATION	ANIMAL FEED
2					
3					
4					
5					
6					
7					

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

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.

MEMBER AGENCIES ARE REQUIRED TO REPORT MONTHLY SERVICE NUMBERS. THESE SERVICE

NUMBERS REPORT THE NUMBER OF INDIVIDUALS THEY ARE ABLE TO PROVIDE ASSISTANCE TO.

RANDOMLY, MEMBER AGENCIES ARE VISITED BY ONE OF OUR AGENCY RELATIONS REPRESENTATIVES.

THE REPS REVIEW THE AGENCIES SERVICE RECORDS TO ENSURE THAT THE GRANT FUNDS ARE

BEING USED PROPERLY.

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION

PART IV - ADDITIONAL INFORMATION:

SCHEDULE I, PART II:

*COLUMN (F): METHOD OF VALUATION - FOOD AND OTHER GROCERY PRODUCTS DISTRIBUTED ARE

VALUED AS THE TOTAL POUNDS OF DONATED PRODUCTS DISTRIBUTED TIMES \$1.66 WHOLESALE

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

VALUE PER POUND, AS IS COMMON PRACTICE WITH FEEDING AMERICA. SCHOOL SUPPLIES
DISTRIBUTED WERE VALUED AT THE SAME AVERAGE COST AS WELL.

*COLUMN (H): PURPOSE OF GRANT OR ASSISTANCE - TO PROVIDE PRODUCTS FOR DISTRIBUTION
TO NEEDY FAMILIES AND INDIVIDUALS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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. ▶ See separate instructions.

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

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

SECOND HARVEST OF

Employer identification number

58-2208545

Part I Questions Regarding Compensation

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

- | | |
|---|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input checked="" type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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.

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

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

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.

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

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) 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:

- a** The organization?
- b** Any related organization?
- 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:

- a** The organization?
- b** Any related organization?
- 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.

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.

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

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

Schedule J (Form 990) 2013

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 columns (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
FRANKLIN J RICHARDS II 1 PRESIDENT & CEO	(i)	104,000.	45,093.	12,000.	0.	57,227.	218,320.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

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

PART 1, LINE 1A - RELEVANT INFORMATION REGARDING COMPENSATION BENEFITS

BOARD APPROVED THE PAYMENT IN THE FORM OF A BONUS TO THE CEO TO COVER THE MONTHLY
PAYMENT OF A KEY-MAN LIFE INSURANCE POLICY THAT THE ORGANIZATION IS THE BENEFICIARY
OF. ALSO, CEO IS ALOTTED A MONTHLY BONUS TO COVER HIS HSA FUNDING. CEO IS ALSO
ALLOWED A MONTHLY VEHICLE ALLOWANCE AND GAS/MAINTENANCE EXPENSES.

OFFICERS ARE PROVIDED INSURANCE BENEFITS.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2013

**Open To Public
Inspection**

- ▶ **Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.**
- ▶ **Attach to Form 990.**
- ▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.**

Name of the organization **SECOND HARVEST OF SOUTH GEORGIA, INC.** Employer identification number **58-2208545**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art – Works of art				
2 Art – Historical treasures				
3 Art – Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities – Publicly traded				
10 Securities – Closely held stock				
11 Securities – Partnership, LLC, or trust interests				
12 Securities – Miscellaneous				
13 Qualified conservation contribution – Historic structures				
14 Qualified conservation contribution – Other				
15 Real estate – Residential				
16 Real estate – Commercial				
17 Real estate – Other				
18 Collectibles				
19 Food inventory	X	314	25,534,371.	FEEDING AMER DON V
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (PAPER GOODS)	X	1	68,063.	FEEDING AMER DON V
26 Other ▶ (CLEANING SUPPLIES)	X	1	142,777.	FEEDING AMER DON V
27 Other ▶ (SCHOOL SUPPLIES)	X	1	73,194.	FEEDING AMER DON V
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 1-28, 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 exempt purposes for the entire holding period?		X
b If 'Yes,' describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If 'Yes,' describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2013

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2013

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.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

SECOND HARVEST OF
SOUTH GEORGIA, INC.

Employer identification number

58-2208545

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

THE 990 IS DISTRIBUTED TO ALL BOARD MEMBERS OF THE ORGANIZATION. EACH BOARD MEMBER THEN REVIEWS AND DELIBERATES THE 990. EACH BOARD MEMBER MAKES INDIVIDUAL INQUIRIES OF THE CFO AS THEY SEE FIT.

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

A SELF-MONITORING PROCESS WHERE ANY DECISION THAT MAY INVOLVE A BOARD MEMBER HAS BEEN DEVELOPED AS A CORPORATE POLICY. THE BOARD OF DIRECTORS HAS A WRITTEN CONFLICT OF INTEREST POLICY THAT IS FOLLOWED WITH ALL DECISIONS THAT INVOLVE A BOARD MEMBER. INVOLVED BOARD MEMBERS MAY NOT BE PRESENT DURING REVIEW AND ALL AGREEMENTS ARE REVIEWED ANNUALLY. ALL DECISIONS INVOLVING A BOARD MEMBER ARE DONE IN FULL DISCLOSURE AND VOTED ON BY THE BOARD.

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

THE CEO'S COMPENSATION IS DETERMINED BY THE BOARD. THE CEO RECEIVES A BASE SALARY, A MONTHLY BONUS FOR A KEYMAN POLICY, A MONTHLY BONUS TO FUND HIS HSA, A MONTHLY AUTOMOBILE ALLOWANCE AND AN EXPENSE ACCOUNT.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

THE BOARD OF DIRECTORS PERFORMS AN ANNUAL REVIEW OF THE CEO BASED ON THE WRITTEN WORK PLAN OF THE ORGANIZATION. THE REVIEW DETERMINES THE CEO'S COMPENSATION. ALL BOARD MEMBERS PARTICIPATE IN THIS DISCUSSION.

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

GOVERNING DOCS, POLICIES, AND FINANCIAL STATEMENTS ARE MAINTAINED IN A COMPANY NOTEBOOK AND ARE AVAILABLE FOR REVIEW UPON REQUEST.

FORM 990, PART XI, LINE 9
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

990T.....	\$	-9,748.
MISC.....		<u>-1.</u>
	TOTAL	<u>\$ -9,749.</u>

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2013

Attachment
Sequence No. **179**

Name(s) shown on return **SECOND HARVEST OF
SOUTH GEORGIA, INC.**

Identifying number
58-2208545

Business or activity to which this form relates

DEPRECIATION SCHEDULES ONLY

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions).....	1	
2	Total cost of section 179 property placed in service (see instructions).....	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions).....	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions.....	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29.....	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7.....	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8.....	9	
10	Carryover of disallowed deduction from line 13 of your 2012 Form 4562.....	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs).....	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11.....	12	
13	Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12.....	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions).....	14	
15	Property subject to section 168(f)(1) election.....	15	
16	Other depreciation (including ACRS).....	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2013.....	17	310,084.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here.....	▶ <input type="checkbox"/>	

Section B – Assets Placed in Service During 2013 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a	3-year property.....					
b	5-year property.....					
c	7-year property.....					
d	10-year property.....					
e	15-year property.....					
f	20-year property.....					
g	25-year property.....		25 yrs		S/L	
h	Residential rental property.....		27.5 yrs	MM	S/L	
i	Nonresidential real property.....		27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

Section C – Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

20 a	Class life.....				S/L	
b	12-year.....		12 yrs		S/L	
c	40-year.....		40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28.....	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions.....	22	310,084.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.....	23	

BAA For Paperwork Reduction Act Notice, see separate instructions.

FDIZ0812L 06/10/13

Form **4562** (2013)

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2013

Attachment
Sequence No. **179**

Name(s) shown on return **SECOND HARVEST OF
SOUTH GEORGIA, INC.**

Identifying number
58-2208545

Business or activity to which this form relates

FORM 990/990-PF

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions).....	1	
2	Total cost of section 179 property placed in service (see instructions).....	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions).....	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions.....	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29.....	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7.....	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8.....	9	
10	Carryover of disallowed deduction from line 13 of your 2012 Form 4562.....	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs).....	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11.....	12	
13	Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12.....	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions).....	14	
15	Property subject to section 168(f)(1) election.....	15	
16	Other depreciation (including ACRS).....	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2013.....	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here.....	<input type="checkbox"/>	

Section B – Assets Placed in Service During 2013 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a	3-year property.....					
b	5-year property.....					
c	7-year property.....					
d	10-year property.....					
e	15-year property.....					
f	20-year property.....					
g	25-year property.....		25 yrs		S/L	
h	Residential rental property.....		27.5 yrs	MM	S/L	
i	Nonresidential real property.....		27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

Section C – Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

20 a	Class life.....				S/L	
b	12-year.....		12 yrs		S/L	
c	40-year.....		40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28.....	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions.....	22	
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.....	23	

BAA For Paperwork Reduction Act Notice, see separate instructions.

FDIZ0812L 06/10/13

Form **4562** (2013)

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24 a Do you have evidence to support the business/investment use claimed? **Yes** **No** **24b** If 'Yes,' is the evidence written? **Yes** **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions).....								25
26 Property used more than 50% in a qualified business use:								
VAN	10/31/06	100.0	30,579.	30,579.	3.0	S/L		
27 Property used 50% or less in a qualified business use:								
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1.....								28
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1.....							29	

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles).....												
31 Total commuting miles driven during the year.....												
32 Total other personal (noncommuting) miles driven.....												
33 Total miles driven during the year. Add lines 30 through 32.....												
34 Was the vehicle available for personal use during off-duty hours?.....												
35 Was the vehicle used primarily by a more than 5% owner or related person?.....												
36 Is another vehicle available for personal use?.....												

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?.....		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.....		
39 Do you treat all use of vehicles by employees as personal use?.....		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?.....		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.).....		

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2013 tax year (see instructions):					
43 Amortization of costs that began before your 2013 tax year.....					43
44 Total. Add amounts in column (f). See the instructions for where to report.....					44

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0687

2013

For calendar year 2013 or other tax year beginning _____, 2013, and ending _____, _____

▶ See separate instructions.

▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

▶ Do not enter SSN numbers on this form as it may be public if you organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408(e) <input type="checkbox"/> 530(a) <input type="checkbox"/> 408A <input type="checkbox"/> <input type="checkbox"/> 529(a)	Print or Type	<input type="checkbox"/> Check box if name changed and see instructions. SECOND HARVEST OF SOUTH GEORGIA, INC. 1411 HARBIN CIRCLE VALDOSTA, GA 31601	D Employer identification number (Employees' trust, see instructions.) 58-2208545 E Unrelated business activity codes (See instructions.) 722320 524298
C Book value of all assets at end of year 8,575,452.	F Group exemption number (See instructions.) ▶ G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust		

H Describe the organization's primary unrelated business activity.
▶ **CATERING**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? . . . ▶ Yes No
If 'Yes,' enter the name and identifying number of the parent corporation . . . ▶

J The books are in care of ▶ **FRANK RICHARDS** Telephone number ▶ **229-244-2678**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales . . .			
b Less returns and allowances . . . c Balance ▶	1 c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4 a Capital gain net income (attach Form 8949 and Schedule D) . .	4 a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4 b		
c Capital loss deduction for trusts	4 c		
5 Income (loss) from partnerships and S corporations (attach statement)	5		
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Sch G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule.)	12		
SEE STATEMENT 1			
13 Total. Combine lines 3 through 12	13		
	3,148.		3,148.
	3,148.	0.	3,148.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)	21	22a	22b
14 Compensation of officers, directors, and trustees (Schedule K)	14		
15 Salaries and wages	15		
16 Repairs and maintenance	16		
17 Bad debts	17		
18 Interest (attach schedule)	18		
19 Taxes and licenses	19		
20 Charitable contributions (See instructions for limitation rules.)	20		
21 Depreciation (attach Form 4562)	21		
22 Less depreciation claimed on Schedule A and elsewhere on return	22 a		22 b
23 Depletion	23		
24 Contributions to deferred compensation plans	24		
25 Employee benefit programs	25		
26 Excess exempt expenses (Schedule I)	26		
27 Excess readership costs (Schedule J)	27		
28 Other deductions (attach schedule)	28		
29 Total deductions. Add lines 14 through 28	29		9,748.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30		-6,600.
31 Net operating loss deduction (limited to the amount on line 30)	31		
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32		-6,600.
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions.)	33		
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34		-6,600.

