

Return of Organization Exempt From Income Tax

Form 990

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning and ending
B Check if applicable:
C Name of organization: DELIVERING GOOD, INC.
D Employer identification number: 13-3300271
E Telephone number: (212) 279-5493
G Gross receipts \$: 159,559,372.
H(a) Is this a group return for subordinates?
H(b) Are all subordinates included?
I Tax-exempt status:
J Website: WWW.DELIVERING-GOOD.ORG
K Form of organization:
L Year of formation: 1985
M State of legal domicile: NY

Part I Summary

Table with 3 main sections: Activities & Governance (lines 1-7), Revenue (lines 8-12), and Expenses (lines 13-19). Includes sub-sections for Net Assets or Fund Balances (lines 20-22).

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.

Signature of officer: RON ROSTOW, CHIEF FINANCE & ADMIN. OFFICER
Preparer: EVA MRUK, PKF O'CONNOR DAVIES ADVISORY, LLC
Date: 11/14/23
PTIN: P00543254

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO RECEIVE, ADMINISTER AND DISTRIBUTE PRODUCT DONATIONS FOR CHARITABLE, EDUCATIONAL, AND DISASTER RELIEF PURPOSES TO POOR, DISTRESSED, AND UNDERPRIVILEGED CHILDREN, ADULTS, AND FAMILIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No 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 [X] No If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 154,884,459. including grants of \$ 154,884,459.) (Revenue \$ 0.) DELIVERING GOOD'S PROGRAM OF NATIONWIDE AID ALLOWS US TO PROVIDE BRAND NEW CLOTHING AND ESSENTIALS TO FAMILIES AND INDIVIDUALS IN NEED IN ALL 50 U.S. STATES AND THE DISTRICT OF COLUMBIA, AS WELL AS NATIONS ACROSS THE WORLD. WORKING WITH A NETWORK OF LOCALLY-LED COMMUNITY PARTNER NONPROFITS, WE SERVE THE CHILDREN, FAMILIES, AND INDIVIDUALS SUFFERING OR AT RISK FROM A WIDE RANGE OF DISADVANTAGED CIRCUMSTANCES. POPULATIONS REACHED BY OUR PROGRAMS INCLUDE FOSTER CHILDREN, CHILDREN OF INCARCERATED PARENTS, THE HOMELESS, INDIVIDUALS BELOW THE POVERTY LINE, MILITARY FAMILIES, SEVERELY ILL CHILDREN, VICTIMS AFFECTED BY NATURAL DISASTERS, ADULTS IN NEED, AND MANY MORE.

NEW PRODUCT DONATIONS INCLUDE: CLOTHING, SHOES, BOOKS, EDUCATIONAL 4b (Code:) (Expenses \$ 2,407,512. including grants of \$ 85,000.) (Revenue \$ 0.) OTHER PROGRAMS - DELIVERING GOOD CONDUCTS A RANGE OF ADDITIONAL, INNOVATIVE PROGRAMS TO PROVIDE USEFUL, NEW PRODUCTS TO PEOPLE IN NEED. THESE INCLUDE:

- RETAIL PROGRAMS - DELIVERING GOOD'S RETAIL PROGRAM MATCHES COMMUNITY PARTNERS WITH LOCAL STORES OF NATIONAL CHAINS TO SECURE DONATIONS OF NECESSARY MERCHANDISE FOR CHILDREN, ADULTS AND FAMILIES IN NEED. THESE PROGRAMS PROVIDE AN OPPORTUNITY FOR COMPANIES TO GIVE BACK IN A MEANINGFUL WAY, AND PRESENT AN EFFICIENT, UNIFORM DONATION PROCESS ACROSS STORES IN LOCAL COMMUNITIES.

- SUSTAINABILITY AND ENVIRONMENTAL CARE - DELIVERING GOOD IS NOT ONLY A SOURCE OF SUPPORT FOR COMMUNITIES, BUT A DEDICATED PARTNER IN REDUCING

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 157,291,971.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 42		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 41		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
RON ROSTOW, CHIEF FINANCIAL AND ADMINISTRATIVE OFFICER - (212) 279-5493
266 W 37TH STREET, 22ND FLOOR, NEW YORK, NY 10018