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and: a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____ b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____ c Income tax on the amount on line 34 ▶		35 c	0.
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) ▶		36	
37 Proxy tax. See instructions ▶		37	
38 Alternative minimum tax ▶		38	
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies ▶		39	0.

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) ...	40 a		
b Other credits (see instructions)	40 b		
c General business credit. Attach Form 3800 (see instructions)	40 c		
d Credit for prior year minimum tax (attach Form 8801 or 8827)	40 d		
e Total credits. Add lines 40a through 40d.	40 e		0.
41 Subtract line 40e from line 39	41		0.
42 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	42		
43 Total tax. Add lines 41 and 42	43		0.
44 a Payments: A 2012 overpayment credited to 2013	44 a		
b 2013 estimated tax payments	44 b		
c Tax deposited with Form 8868	44 c		
d Foreign organizations: Tax paid or withheld at source (see instructions)	44 d		
e Backup withholding (see instructions)	44 e		
f Credit for small employer health insurance premiums (Attach Form 8941)	44 f		
g Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total ... ▶	44 g		
45 Total payments. Add lines 44a through 44g.	45		0.
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ <input type="checkbox"/>	46		
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed ▶	47		
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid ▶	48		
49 Enter the amount of line 48 you want: Credited to 2014 estimated tax ▶ Refunded ▶	49		

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2013 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ▶ _____	Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ _____ 0.		

Schedule A – Cost of Goods Sold. Enter method of inventory valuation ▶

1 Inventory at beginning of year	1		6 Inventory at end of year	6		
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7		
3 Cost of labor	3					
4 a Additional section 263A costs (attach schedule)	4 a		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes	No
b Other costs (att. sch.)	4 b					
5 Total. Add lines 1 through 4b	5					

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer _____ Date _____ CEO _____ Title _____ May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature NON-PAID PREPARER Date _____ Check if self-employed PTIN _____

Firm's name ▶ _____ Firm's EIN ▶ _____

Firm's address ▶ _____ Phone no. _____

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1 Description of property		
(1)		
(2)		
(3)		
(4)		
2 Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	Total	
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶

Schedule E – Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach sch)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals ▶			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deductions included in column 8 ▶				

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1 Name of controlled organization	2 Employer identification number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7 Taxable Income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
Totals ▶			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).	

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (column 3 plus column 4)
(1)				
(2)				
(3)				
(4)				
Totals	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B).

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute columns 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals	Enter here and on page 1, Part I, line 10, column (A).	Enter here and on page 1, Part I, line 10, column (B).				Enter here and on page 1, Part II, line 26.

Schedule J – Advertising Income (See instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute col 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (col 6 minus col 5, but not more than col 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (col 6 minus col 5, but not more than col 4).
(1)						
(2)						
(3)						
(4)						
(5) Totals from Part I						
Totals , Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, column (A).	Enter here and on page 1, Part I, line 11, column (B).				Enter here and on page 1, Part II, line 27.

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		0%	
		0%	
		0%	
		0%	
Total. Enter here and on page 1, Part II, line 14			

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2013

Attachment
Sequence No. **179**

Name(s) shown on return **SECOND HARVEST OF
SOUTH GEORGIA, INC.**

Identifying number
58-2208545

Business or activity to which this form relates

FORM 4562 ONLY

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions).....	1	
2	Total cost of section 179 property placed in service (see instructions).....	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions).....	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.....	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions.....	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29.....	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7.....	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8.....	9	
10	Carryover of disallowed deduction from line 13 of your 2012 Form 4562.....	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs).....	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11.....	12	
13	Carryover of disallowed deduction to 2014. Add lines 9 and 10, less line 12.....	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions).....	14	
15	Property subject to section 168(f)(1) election.....	15	
16	Other depreciation (including ACRS).....	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2013.....	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here.....	<input type="checkbox"/>	

Section B – Assets Placed in Service During 2013 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property.....						
b 5-year property.....						
c 7-year property.....						
d 10-year property.....						
e 15-year property.....						
f 20-year property.....						
g 25-year property.....			25 yrs		S/L	
h Residential rental property.....			27.5 yrs	MM	S/L	
i Nonresidential real property.....			39 yrs	MM	S/L	
				MM	S/L	

Section C – Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

20 a Class life.....					S/L	
b 12-year.....			12 yrs		S/L	
c 40-year.....			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28.....	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions.....	22	
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.....	23	

BAA For Paperwork Reduction Act Notice, see separate instructions.

FDIZ0812L 06/10/13

Form **4562** (2013)

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24 a Do you have evidence to support the business/investment use claimed? **Yes** **No** **24b** If 'Yes,' is the evidence written? **Yes** **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions).....							25	
26 Property used more than 50% in a qualified business use:								
VAN	10/31/06	100.0	30,579.	30,579.	3.0	S/L		
27 Property used 50% or less in a qualified business use:								
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1.....							28	0.
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1.....							29	0.

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles).....												
31 Total commuting miles driven during the year.....												
32 Total other personal (noncommuting) miles driven.....												
33 Total miles driven during the year. Add lines 30 through 32.....												
34 Was the vehicle available for personal use during off-duty hours?.....												
35 Was the vehicle used primarily by a more than 5% owner or related person?.....												
36 Is another vehicle available for personal use?.....												

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?.....		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.....		
39 Do you treat all use of vehicles by employees as personal use?.....		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?.....		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.).....		

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2013 tax year (see instructions):					
43 Amortization of costs that began before your 2013 tax year.....					43
44 Total. Add amounts in column (f). See the instructions for where to report.....					44

STATEMENT 1
FORM 990-T, PART I, LINE 12
OTHER INCOME

NON-MEMBER AGCY CATERING	\$	<u>3,148.</u>
TOTAL	\$	<u><u>3,148.</u></u>

Part II - Grants and Other Assistance to Governments and Organizations in the United States

	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
(1)	AFFILIATE - A2H Coastal Savannah, GA	2501 East President St.	Savannah	GA	31404	58-1442013	3	244,447	OTHER	FOOD	SEE PART IV
(2)	AFFILIATE - A2H Foodshare, Bloomington, CT	450 Woodland Ave	Bloomington	CT	06002	22-2474771	3	96,806	OTHER	FOOD	SEE PART IV
(3)	AFFILIATE - A2H of Central Orlando, FL	2008 Bregle Ave.	Orlando	FL	32808	59-2142315	3	59,423	OTHER	FOOD	SEE PART IV
(4)	AFFILIATE - A2H of Middle TN, Nashville	331 Great Cir Rd	Nashville	TN	37228	62-1049447	3	339,022	OTHER	FOOD	SEE PART IV
(5)	AFFILIATE - A2H of the Metropolina, Charlotte, NC	500 B Spratt St.	Charlotte	NC	28206	56-1352593	3	110,015	OTHER	FOOD	SEE PART IV
(6)	AFFILIATE - Arkansas Food Bank Network, Inc.	4301 West 65th Street	Little Rock	AR	72209	71-0596734	3	54,499	OTHER	FOOD	SEE PART IV
(7)	AFFILIATE - Atlanta Community Food Bank	732 Joseph E. Lowery Blvd. NW	Atlanta	GA	30318	58-1376648	3	920,614	OTHER	FOOD	SEE PART IV
(8)	AFFILIATE - Bay Area Food Bank	5248 Mobile South Street	Theodore	AL	36582	63-0821997	3	25,614	OTHER	FOOD	SEE PART IV
(9)	AFFILIATE - Capital Area Food Bank	645 Taylor St. NE	Washington, D.C.		20017-2063	52-1167581	3	97,910	OTHER	FOOD	SEE PART IV
(10)	AFFILIATE - City Harvest NY, NY	6 East 32nd Street 5th Floor	New York	NY	10016	13-3170676	3	111,525	OTHER	FOOD	SEE PART IV
(11)	AFFILIATE - Dare to Care Food Bank	POB 35458	Louisville	KY	40232-5458	23-7345952	3	63,133	OTHER	FOOD	SEE PART IV
(12)	AFFILIATE - FB of Central & Eastern North Carolina, Raleigh	3808 Tarheel Dr.	Raleigh	NC	27609	56-1283426	3	119,450	OTHER	FOOD	SEE PART IV
(13)	AFFILIATE - Feeding The Valley Columbus, GA	5928 Coca Cola Blvd	Columbus	GA	31919-5531	58-1498131	3	190,644	OTHER	FOOD	SEE PART IV
(14)	AFFILIATE - FeedMore, Inc., Richmond, VA	1415 Rhoadmiller St.	Richmond	VA	23220	54-1150923	3	36,230	OTHER	FOOD	SEE PART IV
(15)	AFFILIATE - Food Bank For New York City Hunts Point	355 Food Center Drive	Bronx	NY	10474	13-3179546	3	270,107	OTHER	FOOD	SEE PART IV
(16)	AFFILIATE - Food Bank of Albemarle, Elizabeth City NC	P.O. Box 1704	Elizabeth City	NC	27906	56-1341658	3	12,284	OTHER	FOOD	SEE PART IV
(17)	AFFILIATE - Food Bank of Northeast Georgia	POB 48857	Athens	GA	30604-8857	58-1965600	3	293,290	OTHER	FOOD	SEE PART IV
(18)	AFFILIATE - Forgotten Harvest	21800 Greenfield Rd	Oak Park	MI	48237	38-2926476	3	55,328	OTHER	FOOD	SEE PART IV
(19)	AFFILIATE - God's Pantry Food Bank, Inc.	1685 Jaggie Fox Way	Lexington	KY	40511	31-0979404	3	110,340	OTHER	FOOD	SEE PART IV
(20)	AFFILIATE - Golden Harvest Food Bank	3310 Commerce Dr.	Augusta	GA		58-1466516	3	98,240	OTHER	FOOD	SEE PART IV
(21)	AFFILIATE - Greater Pittsburgh Community Food Bank	One North Linden	Duquesne	PA	15110	25-1420599	3	57,971	OTHER	FOOD	SEE PART IV
(22)	AFFILIATE - Harry Chapin FB ofSW FL, Ft. Myers	3760 Fowler St.	Ft. Myers	FL	33901	59-2332120	3	169,292	OTHER	FOOD	SEE PART IV
(23)	AFFILIATE - Island Harvest	40 Marcus Boulevard	Hauppauge	NY	11788	11-3136350	3	63,596	OTHER	FOOD	SEE PART IV
(24)	AFFILIATE - Low Country Food Bank, Chareston SC	2864 Azalea Drive	Charleston	SC	29405	57-0751835	3	24,568	OTHER	FOOD	SEE PART IV
(25)	AFFILIATE - Mid-Ohio Food Bank	3960 Brookham Dr.	Grove City	OH	43123	31-0865343	3	123,633	OTHER	FOOD	SEE PART IV
(26)	AFFILIATE - San Antonio Food Bank	5200 Old Hwy 90 West	San Antonio	TX	78227	74-2122979	3	44,820	OTHER	FOOD	SEE PART IV
(27)	AFFILIATE - Second Harvest North Florida	1502 Jessie Street	Jacksonville	FL	32206	59-1965600	3	180,316	OTHER	FOOD	SEE PART IV
(28)	AFFILIATE - Georgia Mountain Food Bank	1642 Calvary Industrial Drive SW	Gainesville	GA	30507	26-2787610	3	34,533	OTHER	FOOD	SEE PART IV
(29)	AFFILIATE-Feeding America West Michigan Food Bank	864 West River Center Drive	Comstock Park	MI	49321	38-2439659	3	188,966	OTHER	FOOD	SEE PART IV
(30)	AFFILIATE Gulf Coast Cluster	3760 Fowler Street	Ft. Myers	FL	33901	59-2332120	3	55,193	OTHER	FOOD	SEE PART IV
(31)	AFFILIATE - Feeding America Tampa Bay	4702 Transport Drive, Bldg 6	Tampa	FL	33605	59-2116576	3	50,482	OTHER	FOOD	SEE PART IV
(32)	AFFILIATE - Greater Boston Food Bank	70 South Bay	Boston	MA	02118	04-2717782	3	70,937	OTHER	FOOD	SEE PART IV
(33)	Second Harvest of South Georgia, Inc.	1411 Harbin Circle	Valdosta	GA	31601	58-2208545	3	6,154,588	OTHER	FOOD	SEE PART IV
(34)	Abundant Life Church of God (Valdosta)	3419 Knights Academy Road	Valdosta	GA	31605	62-0484177		189,624	OTHER	FOOD	SEE PART IV
(35)	Adel United Methodist Church	214 South Hutchinson Avenue	Adel	GA	31620	58-0673180		22,554	OTHER	FOOD	SEE PART IV
(36)	Alapaha Baptist Church	22308 N main street	Alapaha	GA	31622	58-1782632		45,544	OTHER	FOOD	SEE PART IV
(37)	Azalea City Church of God	1519 River Street	Valdosta	GA	31601	58-1553531		471,958	OTHER	FOOD	SEE PART IV
(38)	Bethel AME Church	202 South Hall Street	Hahira	GA	31632	58-2026114		3,776	OTHER	FOOD	SEE PART IV
(39)	Bethel Church of God Lake Park	243 Bethel Church Rd.	Lake Park	GA	31636	58-1500099		15,272	OTHER	FOOD	SEE PART IV
(40)	Blessed Assurance Ministries	POB 928	Jasper	FL	32052	13-4352474		3,674	OTHER	FOOD	SEE PART IV
(41)	Bridges of Hope - Morven (MEN)	10031 Coffee Road	Morven	GA	31638	58-1917635		39,909	OTHER	FOOD	SEE PART IV
(42)	Christ Episcopal Church	1521 North Patterson Street	Valdosta	GA	31602	58-0956294		8,573	OTHER	FOOD	SEE PART IV
(43)	Church of God of Prophecy-Valdosta	2145 Bemiss Road	Valdosta	GA	31602	58-2471895		22,501	OTHER	FOOD	SEE PART IV
(44)	Church of the Good Shepherd	515 Oak Street	Thomasville	GA	31799	58-1210384		9,206	OTHER	FOOD	SEE PART IV
(45)	Church of the Perfecting Saints	205 Barwick Road	Quitman	GA	31643	64-3657487		5,216	OTHER	FOOD	SEE PART IV
(46)	Community Betterment Society, Inc.	705 North Culpepper Street	Quitman	GA	31643	43-1978659	3	21,561	OTHER	FOOD	SEE PART IV
(47)	Cornerstone Baptist Church of Homerville	3105 Valdosta Hwy	Homerville	GA	31634	26-3545590		34,196	OTHER	FOOD	SEE PART IV
(48)	Cross Pointe Church of Valdosta	110 Northside Drive	Valdosta	GA	31602-1747	20-4373431		321	OTHER	FOOD	SEE PART IV
(49)	Crusaders For Christ Church	POB 430	Quitman	GA	31643	30-0392793		499	OTHER	FOOD	SEE PART IV
(50)	Dasher Church of Christ	4326 Dasher Rd.	Valdosta	GA	31601	58-2040139		96,919	OTHER	FOOD	SEE PART IV
(51)	Dixie SDA	8794 Hwy 84 West	Quitman	GA	31643	59-2066139		159,438	OTHER	FOOD	SEE PART IV
(52)	Evans Temple Holiness Church	46 Davis Ave	Lakeland	GA	31635	26-2073134		6,750	OTHER	FOOD	SEE PART IV
(53)	First Antioch Missionary Baptist Church	517 N. Oak Street	Valdosta	GA	31603	58-1616225		25,875	OTHER	FOOD	SEE PART IV
(54)	First Baptist Adel Food Pantry	200 East 5th Street	Adel	GA	31620	58-0644904		127,705	OTHER	FOOD	SEE PART IV
(55)	First Baptist Church Lake Park	512 W. Cotton Avenue	Lake Park	GA	31636	58-1490877		22,409	OTHER	FOOD	SEE PART IV
(56)	First Baptist Church of Valdosta	200 West Central Ave	Valdosta	GA	31601	58-0597297		338,405	OTHER	FOOD	SEE PART IV
(57)	Francis Lake AME	905 Lakes Blvd	Lake Park	GA	31601	58-2055411		189,780	OTHER	FOOD	SEE PART IV
(58)	Freedom Worship Church	1234 Robinson Street	Lenox	GA	31637	20-3201719		11,415	OTHER	FOOD	SEE PART IV
(59)	Friendship Freewill Baptist Church	110 West Street	Valdosta	GA	31601	58-1641584		29,542	OTHER	FOOD	SEE PART IV
(60)	Fruitland Church of God	3893 Highway 187	Dupont	GA	31630	20-5764031		37,387	OTHER	FOOD	SEE PART IV
(61)	God's Way Ministries	129 Ethiridge Rd	Sylvester	GA	31791	91-2049142		1,000	OTHER	FOOD	SEE PART IV

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(62)	Good Hope Christian Church	3697 Tower Rd	Valdosta	GA	31601	58-1526314		6,898	OTHER	FOOD	SEE PART IV
(63)	Grace Community Church	301 A West 5th Street	Adel	GA	31620	22-3886529		156,270	OTHER	FOOD	SEE PART IV
(64)	Grace Fellowship SDA Church	1304 West Hill Ave	Valdosta	GA	31601	51-0524364		6,602	OTHER	FOOD	SEE PART IV
(65)	Grace Pointe Apostolic Ministries	2534 Winnwood Circle	Valdosta	GA	31601	45-0574872		1,814	OTHER	FOOD	SEE PART IV
(66)	Grace Victory Church	303 North Forrest Street	Valdosta	GA	31601	58-2574263		28,194	OTHER	FOOD	SEE PART IV
(67)	Hahira Church of God	205 E. Stanfill Street	Hahira	GA	31632	62-0484177		39,702	OTHER	FOOD	SEE PART IV
(68)	Harvest Church of God	6163 Clyattville-Lake Park Rd	Valdosta	GA	31601	58-0977240		13,672	OTHER	FOOD	SEE PART IV
(69)	Hope Baptist Church	1011 S. Dogwood Dr.	Nashville	GA	31639	58-2009727		17,764	OTHER	FOOD	SEE PART IV
(70)	Hungry at Home, Inc.	604 West Marion Ave.	Lake Park	GA	31636	80-0774549	3	5,087	OTHER	FOOD	SEE PART IV
(71)	Jackson Drive Church of Christ	114 Jackson Drive	Valdosta	GA	31601	58-1538697		5,824	OTHER	FOOD	SEE PART IV
(72)	Jennings Assembly of God Church	POB 167	Jennings	FL	32053	59-2237916		57,703	OTHER	FOOD	SEE PART IV
(73)	Lake Park Church of Christ	910 Long Pond Road	Lake Park	GA	31636	58-1500099		19,102	OTHER	FOOD	SEE PART IV
(74)	Lake Park Church of God	900 Marion Avenue	Lake Park	GA	31636	58-1496671		47,689	OTHER	FOOD	SEE PART IV
(75)	LifeLion Ministries, Inc.	1407 S. Patterson St	Valdosta	GA	31603	45-1966768		2,890	OTHER	FOOD	SEE PART IV
(76)	Lighthouse Christian Fellowship Cntr	5802 Daniell Drive South	Lake Park	GA	31636	58-2648055		47,480	OTHER	FOOD	SEE PART IV
(77)	Live Oak Church of God	9828 US Hwy 129 South	Live Oak	FL	32060	59-2376006		2,902	OTHER	FOOD	SEE PART IV
(78)	Madison Church of God	POB 586	Madison	FL	32341	62-0484177		13,956	OTHER	FOOD	SEE PART IV
(79)	Mission Point Baptist Church	100 N. Ashley Street	Valdosta	GA	31602	27-0066565		10,989	OTHER	FOOD	SEE PART IV
(80)	Morning Star Baptist Church	1051 Howell Road	Valdosta	GA	31601	75-3048761		7,414	OTHER	FOOD	SEE PART IV
(81)	Mt. Calvary Baptist Church	3835 White Water Road	Valdosta	GA	31601	58-2295663		2,220	OTHER	FOOD	SEE PART IV
(82)	Nashville Church of the Nazarene	203 East Bullock Ave	Nashville	GA	31639	58-1415758		2,334	OTHER	FOOD	SEE PART IV
(83)	New Covenant Church of Valdosta	3531 Bemiss Road	Valdosta	GA	31605	58-1457987		13,224	OTHER	FOOD	SEE PART IV
(84)	New Life Community Church	7505 Zeigler Road	Lake Park	GA	31636	58-1792757		58,444	OTHER	FOOD	SEE PART IV
(85)	New Season Church of God	122 Pendleton Avenue	Valdosta	GA	31601	56-2597202		6,479	OTHER	FOOD	SEE PART IV
(86)	New Testament Christian Center	2558 US HWY 90 E	Madison	FL	32340	59-2479655		12,897	OTHER	FOOD	SEE PART IV
(87)	Northern Heights Baptist Church	1102 E. 8th Ave.	Cordele	GA	31015	58-1140631		147,127	OTHER	FOOD	SEE PART IV
(88)	Park Avenue United Methodist Church	100 East Park Avenue	Valdosta	GA	31602	58-0644909		77,876	OTHER	FOOD	SEE PART IV
(89)	Pearson Church of God of Prophecy	284 Lawrence Rd	Axson	GA	31624	62-0483206		19,608	OTHER	FOOD	SEE PART IV
(90)	Pentecostal Deliverance Center	P. O. Box 25	Jennings	FL	32053	26-4389062		43,354	OTHER	FOOD	SEE PART IV
(91)	Perimeter Road Baptist Church	4091 Perimeter Road	Valdosta	GA	31602	58-1793646		19,314	OTHER	FOOD	SEE PART IV
(92)	Pine Grove Community Baptist Church	4024 Pine Grove Road	Valdosta	GA	31605	58-2088195		43,656	OTHER	FOOD	SEE PART IV
(93)	Pineview Freewill Baptist Church	1012 Empress Rd.	Quitman	GA	31643	58-1903326		83,135	OTHER	FOOD	SEE PART IV
(94)	Pot of Gold Outreach Ministry, Inc.	1203 5th Ave	Albany	GA	31707	54-2065682		6,115	OTHER	FOOD	SEE PART IV
(95)	Quitman Church of God	1405 E Screven St	Quitman	GA	31643	58-1893449		116,747	OTHER	FOOD	SEE PART IV
(96)	Quitman United Methodist Church	501 Screven Street	Quitman	GA	31643	58-0644910		65,504	OTHER	FOOD	SEE PART IV
(97)	Ray City Church of God	8828 Main Street	Ray City	GA	31641	20-0477890		13,468	OTHER	FOOD	SEE PART IV
(98)	Ray City Freewill Holiness Church	625 Pauline Ave.	Ray City	GA	31645	80-0789117		2,810	OTHER	FOOD	SEE PART IV
(99)	Redland Baptist Church	4888 Rocky Ford Road	Valdosta	GA	31601	58-2374504		5,931	OTHER	FOOD	SEE PART IV
(100)	Serenity Christian Church	1619 North Lee St.	Valdosta	GA	31602	27-0603513		715	OTHER	FOOD	SEE PART IV
(101)	Simmon Hill MBC	1800 Simmon Hill Rd	Dixie	GA	31629	58-2174093		25,923	OTHER	FOOD	SEE PART IV
(102)	Southland Church	2206 East Hill Ave	Valdosta	GA	31601	58-2305520		173,367	OTHER	FOOD	SEE PART IV
(103)	Southside Baptist Church	326 South Hwy 221	Lakeland	GA	31635	58-2448465		114,009	OTHER	FOOD	SEE PART IV
(104)	Southside Church of Christ	1198 Old Statenville Road	Valdosta	GA	31601	58-1416291		33,558	OTHER	FOOD	SEE PART IV
(105)	Special Olympics Georgia - Valdosta	1601 N. Ashley St. Suite 88	Valdosta	GA	31602	23-7201676	3	27,494	OTHER	FOOD	SEE PART IV
(106)	Springhead Baptist Church	1102 Springhead Church Road	Adel	GA	31620	58-1534920		1,530	OTHER	FOOD	SEE PART IV
(107)	St. Lewis Missionary Baptist Church	2206 N. Forrest Str.	Valdosta	GA	31602	58-2546711		19,838	OTHER	FOOD	SEE PART IV
(108)	St. Paul AME Church - Valdosta	419 South Ashley Street	Valdosta	GA	31601	58-1510090		3,579	OTHER	FOOD	SEE PART IV
(109)	St. Peter Church of God by Faith	500 W. Magnolia Street	Valdosta	GA	31601	58-1793616		39,878	OTHER	FOOD	SEE PART IV
(110)	Sweetfield MBC	POB 47	Quitman	GA	31643	58-1985535		586	OTHER	FOOD	SEE PART IV
(111)	Tabernacle of God's Love	1143 Plum Street	Jennings	FL	32053	20-8272227		46,829	OTHER	FOOD	SEE PART IV
(112)	The Vashiti Center, Inc.	1815 East Clay Street	Thomasville	GA	31792	58-2497920	3	5,368	OTHER	FOOD	SEE PART IV
(113)	The Vision	2711 Bemiss Road	Valdosta	GA	31602	58-2259362		29,148	OTHER	FOOD	SEE PART IV
(114)	Trinity Presbyterian Church	3501 Bemiss Road	Valdosta	GA	31605	58-1631506		9,574	OTHER	FOOD	SEE PART IV
(115)	Union Cathedral	1050 East Hill Ave	Valdosta	GA	31601	58-1464383		16,479	OTHER	FOOD	SEE PART IV
(116)	University Boulevard Church of God	128 University Blvd.	Waycross	GA	31503	58-2602827		35,002	OTHER	FOOD	SEE PART IV
(117)	Valdosta Baptist Hispanic Mission	8737 Ousley Road	Valdosta	GA	31601	58-0597297		13,883	OTHER	FOOD	SEE PART IV
(118)	Valdosta City Schools Foundation	1204 Williams St	Valdosta	GA	31603	58-2479891	3	533	OTHER	FOOD	SEE PART IV
(119)	Valdosta Lowndes County Family YMCA	2424 Gornro St	Valdosta	GA	31602	58-1052279	3	14,758	OTHER	FOOD	SEE PART IV
(120)	West Hill Church of Christ	1416 West Hill Avenue	Valdosta	GA	31601	58-1818734		3,666	OTHER	FOOD	SEE PART IV
(121)	West Lake COG	4973 NW CR 141	Jennings	FL	32053	59-2851577		46,837	OTHER	FOOD	SEE PART IV
(122)	Woodlawn Forrest Church of Christ	1515 N. Forrest Street	Valdosta	GA	31601	58-1390493		10,378	OTHER	FOOD	SEE PART IV

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(123)	First Born Church Inc	POB 293	Ray City	GA	31645	58-1905222		51,103	OTHER	FOOD	SEE PART IV
(124)	Bethany MBC	8165 Dry Lake Road	Quitman	GA	31643	80-0765092		27,783	OTHER	FOOD	SEE PART IV
(125)	God's Way Baptist Church	3000 County Farm Road	Adel	GA	31620	16-1762690		10,258	OTHER	FOOD	SEE PART IV
(126)	Manantial De Vida, Inc	100 Conoley Ave	Valdosta	GA	31601	26-1271079		4,328	OTHER	FOOD	SEE PART IV
(127)	Municipal Airport Church of Christ	2267 Copeland Road	Valdosta	GA	31601	58-2390841		7,926	OTHER	FOOD	SEE PART IV
(128)	Fountain of Faith Ministries inc	23 Lovejoy Rd	Lakeland	GA	31635	26-4230405		217,537	OTHER	FOOD	SEE PART IV
(129)	St. Augustine Road Church of Christ	713 St. Augustine Road	Valdosta	GA	31606	45-4048799		3,330	OTHER	FOOD	SEE PART IV
(130)	Community Support Advocates, Inc	3600 Victoria Drive	Valdosta	GA	31605	27-4422199	3	2,307	OTHER	FOOD	SEE PART IV
(131)	Pinetta Baptist Church	10285 NE Colin Kelly HWY	Pinetta	FL	32350	59-2348601		10,338	OTHER	FOOD	SEE PART IV
(132)	Glorified Ministries Outreach	1521 Cypress Street	Valdosta	GA	31601	90-0902320		10,530	OTHER	FOOD	SEE PART IV
(133)	Payton A.M.E. Church	6652 Jumping Gully Road	Valdosta	GA	31601	58-1553076		927	OTHER	FOOD	SEE PART IV
(134)	Macedonia First Baptist Church	715 J.L. Lomax Drive	Valdosta	GA	31601	38-3828841		13,985	OTHER	FOOD	SEE PART IV
(135)	Covenant Christian Academy	1200 N. Ashley Street	Valdosta	GA	31601	46-2881220		1,204	OTHER	FOOD	SEE PART IV
(136)	Gospel Tabernacle Church of God in Christ	207 East Dame Avenue	Homerville	GA	31634	03-0472236		5,317	OTHER	FOOD	SEE PART IV
(137)	Bethel Baptist Church	2939 Bethel Road	Brinson	GA	39825	80-0178566		8,999	OTHER	FOOD	SEE PART IV
(138)	Celebration Church, Inc.	5413 US Hwy 319 S.	Thomasville	GA	31792	58-1211891		6,292	OTHER	FOOD	SEE PART IV
(139)	Circle of Health, Inc.	406 Newton Road	Bainbridge	GA	39817	45-1198749		2,426	OTHER	FOOD	SEE PART IV
(140)	Colquitt County Food and Clothing Bank, Inc.	309 3rd St. SE	Moultrie	GA	31768	58-1503398	3	44,111	OTHER	FOOD	SEE PART IV
(141)	Colquitt United Methodist Church	453 East Main Street	Colquitt	GA	39837	58-1346167		394,396	OTHER	FOOD	SEE PART IV
(142)	Crestwood Baptist	1620 Murdock Street	Moultrie	GA	31776	58-2086721		1,292	OTHER	FOOD	SEE PART IV
(143)	Crossroads Baptist Church	228 Walden Road	Thomasville	GA	31792	58-2441346		13,702	OTHER	FOOD	SEE PART IV
(144)	Dawson Street Baptist Church	1025 North Dawson Street	Thomasville	GA	31792	58-0876312		1,096	OTHER	FOOD	SEE PART IV
(145)	Disciples of Jesus Ministries, Inc	228 Augusta Avenue	Thomasville	GA	31792	58-1790670		49,078	OTHER	FOOD	SEE PART IV
(146)	Faceville Baptist Church	2109 Faceville Atapulugus Rd.	Bainbridge	GA	39819	58-2002226		47,744	OTHER	FOOD	SEE PART IV
(147)	First Apostolic Faith Church	608 A Broad Street	Thomasville	GA	31792	58-2636596		11,611	OTHER	FOOD	SEE PART IV
(148)	First Baptist Church of Thomasville	210 North Broad Street	Thomasville	GA	31792	58-0665890		122,170	OTHER	FOOD	SEE PART IV
(149)	First Presbyterian Church Thomasville	225 E. Jackson St.	Thomasville	GA	31792	58-6010511		1,979	OTHER	FOOD	SEE PART IV
(150)	Thomasville First United Methodist Church	425 North Broad Street	Thomasville	GA	31792	58-0644910		16,265	OTHER	FOOD	SEE PART IV
(151)	Friendship UMC	POB 305	Donalsonville	GA	39845	58-1401657		141,040	OTHER	FOOD	SEE PART IV
(152)	Gatlin Creek Baptist Church	2031 Gatlin Creek Road	Thomasville	GA	31757	58-1865836		19,591	OTHER	FOOD	SEE PART IV
(153)	Goal Line Ministries, Inc.	1501 Millpond Road	Thomasville	GA	31799	20-5637854		10,627	OTHER	FOOD	SEE PART IV
(154)	Grace Fellowship Church	543 Carrington Circle	Thomasville	GA	31792	20-2182870		2,613	OTHER	FOOD	SEE PART IV
(155)	Grady County Baptist Association	227 Georgia Highway 112 N.	Cairo	GA	39828	58-1532312		27,180	OTHER	FOOD	SEE PART IV
(156)	House of Joy	505 East Walcott Street	Thomasville	GA	31792	58-2102426		6,121	OTHER	FOOD	SEE PART IV
(157)	Immanuel Baptist Church	1127 Juller Circle	Bainbridge	GA	39818	58-1752254		11,716	OTHER	FOOD	SEE PART IV
(158)	Immanuel Temple C.O.G.I.C.	1485 North Pinetree Blvd	Thomasville	GA	31792	57-1194154		729	OTHER	FOOD	SEE PART IV
(159)	Judah of Praise C.O.G.I.C	551-B Smith Ave	Thomasville	GA	31792	56-2094993		391	OTHER	FOOD	SEE PART IV
(160)	Kingdom Covenant Church	PO Box 3072	Thomasville	GA	31799	27-1016508		2,161	OTHER	FOOD	SEE PART IV
(161)	Kingdom of New Life Ministries, Inc.	POB 773	Bainbridge	GA	39818	31-1773620		2,604	OTHER	FOOD	SEE PART IV
(162)	Lake Seminole Baptist Church	2990 Burke Road	Donalsonville	GA	39845	75-3059007		46,699	OTHER	FOOD	SEE PART IV
(163)	Landmark Ministries, Inc.	2119 Dothan Road	Bainbridge	GA	39819	45-5091153		3,848	OTHER	FOOD	SEE PART IV
(164)	Loving Kindness Outreach Ministries, Inc.	414 Hanover Rd.	Bainbridge	GA	39817	52-2368856		2,901	OTHER	FOOD	SEE PART IV
(165)	Many Mansions Church	8929 Hwy 122	Thomasville	GA	31757	58-2573709		25,879	OTHER	FOOD	SEE PART IV
(166)	Mitchell County Food Bank and Help Center, Inc	238 Mill Street	Pelham	GA	31779	20-2905244	3	144,999	OTHER	FOOD	SEE PART IV
(167)	Mt. Moriah Missionary Baptist Church	3212 Parramore Fishpond Road	Boston	GA	31626	77-0683613		1,092	OTHER	FOOD	SEE PART IV
(168)	Nashville Church of God	1251 Adel Road	Nashville	GA	31639	58-1602625		20,030	OTHER	FOOD	SEE PART IV
(169)	Nelson Chapel AME	POB 638	Bainbridge	GA	39818	53-0204696		1,643	OTHER	FOOD	SEE PART IV
(170)	New Covenant Church of Thomasville	48 Patterson Still Spur East	Thomasville	GA	31757	58-1541608		2,953	OTHER	FOOD	SEE PART IV
(171)	New Shiloh Baptist Church	13437 US Hwy 319 North	Thomasville	GA	31757	58-2187056		84,225	OTHER	FOOD	SEE PART IV
(172)	Ochlocknee Church of God	1005 Bullock Street	Ochlocknee	GA	31773	58-2069770		34,677	OTHER	FOOD	SEE PART IV
(173)	Parkway Church of God, Inc	12748 US Hwy 19 S	Thomasville	GA	31792	26-2938404		14,052	OTHER	FOOD	SEE PART IV
(174)	Patten Holiness Church, Inc	515 Egypt Road	Thomasville	GA	31757	68-0590595		1,924	OTHER	FOOD	SEE PART IV
(175)	Quitman UMC Backpack Buddies	501 East Screven Street	Quitman	GA	31643	58-0644910		2,661	OTHER	FOOD	SEE PART IV
(176)	Redeeming Life Fellowship Church, Inc	2378 Georgia Highway 188	Cairo	GA	39828	14-1900253		47,839	OTHER	FOOD	SEE PART IV
(177)	Safe Haven, Inc.	13232 US HWY 319 N	Thomasville	GA	31792	58-2354127	3	66,948	OTHER	FOOD	SEE PART IV
(178)	St. Thomas Primitive Baptist Church	POB 1169	Cairo	GA	39828	14-1997398		2,304	OTHER	FOOD	SEE PART IV
(179)	The Church of the Nazarene - Bainbridge	POB 575	Bainbridge	GA	39818	58-6122219		12,768	OTHER	FOOD	SEE PART IV
(180)	The Concerned Citizens Community Club of Boston, GA	POB 737	Boston	GA	31626	58-2016135		20,356	OTHER	FOOD	SEE PART IV
(181)	The Power of Praise	115 South Hwy. 11	Cairo	GA	39828	32-0205352		8,561	OTHER	FOOD	SEE PART IV
(182)	Thomas County Food Bank and Outreach Center, Inc	430 North Broad Street	Thomasville	GA	31792	58-2390388	3	484,942	OTHER	FOOD	SEE PART IV
(183)	Thomasville Eastside Baptist Church, Inc	220 Colton Avenue	Thomasville	GA	31792	58-0572428		26,490	OTHER	FOOD	SEE PART IV

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	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
(184)	Trinity Anglican Church	305 West Jackson Street	Thomasville	GA	31799	20-5769856		398	OTHER	FOOD	SEE PART IV
(185)	Victory Through Christ Ministries, Inc.	271 Moore Road	Cairo	GA	39828	51-0659872		704	OTHER	FOOD	SEE PART IV
(186)	Vision of Hope Missionary Baptist Church	12176 Hwy 84 E.	Thomasville	GA	31757	75-3201933		172,954	OTHER	FOOD	SEE PART IV
(187)	West Bainbridge Baptist Church	801 Griffin Street	Bainbridge	GA	39817	58-1536706		62,335	OTHER	FOOD	SEE PART IV
(188)	Crossroads Church of Beatchon Backpack Program	228 Walden Road	Thomasville	GA	31792	58-2441346		7,509	OTHER	FOOD	SEE PART IV
(189)	House of Prayer Five Fold Ministries, Inc	213 Cherokee Street	Thomasville	GA	31792	11-066650		5,021	OTHER	FOOD	SEE PART IV
(190)	Pine Level Baptist Church	298 Pine Level Road	Cairo	GA	39827	58-1540035		17,438	OTHER	FOOD	SEE PART IV
(191)	St. Luke CME Church Backpack Buddies Program	305 Chatham Drive	Thomasville	GA	31792	58-1717984		843	OTHER	FOOD	SEE PART IV
(192)	Hand Memorial United Methodist Church	242 Hand Avenue	Pelham	GA	31779	58-0833513		4,108	OTHER	FOOD	SEE PART IV
(193)	Praise Baptist Church	500 Hopewell Church Road	Moultrie	GA	31768	58-2375597		1,028	OTHER	FOOD	SEE PART IV
(194)	The Salvation Army Bainbridge	600 Scott Street	Bainbridge	GA	39819	58-0660607		8,944	OTHER	FOOD	SEE PART IV
(195)	First True Outreach Ministries, Inc	2453 Hagen St. Rd.	Iron City	GA	36302	63-1256578		3,357	OTHER	FOOD	SEE PART IV
(196)	Albany Area Primary Health	2202 East Oglethorpe	Albany	GA	31705	58-1344015		21,639	OTHER	FOOD	SEE PART IV
(197)	Albany Grace Church of the Nazarene	3000 Gillonville Rd.	Albany	GA	31721	58-1662218		1,688	OTHER	FOOD	SEE PART IV
(198)	Arlington Baptist Church	17382 South Highland Avenue	Arlington	GA	39813	58-1264572		43,725	OTHER	FOOD	SEE PART IV
(199)	Bells of Joy Outreach	2133 GA Hwy 133 N.	Moultrie	GA	31768	68-0539774		15,393	OTHER	FOOD	SEE PART IV
(200)	Bethel African Methodist Episcopal Church, Inc.	217 South Washington Avenue	Albany	GA	31701	45-3071649		28,138	OTHER	FOOD	SEE PART IV
(201)	Bethel CME Church	612 Joe Wright Drive	Cordele	GA	31015	51-0666036		21,651	OTHER	FOOD	SEE PART IV
(202)	Blakely Church of God	21862 Lucile Rd.	Blakely	GA	39823	58-1859265		2,860	OTHER	FOOD	SEE PART IV
(203)	Cathedral of Faith Church of God	345 10th Avenue	Dawson	GA	39842	30-0166297		3,037	OTHER	FOOD	SEE PART IV
(204)	Christian Outreach Church	515 Bumphead Rd.	Americus	GA	31719	58-1695706		18,309	OTHER	FOOD	SEE PART IV
(205)	Christians on a Mission	1045 Southerfield Rd	Americus	GA	31709	02-0644799		6,845	OTHER	FOOD	SEE PART IV
(206)	Church of Christ of Albany Georgia, Inc. (Beattie Road COC)	1731 Beattie Rd.	Albany	GA	31721	58-1429972		31,572	OTHER	FOOD	SEE PART IV
(207)	Church of the Living Word	930 Gordon Avenue	Albany	GA	31701	03-0510815		18,778	OTHER	FOOD	SEE PART IV
(208)	Eastside Church of Christ	403 South Mock Road	Albany	GA	31705	58-1537471		61,346	OTHER	FOOD	SEE PART IV
(209)	Ebenezer Christian Center	2325 S. Madison St.	Albany	GA	31701	58-2046364		111,739	OTHER	FOOD	SEE PART IV
(210)	Edison United Methodist Church	1010 Harford Street	Edison	GA	39846	58-1640702		15,309	OTHER	FOOD	SEE PART IV
(211)	Emmanuel Missionary Baptist Church	511 North Third Street	Cordele	GA	31015	90-0195676		46,025	OTHER	FOOD	SEE PART IV
(212)	Evangelical Faith Vision Ministries	1506 South Slappey Blvd	Albany	GA	31701	58-1383663		12,021	OTHER	FOOD	SEE PART IV
(213)	Faith and Prayer Training and Deliverance	811 West Highland Avenue	Albany	GA	31701	58-1597914		9,564	OTHER	FOOD	SEE PART IV
(214)	Faith Holiness Church	18811 Morgan Road	Arlington	GA	39813	58-2388141		4,790	OTHER	FOOD	SEE PART IV
(215)	Families in Action	POB 366	Cordele	GA	31010	27-0142710		9,067	OTHER	FOOD	SEE PART IV
(216)	Family Vision Outreach Inc.	601 West Price Street	Sylvester	GA	31791	32-0052261		27,504	OTHER	FOOD	SEE PART IV
(217)	First African Baptist Church	606 West Pope Street	Sylvester	GA	31791	58-2359923		19,222	OTHER	FOOD	SEE PART IV
(218)	First Apostolic Church	421 Lumpkin St.	Albany	GA	31705	58-2016284		11,129	OTHER	FOOD	SEE PART IV
(219)	First Baptist Church Chula	30 Academy Drive	Chula	GA	31733	58-1502856		7,349	OTHER	FOOD	SEE PART IV
(220)	First Baptist Church of Putney	1125 Antioch Road	Albany	GA	31705	58-1204453		44,275	OTHER	FOOD	SEE PART IV
(221)	First United Methodist Church Ashburn	406 North Main Street	Ashburn	GA	31714	58-1088090		19,492	OTHER	FOOD	SEE PART IV
(222)	First United Methodist Church Cordele	302 East 12th Ave	Cordele	GA	31015	58-0641232		100,599	OTHER	FOOD	SEE PART IV
(223)	Friendship Missionary Baptist Church	400 Pine Ave	Albany	GA	31701	58-0552427		6,789	OTHER	FOOD	SEE PART IV
(224)	God's Powerhouse AME	10787 Georgia Hwy 27 West	Lumpkin	GA	31815	53-0204696		35,037	OTHER	FOOD	SEE PART IV
(225)	Gospel Light Baptist Church	237 Lockett Station Road	Albany	GA	31721	58-1735991		15,837	OTHER	FOOD	SEE PART IV
(226)	Mt. Olive Community Outreach Center, Inc.	302 Adkins St.	Albany	GA	31705	58-2000635		38,560	OTHER	FOOD	SEE PART IV
(227)	Greater Faith Ministries	POB 4	Ashburn	GA	31714	80-0741239		3,849	OTHER	FOOD	SEE PART IV
(228)	Greater Grace COGIC	205 S Westover Blvd	Albany	GA	31707	58-2358431		8,630	OTHER	FOOD	SEE PART IV
(229)	Greater New Birth Missionary Baptist	210 East Street	Sylvester	GA	31791	58-2619937		1,689	OTHER	FOOD	SEE PART IV
(230)	Greater St. Luke Baptist Church	232 North Leary Road	Ashburn	GA	31714	58-1722939		10,003	OTHER	FOOD	SEE PART IV
(231)	Helping Hand Outreach Center	306 Main St	Tifton	GA	31794	32-0185110	3	5,174	OTHER	FOOD	SEE PART IV
(232)	Higher Heights Fellowship Ministries	128 Bennett Drive	Albany	GA	31705	75-3147860		2,562	OTHER	FOOD	SEE PART IV
(233)	Holly Grove Baptist	201 Eighth St. South	Cordele	GA	31010	80-0298393		581,187	OTHER	FOOD	SEE PART IV
(234)	Hope MC Ministry	2835 GA Hwy 112 E.	Ashburn	GA	31714	20-0114515		4,302	OTHER	FOOD	SEE PART IV
(235)	House of Judah in Fitzg. Colony City Community Church	225 El Harris Road	Fitzgerald	GA	31750	58-1740396		5,355	OTHER	FOOD	SEE PART IV
(236)	House of Prayer by Faith	212 Acorn Street	Albany	GA	31705	58-1312776		173	OTHER	FOOD	SEE PART IV
(237)	House of Salvation	448 Old Bridgeboro Rd.	albany	ga	31705	58-2470653		1,725	OTHER	FOOD	SEE PART IV
(238)	Iglesia Viviendo En Fe	1126 Liberty Expressway	Albany	GA	31721	58-2170735		8,919	OTHER	FOOD	SEE PART IV
(239)	Jesus Christ Tabernacle of Deliverance	601 Carroll Lane	Sylvester	GA	31791	58-2640399		10,767	OTHER	FOOD	SEE PART IV
(240)	Jones Chapel A.M.E. Church	317 Railroad Street	Sylvester	GA	31791	26-1395863		8,769	OTHER	FOOD	SEE PART IV
(241)	Kingdom of God Church Inc.	310 Church Street	Arlington	GA	39813	51-0582566		19,646	OTHER	FOOD	SEE PART IV
(242)	Lakeshore Baptist Church	151 Lakeshore Dr.	Cordele	GA	31015	58-1777565		17,145	OTHER	FOOD	SEE PART IV
(243)	Lebanon Baptist Church	403 Botsford Road	Plains	GA	31780	80-0683841		102,058	OTHER	FOOD	SEE PART IV
(244)	Litman Cathedral House of God Saints in Christ	1129 W. Whitney Ave	Albany	GA	31706	26-2272549		30,563	OTHER	FOOD	SEE PART IV

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(245)	Love Thy Neighbor	109 S. Walnut St.	Albany GA 31701	58-1764059		160,243	OTHER	FOOD	SEE PART IV
(246)	Lover's Lane Family Christian Center, Inc.	19936 Hartford Street	Edison GA 39846	26-1089628		13,647	OTHER	FOOD	SEE PART IV
(247)	Maranatha Baptist Church	148 GA Hwy 45 North	Plains GA 31780	58-1490871		14,371	OTHER	FOOD	SEE PART IV
(248)	MiBrand Helping Hands Outreach	359 Watt Street	Camilla GA 31730	26-4607084		17,242	OTHER	FOOD	SEE PART IV
(249)	Mt. Ararat Primitive Baptist Church	7793 Tallahassee Highway	Attapulgus GA 39815	20-1783371		207,202	OTHER	FOOD	SEE PART IV
(250)	My Dream Outreach Care and Share Foundation, Inc.	3492 Warren Hawkins Road	Newton GA 39870	02-0626687		792	OTHER	FOOD	SEE PART IV
(251)	New Bethel Freewill Baptist Church	101 Oakland Heights	Sylvester GA 31791	58-1970443		52,751	OTHER	FOOD	SEE PART IV
(252)	New Life of Albany	POB 50603	Albany GA 31703	58-1593235		4,976	OTHER	FOOD	SEE PART IV
(253)	New Macedonia Baptist Church - Albany	620 Zackery Ave	Albany GA 31701	37-1647030		85,144	OTHER	FOOD	SEE PART IV
(254)	New Mt. Olive Missionary Baptist Church	1007 West Washington Ave	Ashburn GA 31714	03-0602788		20,387	OTHER	FOOD	SEE PART IV
(255)	New Providence Missionary Baptist	531 West Washington Ave	Ashburn GA 31714	58-2630932		34,855	OTHER	FOOD	SEE PART IV
(256)	New St. Stephens Baptist Church	1100 East Third Avenue	Albany GA 31705	58-1856638		20,875	OTHER	FOOD	SEE PART IV
(257)	Oak Grove Baptist - Tifton	4489 US Hwy 319 South	Tifton GA 31793	58-1529477		16,666	OTHER	FOOD	SEE PART IV
(258)	Oakridge Baptist Church	1708 W. Oakridge Dr.	Albany GA 31701	58-1936288		58,907	OTHER	FOOD	SEE PART IV
(259)	Pine Island Freewill Baptist Church	185 Red Street	Edison GA 39846	76-0822048		101,664	OTHER	FOOD	SEE PART IV
(260)	Pinson Memorial United Methodist Church	109 E Pope St	Sylvester GA 31791	58-0876525		6,496	OTHER	FOOD	SEE PART IV
(261)	Powell Chapel Baptist	449 Medlock Ave.	Albany GA 31701	37-1643652		14,942	OTHER	FOOD	SEE PART IV
(262)	Promise Land COGIC	1518 W. 3rd Ave.	Albany GA 31701	26-0188999		2,712	OTHER	FOOD	SEE PART IV
(263)	Refuge Temple Outreach Ministries	19471 West Hartford Street	Edison GA 39846	20-5026729		41,383	OTHER	FOOD	SEE PART IV
(264)	Restoration Church	1213 Douglas Circle	Americus GA 31709	20-5271763		2,473	OTHER	FOOD	SEE PART IV
(265)	Zion Outreach, Inc.	1010 Old Pretoria Road	Albany GA 31721	31-1681562	3	24,129	OTHER	FOOD	SEE PART IV
(266)	Shiloh Missionary Baptist Church	325 Whitney Avenue	Albany GA 31701	58-1944333		19,867	OTHER	FOOD	SEE PART IV
(267)	Solid Rock Church of Dawson	371 Johnson Street	Dawson GA 39842	82-0568496		9,751	OTHER	FOOD	SEE PART IV
(268)	Solid Rock Congregational Church	4521 Sylvester Road	Albany GA 31705	03-0586767		35,056	OTHER	FOOD	SEE PART IV
(269)	Southwest Georgia Resource Center	170 Charles McCrary Rd.	Sylvester GA 31791	58-2662037		8,294	OTHER	FOOD	SEE PART IV
(270)	St. Peter Missionary Baptist	1907 South Jackson Street	Albany GA 31701	58-1386970		7,524	OTHER	FOOD	SEE PART IV
(271)	Temple of Love	105 E. 13th St.	Tifton GA 31794	51-0573673		3,197	OTHER	FOOD	SEE PART IV
(272)	The Church of Heaven's Saints International	1200 7th Avenue	Albany GA 31707	63-1267023		20,967	OTHER	FOOD	SEE PART IV
(273)	The Lord's Pantry	219 West Society Avenue	Albany GA 31701	58-1254879		377,583	OTHER	FOOD	SEE PART IV
(274)	Third Kiokee Baptist Church	521 Carver Ave.	Albany GA 31701	58-1809730		58,528	OTHER	FOOD	SEE PART IV
(275)	Tift Area Community Food Bank	1705 South Ridge Ave.	Tifton GA 31794	58-1701600	3	16,125	OTHER	FOOD	SEE PART IV
(276)	True Life Church of God	588 Fussell Rd.	Leesburg GA 31763	26-3738531		12,623	OTHER	FOOD	SEE PART IV
(277)	Union Missionary Baptist Church	214 East Oglethorpe Blvd.	Albany GA 31702	58-1633341		20,816	OTHER	FOOD	SEE PART IV
(278)	United Pure Life Ministries	710 Moultrie Rd.	Albany GA 31705	90-0159958		5,401	OTHER	FOOD	SEE PART IV
(279)	Victory Tabernacle Assembly of God	3250 Sylvester Rd	Albany GA 31705	58-1491633		2,890	OTHER	FOOD	SEE PART IV
(280)	Vienna United Methodist Church	205 N. 6th Street	Vienna GA 31092	58-0644910		14,866	OTHER	FOOD	SEE PART IV
(281)	Warwick UMC (fishes and loaves)	118 Peachtree Street SE	Warwick GA 31796	58-1439511		78,544	OTHER	FOOD	SEE PART IV
(282)	Welcome Baptist Church	1436 Middle River Road	Americus GA 31709	45-3671544		20,416	OTHER	FOOD	SEE PART IV
(283)	Wesley Chapel AME Church	1275 North Church Street	Blakely GA 39823	58-1820787		61,173	OTHER	FOOD	SEE PART IV
(284)	World Church Ministries	907 N. Jackson St.	Americus GA 31709	83-0413605		568	OTHER	FOOD	SEE PART IV
(285)	Joy Tabernacle of Albany, Inc	2716 Dawson Road, APT 35	Albany GA 31707	56-2456262		959	OTHER	FOOD	SEE PART IV
(286)	New Image of God Ministries	140 3rd Street	Arabi GA 31712	45-4430207		3,352	OTHER	FOOD	SEE PART IV
(287)	Pleasant Hill Missionary Baptist Church	115 Moultrie Road	Albany GA 31705	58-1871895		6,822	OTHER	FOOD	SEE PART IV
(288)	Unity Baptist Church, Inc	101 East Bryant Drive	Sylvester GA 31791	58-1646947		36,144	OTHER	FOOD	SEE PART IV
(289)	Holy Living Kingdom of God Ministries	2722 Dawson Road Stell	Albany GA 31707	37-1601910		3,734	OTHER	FOOD	SEE PART IV
(290)	Baker County Assembly of God	3836 Travelers Rest Road	Newton GA 39870	58-1492032		6,526	OTHER	FOOD	SEE PART IV
(291)	Christ Foundation Assembly of God	222 East Monroe Street	Ashburn GA 31714	20-1761774		15,268	OTHER	FOOD	SEE PART IV
(292)	St. John Full Gospel Independent Church	512 South Cotton Street	Poulan GA 31781	58-2409499		7,375	OTHER	FOOD	SEE PART IV
(293)	First United Methodist Church Americus	200 South Lee Street	Americus GA 31709	58-0593400		78,543	OTHER	FOOD	SEE PART IV
(294)	Northside Baptist Church Tifton	4605 Murray Ave.	Tifton GA 31794	468-0971987		-	OTHER	FOOD	SEE PART IV
(295)	New Beginning Church of God	1011 W Broad Avenue	Albany GA 31701	58-2579895		7,680	OTHER	FOOD	SEE PART IV
(296)	Antioch Baptist Church	609 East Chattahoochee Street	Fitzgerald GA 31750	58-2211182		31,939	OTHER	FOOD	SEE PART IV
(297)	Bethel Independent Baptist Church - Blackshear	420 Strickland Avenue	Blackshear GA 31516	58-1650131		1,415	OTHER	FOOD	SEE PART IV
(298)	Blackshear Church of God	411 West Carter Avenue	Blackshear GA 31516	26-1677436		759	OTHER	FOOD	SEE PART IV
(299)	Burkett Baptist Church	30 Burkett Church Road	West Green GA 31567	58-1908184		3,919	OTHER	FOOD	SEE PART IV
(300)	China Hill Christian Church	2060 West River Road	Rhine GA 31077	58-2576393		50,455	OTHER	FOOD	SEE PART IV
(301)	Emmanuel Apostolic Church	POB 153	Jacksonville GA 31533	58-2467382		8,954	OTHER	FOOD	SEE PART IV
(302)	Faith Full Gospel Assembly	905 N. Main Street	Pearson GA 31642	58-2494695		563,413	OTHER	FOOD	SEE PART IV
(303)	First Assembly of God of Douglas	1200 N. Chester Ave.	Douglas GA 31533	44-0577787		32,852	OTHER	FOOD	SEE PART IV
(304)	First Baptist Church Douglas	124 North Gaskin Avenue	Douglas GA 31533	58-0655357		3,443	OTHER	FOOD	SEE PART IV
(305)	First Baptist Church Willacoochee	280 W. Main Street	Willacoochee GA 31650	58-0643381		53,472	OTHER	FOOD	SEE PART IV

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(306)	First Christian Church of Waycross	412 McDonald St	Waycross	GA	31501	58-1415361		26,968	OTHER	FOOD	SEE PART IV
(307)	First Congregational Christian Church	POB 1003	Douglas	GA	31534	58-1654213		483	OTHER	FOOD	SEE PART IV
(308)	First United Methodist Church Of Douglas	311 N Madison Ave	Douglas	GA	31533	58-0637018		23,667	OTHER	FOOD	SEE PART IV
(309)	First United Methodist Church Waycross	410 Williams Street	Waycross	GA	31501	58-0633981		12,445	OTHER	FOOD	SEE PART IV
(310)	Grace Pointe Baptist Church	942 BOWENS Mill Rd. SW	Douglas	GA	31533	58-2596225		123,821	OTHER	FOOD	SEE PART IV
(311)	Helping Hands for Christ, Inc.	125 Ware Street	Lumber City	GA	31549	36-4670964		978	OTHER	FOOD	SEE PART IV
(312)	Holsey Chapel CME	515 East Suwanee Street	Fitzgerald	GA	31750	41-2244592		4,002	OTHER	FOOD	SEE PART IV
(313)	Jack Bower Fund	9109 Bowen Mill Road	Broxton	GA	31519	26-0398652		811	OTHER	FOOD	SEE PART IV
(314)	La Primera Iglesia Bautista Hispania	810 College Avenue South	Douglas	GA	31534	58-2604618		1,526	OTHER	FOOD	SEE PART IV
(315)	New Harmony Grove Baptist Church	1482 Mary Batten Road	Pearson	GA	31642	58-2378314		3,594	OTHER	FOOD	SEE PART IV
(316)	Ocilla United Methodist Church	101 South Beech Street	Ocilla	GA	31774	58-0806530		82,400	OTHER	FOOD	SEE PART IV
(317)	Salvation Grace Ministries	187 Callaway Drive	Douglas	GA	31535	45-4362429		593	OTHER	FOOD	SEE PART IV
(318)	Seed for Sowing International, Inc.	202 S College Ave	Douglas	GA	31533	27-1437114	3	72,042	OTHER	FOOD	SEE PART IV
(319)	St. Joseph Catholic Church Loaves & Fishes Ministry	2011 Darling Avenue	Waycross	GA	31501	58-1151418		9,826	OTHER	FOOD	SEE PART IV
(320)	St. Paul Catholic Church	4178 US Hwy 441 S	Douglas	GA	31535-5732	58-0566226		14,404	OTHER	FOOD	SEE PART IV
(321)	True Praise Institutional Baptist Church, Inc.	180 Green Oak Street	Douglas	GA	31534	41-2254655		974	OTHER	FOOD	SEE PART IV
(322)	Waycross House of Hope, Inc.	109 Thomas Street	Waycross	GA	31501-3157	26-3373800	3	28,060	OTHER	FOOD	SEE PART IV
(323)	West Green Baptist Church	9761 Hwy 221 N	Westgreen	GA	31567	58-1408893		2,333	OTHER	FOOD	SEE PART IV
(324)	Church of God of Prophecy-Waycross	709 Garlington Ave	Waycross	GA	31503	58-1478311		54,721	OTHER	FOOD	SEE PART IV
(325)	Mt. Zion Holiness Church	906 East Jackson Street	Douglas	GA	31533	41-2200212		9,180	OTHER	FOOD	SEE PART IV
(326)	The Living Hope Ministry Inc	43 Huffer Road	Douglas	GA	31533	58-2505185		6,031	OTHER	FOOD	SEE PART IV
(327)	Liberty Baptist Church	7755 Liberty Church Road	Nicholls	GA	31554	58-1379040		11,284	OTHER	FOOD	SEE PART IV
(328)	Glory Seeds	138 Solid Rock Lane	McRae	GA	31055	26-2543471		24,444	OTHER	FOOD	SEE PART IV
(329)	Thomasville Community Resource Center	501 Varnedoe Street	Thomasville	GA	31792	58-2419321	3	2,741	OTHER	FOOD	SEE PART IV
(330)	ALL 4 KIDS FUTURE, INC.	504 E. Lafayette	Quitman	GA	31643	33-1119129	3	12,686	OTHER	FOOD	SEE PART IV
(331)	Azalea City Prison Ministry	7566 Hwy 84 West	Quitman	GA	31643	58-1692360		34,727	OTHER	FOOD	SEE PART IV
(332)	Behavioral Health Services	3120 N. Oak Street Ext. Suite C	Valdosta	GA	31605	58-2107483		22,153	OTHER	FOOD	SEE PART IV
(333)	Behavioral Health Services of So. GA DD Programs	3120 N Oak St. Extension	Valdosta	GA	31602	58-2107483		390	OTHER	FOOD	SEE PART IV
(334)	Blackshear Presbyterian Childcare Center	432 Main Street	Blackshear	GA	31516	58-2408622		11,290	OTHER	FOOD	SEE PART IV
(335)	Boys and Girls Club of Valdosta	POB 682	Valdosta	GA	31603	23-7067775		961	OTHER	FOOD	SEE PART IV
(336)	Bridges of Hope - Homerville/Argyle (MEN)	1326 Antioch Church Road	Homerville	GA	31634	58-1917635		61,608	OTHER	FOOD	SEE PART IV
(337)	Community Soup Kitchen	601 C North Lee Street	Valdosta	GA	31601	58-1553371	3	43,285	OTHER	FOOD	SEE PART IV
(338)	First Baptist Church Lakeland	15 Main Street	Lakeland	GA	31635	58-6004821		33,730	OTHER	FOOD	SEE PART IV
(339)	Georgia Sheriff's Boys Ranch	5671 Boys Ranch Road	Hahira	GA	31632	58-7800512	3	11,939	OTHER	FOOD	SEE PART IV
(340)	Holy Community Church	505 West 7th Street	Adel	GA	31620	58-2032039		22,354	OTHER	FOOD	SEE PART IV
(341)	Hospice of South Georgia	2263 Pineview Dr	Valdosta	GA	31603	58-2407792	3	1,673	OTHER	FOOD	SEE PART IV
(342)	Trinity United Methodist Church- Jesus Feeds the Needy	603 Belmont Ave	Tifton	GA	31794	58-1557888		45,698	OTHER	FOOD	SEE PART IV
(343)	King Solomon's Missionary Baptist Church	613 WEST SAVANNAH	Valdosta	GA	31601	58-2614703		159	OTHER	FOOD	SEE PART IV
(344)	Lowndes Associated Ministries to People	601 North Lee Street	Valdosta	GA	31601	58-1597700	3	13,329	OTHER	FOOD	SEE PART IV
(345)	Lowndes Drug Action Council, Inc (LODAC)	601 N. Toombs St	Valdosta	GA	31601	58-1999226	3	2,512	OTHER	FOOD	SEE PART IV
(346)	Lowndes Area Adoptive Parent Support Group	POB 372	Valdosta	GA	31603	84-1630781		155,154	OTHER	FOOD	SEE PART IV
(347)	Maranatha SDA Church	500 Nichols Street	Waycross	GA	31503	59-2066139		10,777	OTHER	FOOD	SEE PART IV
(348)	Morningstar Baptist Church	508 W. Stewart Street	Quitman	GA	31643	04-3657354		1,836	OTHER	FOOD	SEE PART IV
(349)	Nashville United Methodist Church	304 South Berrien Street	Nashville	GA	31635	58-2488349		331,727	OTHER	FOOD	SEE PART IV
(350)	Oak Grove MBC - Live Oak, FL	12911 52nd Street	Live Oak	FL	32060	01-0932043		26,198	OTHER	FOOD	SEE PART IV
(351)	Serenity House, Inc.	406 Gilmore Street	Waycross	GA	31501	58-1178589		13,033	OTHER	FOOD	SEE PART IV
(352)	T.E.A.C.H	606 S. Lee Street	Valdosta	GA	31601	58-2623544		2,322	OTHER	FOOD	SEE PART IV
(353)	The Haven (Battered Women's Shelter, Inc.)	POB 5382	Valdosta	GA	31603	58-1812153		10,800	OTHER	FOOD	SEE PART IV
(354)	Universal Love Outreach Center	1605 Hutchinson Dr.	Moultrie	GA	31768	52-2449122		1,923,785	OTHER	FOOD	SEE PART IV
(355)	Valdosta-Lowndes County Habitat for Humanity	2010 Cypress Street	Valdosta	GA	31601	58-1743206	3	1,356	OTHER	FOOD	SEE PART IV
(356)	Valdosta Prison Ministry	POB 382	Valdosta	GA	31603	41-2150224		1,177	OTHER	FOOD	SEE PART IV
(357)	Wholeway House	105 North Oak Street	Valdosta	GA	31601	58-1895463		9,761	OTHER	FOOD	SEE PART IV
(358)	Lowndes County Partnership for Health, INC	203 Woodrow Wilson Drive	Valdosta	GA	31602	58-2405825		173	OTHER	FOOD	SEE PART IV
(359)	The Children's Advocacy Center	200 West Moore Street	Valdosta	GA	31602	58-2301976	3	45	OTHER	FOOD	SEE PART IV
(360)	South Georgia Foster/Adoptive Parent Association	100 maxwell dr	Quitman	GA	31643	51-0515865		211,833	OTHER	FOOD	SEE PART IV
(361)	The Lord Jesus Christ Worldwide Ministries	P.O. Box 821	Quitman	GA	31643	58-2550768		7,317	OTHER	FOOD	SEE PART IV
(362)	Greater Poplar Springs MBC	702 Martin Luther King Drive	Jasper	FL	32052	26-0075927		25,737	OTHER	FOOD	SEE PART IV
(363)	Tift Area Adoptive/Foster Parent Support Group, Inc.	PO Box 242	Tifton	GA	31793	80-0859344		41,688	OTHER	FOOD	SEE PART IV
(364)	Crossing Jordan Landing Inc.	1401 Cypress Street	Valdosta	GA	31601	45-1660469		5,388	OTHER	FOOD	SEE PART IV
(365)	ACTO of Valdosta	2106 Slater St	Valdosta	GA	31602	58-2220573		2,105	OTHER	FOOD	SEE PART IV
(366)	Broken Chains Ministries, Inc.	204 Meadow Street	Thomasville	GA	31792	27-4464904		16,043	OTHER	FOOD	SEE PART IV

Part II - Grants and Other Assistance to Governments and Organizations in the United States

	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
(367)	Decatur County Foster & Adoptive Parents Support Group	2649 Fowlston Drive	Bainbridge	GA	39819	75-3147932		42,609	OTHER	FOOD	SEE PART IV
(368)	Emily's ABACR Personal Care Home, Inc.	649 11th Ave. NW	Cairo	GA	39828	31-6665672		7,732	OTHER	FOOD	SEE PART IV
(369)	Favor Christian Academy	507 North Broad Street	Thomasville	GA	31792	58-2493492		4,357	OTHER	FOOD	SEE PART IV
(370)	Fresh Anointing Deliverance Center	212 Taylor Street	Boston	GA	31626	80-0025124		8,580	OTHER	FOOD	SEE PART IV
(371)	Friends with Jesus, Inc.	200 North Russ Street	Bainbridge	GA	39817	65-0453265		4,126	OTHER	FOOD	SEE PART IV
(372)	Grace Independent Baptist Church	197 Hopewell Church Rd.	Moultrie	GA	31788	14-1842965		969	OTHER	FOOD	SEE PART IV
(373)	Johnson's Personal Care Home	POB 7081	Bainbridge	GA	39819	02-0775931		14,474	OTHER	FOOD	SEE PART IV
(374)	Marguerite Neel Williams Boys and Girls Clubs of SW Ga.	219 Fletcher Street	Thomasville	GA	31792	58-2426833		418	OTHER	FOOD	SEE PART IV
(375)	Outreach Deliverance The Triumphant Church	401 2nd Ave. NW	Moultrie	GA	31768	58-2093881		255,015	OTHER	FOOD	SEE PART IV
(376)	Penfield Christian Homes, Inc.	15320 Highway 129	Alapaha	GA	31622	58-1368663		40,867	OTHER	FOOD	SEE PART IV
(377)	Pleasant Hill Baptist Church of Colquitt County	1048 John Buck McCoy Road	Moultrie	GA	31788	58-1528255		1,809	OTHER	FOOD	SEE PART IV
(378)	The Salvation Army of Thomasville	514 North Madison Street	Thomasville	GA	31799	58-0660607		58,865	OTHER	FOOD	SEE PART IV
(379)	South Georgia House of Hope	2551 Indian Ford Road	Valdosta	GA	31601	20-2620971		3,571	OTHER	FOOD	SEE PART IV
(380)	St. Luke CME Church	305 Chatham Drive	Thomasville	GA	31792	58-1717984		21,244	OTHER	FOOD	SEE PART IV
(381)	Temple Baptist Church	2138 US Hwy 319 South	Moultrie	GA	31776	20-4309597		4,114	OTHER	FOOD	SEE PART IV
(382)	The Knight Group Inc. of Ga.	382 Jowers Road	Whigham	GA	39897	65-1252910		393	OTHER	FOOD	SEE PART IV
(383)	The Rescue Mission Ministries	230 Cherokee Street	Thomasville	GA	31792	58-1879015		58,440	OTHER	FOOD	SEE PART IV
(384)	Thomas County Foster Parent Association	1837 B Green Rd	Boston	GA	31792	58-2590181		33,162	OTHER	FOOD	SEE PART IV
(385)	Thomasville YMCA	1304 Remington Avenue	Thomasville	GA	31792	58-0566255		10,939	OTHER	FOOD	SEE PART IV
(386)	Wellsprings International Ministries	1800 Sanford	Thomasville	GA	31757	27-4642979		470	OTHER	FOOD	SEE PART IV
(387)	Bainbridge Church of God, Inc	205 Independent Street	Bainbridge	GA	39818	20-3230109		31,759	OTHER	FOOD	SEE PART IV
(388)	Heavenly Home, Inc	804 N. Hansell Street	Thomasville	GA	31792	55-0815410		13,867	OTHER	FOOD	SEE PART IV
(389)	Albany Advocacy Resource Center	3005 Old Dawson Road	Albany	GA	31708	58-1234047		47,951	OTHER	FOOD	SEE PART IV
(390)	Albany Rescue Mission	604 N. Monroe St.	Albany	GA	31701	58-1878316		36,756	OTHER	FOOD	SEE PART IV
(391)	Anchorage, Inc.	162 Hampton Lane	Leesburg	GA	31763	58-0644894		36,779	OTHER	FOOD	SEE PART IV
(392)	Boys and Girls Club of Albany, GA	711 N. Monroe St	Albany	GA	31701	58-6046393	3	11,552	OTHER	FOOD	SEE PART IV
(393)	Charms Personal Care Home	904 West Residence Ave.	Albany	GA	31701	58-1684594		9,778	OTHER	FOOD	SEE PART IV
(394)	Charoet of Restoration, Inc.	1213 Douglas Circle	Americus	GA	31709	36-4623088		2,860	OTHER	FOOD	SEE PART IV
(395)	Covenant Word Ministries	17575 Highland Avenue	Arlington	GA	39813	30-0575364		13,371	OTHER	FOOD	SEE PART IV
(396)	Crossroads Bible Ministry	125 E. Merrill St.	Thomasville	GA	31792	45-3795278		6,553	OTHER	FOOD	SEE PART IV
(397)	Cutliff Grove Family Resource Center	841 W. Broad Ave.	Albany	GA	31705	58-2639533		136,551	OTHER	FOOD	SEE PART IV
(398)	Dougherty County Community Coalition	723 W. Ogletheorpe Blvd	Albany	GA	31701	58-2033686		22,539	OTHER	FOOD	SEE PART IV
(399)	Dougherty County Family Literacy Council	406 W. Highland Ave.	Albany	GA	31701	26-0090051		18,676	OTHER	FOOD	SEE PART IV
(400)	East Baker Historical & 21st Century Comm.Corp.	156 N. Roosevelt Ave.	Newton	GA	39870	01-0677281		2,144	OTHER	FOOD	SEE PART IV
(401)	East Towne Civic League Inc.	1112 Inverness	Albany	GA	31705	73-1673247	3	33,089	OTHER	FOOD	SEE PART IV
(402)	First Baptist Church Tifton	404 Love Ave.	Tifton	GA	31794	58-6002155		6,876	OTHER	FOOD	SEE PART IV
(403)	Friendship Childcare Learning Center	413 West Broad Avenue	Albany	GA	31701	58-2572453		3,509	OTHER	FOOD	SEE PART IV
(404)	Georgia Healthy Kids	1819 W. Gordon Ave.	Albany	GA	31707	80-0248640		28,039	OTHER	FOOD	SEE PART IV
(405)	Girls Incorporated of Albany	701 Park Place	Albany	GA	31701	58-1202990	3	1,654	OTHER	FOOD	SEE PART IV
(406)	Happy Hour Ministries Outreach, Inc.	1127 Benjamin Ave, Apartment 4	Albany	GA	31701	80-0252885		9,538	OTHER	FOOD	SEE PART IV
(407)	Harvest Society	419 West Tift Avenue	Albany	GA	31701	32-0302054		13,561	OTHER	FOOD	SEE PART IV
(408)	House of Mercy Community Outreach	711 South Jackson Street	Albany	GA	31701	86-1106130		7,927	OTHER	FOOD	SEE PART IV
(409)	James L. Barnes Community Development	227 South Main Street	Dawson	GA	39842	31-1710747		6,622	OTHER	FOOD	SEE PART IV
(410)	Kairos Prison Ministry International	137 Thimblemill Dr.	Leesburg	GA	31763	59-1970458		3,290	OTHER	FOOD	SEE PART IV
(411)	Liberty House of Albany, Inc.	POB 2046	Albany	GA	31702	58-1454465		9,029	OTHER	FOOD	SEE PART IV
(412)	Mildred Beginner Resources	128 Bennett Drive	Albany	GA	31705	58-2286601		2,112	OTHER	FOOD	SEE PART IV
(413)	Nativity Inc.	2115 S. Madison Ave.	Albany	GA	31701	26-2986432		2,133	OTHER	FOOD	SEE PART IV
(414)	New Life Family Worship Center Inc.	1155 6th Street SE	Moultrie	GA	31768	58-2522025		720	OTHER	FOOD	SEE PART IV
(415)	New Standard Ministries, Inc.	POB 2103	Moultrie	GA	31776	58-2425132		1,140	OTHER	FOOD	SEE PART IV
(416)	New Visions Community Development Center	1506 South Slappey Blvd.	Albany	GA	31701	20-0669652		9,003	OTHER	FOOD	SEE PART IV
(417)	Open Door Comm. Development	POB 209	Pelham	GA	31779	52-2412896		9,547	OTHER	FOOD	SEE PART IV
(418)	Positive Direction Youth Center	434 Oak St	Dawson	GA	39842	31-1789559		54,596	OTHER	FOOD	SEE PART IV
(419)	Raven and Associates of Albany, Inc.	302 Cason Street	Albany	GA	31705	06-1707825		17,442	OTHER	FOOD	SEE PART IV
(420)	Refugio de Salvacion inc/Haven of Hope	525 5th Avenue (suppress location)	Albany	GA	31701	51-0579108		6,397	OTHER	FOOD	SEE PART IV
(421)	Rock of Faith Church, Inc.	8883 Highway 112	Baconton	GA	31716	20-0491974		61,048	OTHER	FOOD	SEE PART IV
(422)	Southwest Georgia CAC - Miller Co.	360 S. 4th Street	Moultrie	GA	31776-3728	58-0957513		6,118	OTHER	FOOD	SEE PART IV
(423)	Southwest Georgia CAC - Moultrie	912 1st Ave. SE	Moultrie	GA	31776-3728	58-0957513		5,237	OTHER	FOOD	SEE PART IV
(424)	SOWEGA Council on Aging	1105 Palmyra Rd.	Albany	GA	31701	58-0965104		31,007	OTHER	FOOD	SEE PART IV
(425)	St. James Missionary Baptist - Baconton	144 MLK Jr. Dr.	Baconton	GA	31716	58-1174453		24,001	OTHER	FOOD	SEE PART IV
(426)	Visions for Sumter Educare Learning Ctr.	409 Elm Ave. Ste.E	Americus	GA	31709	58-1949194		3,326	OTHER	FOOD	SEE PART IV
(427)	Bethesda House of Mercy	1010 Mary St.	Waycross	GA	31503	58-2327554		60,063	OTHER	FOOD	SEE PART IV

Part II - Grants and Other Assistance to Governments and Organizations in the United States

	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
(428)	Bridges of Hope - Alamo (WOMEN)	71 S. Stuckey Road	Alamo	GA 30411	58-1917635			53,022	OTHER	FOOD	SEE PART IV
(429)	Bridges of Hope - Chauncey (MEN)	74 C.L. Tucker Drive	Chauncey	GA 31011	58-1917635			58,530	OTHER	FOOD	SEE PART IV
(430)	Mt. Zion Baptist Church - Pearson	341Mt Zion Church Road	Axson	GA 31624	27-0731114			9,526	OTHER	FOOD	SEE PART IV
(431)	New Hope Recovery Center, Inc.	637 Ethel Street	Douglas	GA 31533	58-2140961			12,820	OTHER	FOOD	SEE PART IV
(432)	Waynesville Church of God	POB 519	Waynesville	GA 31566	58-1947414			50,473	OTHER	FOOD	SEE PART IV
(433)	West Side Baptist Church	P.O. Box 391	Fitzgerald	GA 31750	58-1561004			21,247	OTHER	FOOD	SEE PART IV
(434)	Silver Hill Church	Silver Hill Rd.	Lakeland	GA 31645	58-2429526			27,532	OTHER	FOOD	SEE PART IV
(435)	South Street Community Care House	311 South Street	Valdosta	GA 31601	27-2168591			241,507	OTHER	FOOD	SEE PART IV
(436)	Winds of Change Ministries	POB 16	Cecil	GA 31627	58-2639251			27,025	OTHER	FOOD	SEE PART IV
(437)	Hilltop House	1208 W. Gordon Street	Quitman	GA 31643	83-0432108			21,235	OTHER	FOOD	SEE PART IV
(438)	New Jersey Missionary Baptist Church	835 Pidcock Road	Dixie	GA 31629	30-0457770			3,237	OTHER	FOOD	SEE PART IV
(439)	Adel Church of God	9142 Val Del Rd	Adel	GA 31620	58-2319165			78,801	OTHER	FOOD	SEE PART IV
(440)	Trinity Ministries, Inc	5921 Bemiss Road	Valdosta	GA 31605	80-0917500			2,906	OTHER	FOOD	SEE PART IV
(441)	Jasper Assembly of God	3905 CR 51 N	Jasper	FL 32052	59-3628727			3,049	OTHER	FOOD	SEE PART IV
(442)	Northwoods Church of God	640 Hall Road	Thomasville	GA 31792	04-3839655			730	OTHER	FOOD	SEE PART IV
(443)	Fountain of Praise Ministries, Inc.	605 North Washington Street	Quitman	GA 31643	27-2024152			2,200	OTHER	FOOD	SEE PART IV
(444)	Inspirational Power Source Temple	3114 Tyndall Drive	Valdosta	GA 31602	30-0659739			1,515	OTHER	FOOD	SEE PART IV
(445)	Victory Fellowship Church	19150 US 19 North	Thomasville	GA 31757	58-2534758			93,779	OTHER	FOOD	SEE PART IV
(446)	Piney Grove MBC-Thomasville	677 US Highway 319	Thomasville	GA 31792	58-1940223			3,221	OTHER	FOOD	SEE PART IV
(447)	Walker Street COGIC	138 Walker Street	Camilla	GA 31730	46-0506835			8,654	OTHER	FOOD	SEE PART IV
(448)	U.S. 19 Community Care Services, Inc.	724 Liberty Expressway, SE	Albany	GA 31705	45-4194280			7,116	OTHER	FOOD	SEE PART IV
(449)	New Beginning Missionary Baptist Church	206 North Monroe St	Albany	GA 31701	26-1071072			2,621	OTHER	FOOD	SEE PART IV
(450)	The Mind of Christ of The Living God	7031 Highway 32 West	Douglas	GA 31535	75-3223617			1,350	OTHER	FOOD	SEE PART IV
(451)	Beth 'el Family Worship Center	86 East Meadow Loop Rd	Nicholls	GA 31534	58-1770006			29,198	OTHER	FOOD	SEE PART IV
(452)	Baby Love Child Care	707 Holly Drive	Valdosta	GA 31602	22-3954369			9,404	OTHER	FOOD	SEE PART IV
(453)	Betty Pierson's Place	378 Horseshoe Circle	Thomasville	GA 31757	26-1568786			8,106	OTHER	FOOD	SEE PART IV
(454)	Carter Country Home, Inc	4447 US 41 South	Lake Park	GA 31636	57-1160128			6,408	OTHER	FOOD	SEE PART IV
(455)	Eddie's Personal Care Home	2613 Hwy 84 East	Valdosta	GA 31606	58-2369843			13,376	OTHER	FOOD	SEE PART IV
(456)	Happy Hearts Daycare	720 East Brookwood Place	Valdosta	GA 31601	27-0580870			2,395	OTHER	FOOD	SEE PART IV
(457)	Jesus Loves Me Daycare	342 Pauline Avenue	Ray City	GA 31645	58-2146687			3,476	OTHER	FOOD	SEE PART IV
(458)	Kesha's Kiddie Care	4104 Bevel Cir.	Valdosta	GA 31601	75-3229229			17,439	OTHER	FOOD	SEE PART IV
(459)	Little Children KOL Daycare	3841 Brookfield Drive	Valdosta	GA 31601	25-8514611			6,443	OTHER	FOOD	SEE PART IV
(460)	Pinnacle Way, Inc.	825 Wright St.	Thomasville	GA 31799	54-2192269			17,441	OTHER	FOOD	SEE PART IV
(461)	Sparks Retirement Home	304 S. Goodman St	Sparks	GA 31647	58-2189060			30,121	OTHER	FOOD	SEE PART IV
(462)	Hidden Oaks Farm ALF	7216 NW 22nd Drive	Jennings	FL 32053	05-0553564			17,320	OTHER	FOOD	SEE PART IV
(463)	Teachable Moments Learning Center	501 West 8th Street	Adel	GA 31620	46-1837568			249	OTHER	FOOD	SEE PART IV
(464)	Wellsprings Place, Inc.	518 E. Clay Street	Thomasville	GA 31799	26-1713721			19,967	OTHER	FOOD	SEE PART IV
(465)	Safe Haven Child Care	925 East Main Street	Blackshear	GA 31516	20-2301308			30,986	OTHER	FOOD	SEE PART IV

2 Enter total number of section 501(c)(3) and governmental organizations listed in the line 1 table > 61
 3 Enter total number of other organizations listed in the line 1 table> 404