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) RON ROSTOW CHIEF FINANCIAL & ADMIN. OFFICER	40.00			X			169,114.	0.	17,168.	
(2) MERRIE KELLER DIR. OF PRODUCT PROCUREMENT	40.00				X		174,400.	0.	7,096.	
(3) MATTHEW FASCIANO PRESIDENT & CEO, AS OF JULY 2022	40.00	X		X			166,923.	0.	3,819.	
(4) DONNA CHARLES DIR. OF STRATEGIC INITIATIVES	40.00				X		155,719.	0.	14,758.	
(5) HEATHER REYNOLDS DIR. OF MARKETING AND COMMUNICATIONS	40.00				X		139,525.	0.	16,742.	
(6) CARLA FATTAL SR. MGR. PRODUCT DONATIONS	40.00				X		121,343.	0.	11,974.	
(7) JOEL WEISS DIR. OF DEVELOPMENT, THRU SEPT 2022	40.00				X		121,362.	0.	120.	
(8) LISA GURWITCH PRESIDENT & CEO, THRU FEB 2022	40.00	X		X			107,858.	0.	6,953.	
(9) GARY SIMMONS, INTERIM PRES/CEO, FEB - JULY 2022	40.00	X		X			0.	0.	0.	
(10) ANDREA WEISS CHAIR	1.00	X		X			0.	0.	0.	
(11) VINCENT DELL'OSA VICE CHAIR	1.00	X		X			0.	0.	0.	
(12) TOM NASTOS VICE PRESIDENT	1.00	X		X			0.	0.	0.	
(13) VINCENT ADAMS TREASURER	1.00	X		X			0.	0.	0.	
(14) MICHAEL GOLDBERG SECRETARY	1.00	X		X			0.	0.	0.	
(15) CAROLE POSTAL ASST. SECRETARY	1.00	X		X			0.	0.	0.	
(16) JOE ABRUZZO DIRECTOR	0.50	X					0.	0.	0.	
(17) KENNETH BARONOFF DIRECTOR	0.50	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) GORDON BELL DIRECTOR	0.50	X						0.	0.	0.
(19) STACY BERNS DIRECTOR	0.50	X						0.	0.	0.
(20) MONICA BERTRAN DIRECTOR	0.50	X						0.	0.	0.
(21) KAREN BROMLEY DIRECTOR	0.50	X						0.	0.	0.
(22) SASHI BROWN DIRECTOR	0.50	X						0.	0.	0.
(23) HAIM DABAH DIRECTOR	0.50	X						0.	0.	0.
(24) RICK DARLING DIRECTOR	0.50	X						0.	0.	0.
(25) ABBEY DONEGER DIRECTOR	0.50	X						0.	0.	0.
(26) KENNETH DOWNING DIRECTOR	0.50	X						0.	0.	0.
1b Subtotal								1,156,244.	0.	78,630.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,156,244.	0.	78,630.

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 8

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		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? If "Yes," complete Schedule J for such individual	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? If "Yes," complete Schedule J for such person		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
SUNTECK LOGISTICS INC 146 FORREST AVE, RUNNEMEDE, NJ 08078	FREIGHT SERVICE	547,695.
42ND STREET LESSEE, LLC, 110 EAST 42ND STREET 3RD FLOOR, NEW YORK, NY 10017	SPECIAL EVENT SERVICES	200,069.
S&G CONSULTING, 3701 BRASSFIELD OAKS DRIVE, GREENSBORO, NC 27410	EXECUTIVE CONSULTING	172,232.

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 3

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(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			
(27) ALLAN ELLINGER DIRECTOR	0.50	X					0.	0.	0.	
(28) CHARISSE FORD HUGHES DIRECTOR	0.50	X					0.	0.	0.	
(29) KATHERINE GOLD DIRECTOR	0.50	X					0.	0.	0.	
(30) DAVID GREENSTEIN DIRECTOR	0.50	X					0.	0.	0.	
(31) STEVE HANON DIRECTOR	0.50	X					0.	0.	0.	
(32) EDWARD HERTZMAN DIRECTOR	0.50	X					0.	0.	0.	
(33) DEBRA JOESTER DIRECTOR	0.50	X					0.	0.	0.	
(34) HOWARD KAHN DIRECTOR	0.50	X					0.	0.	0.	
(35) CAROL LAPIDUS DIRECTOR	0.50	X					0.	0.	0.	
(36) MARK LEVENFUS DIRECTOR	0.50	X					0.	0.	0.	
(37) MARC MASTRONARDI DIRECTOR	0.50	X					0.	0.	0.	
(38) SUSAN S. MCLAIN DIRECTOR	0.50	X					0.	0.	0.	
(39) JEANETTE NOSTRA-KATZ DIRECTOR	0.50	X					0.	0.	0.	
(40) KENNETH OHASHI DIRECTOR	0.50	X					0.	0.	0.	
(41) EMILY OLAH DIRECTOR	0.50	X					0.	0.	0.	
(42) DAN ORWIG DIRECTOR	0.50	X					0.	0.	0.	
(43) QUENTIN PELL DIRECTOR	0.50	X					0.	0.	0.	
(44) JASON RABIN DIRECTOR	0.50	X					0.	0.	0.	
(45) ELIOT ROSENFELD DIRECTOR	0.50	X					0.	0.	0.	
(46) HEBE SCHECTER DIRECTOR	0.50	X					0.	0.	0.	
Total to Part VII, Section A, line 1c										

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (Individual trustee or director, Institutional trustee, Officer, Key employee, Highest compensated employee, Former), (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include: (47) MICHAEL SETOLA, DIRECTOR; (48) JOE SHAMIE, DIRECTOR; (49) CARI SHAPIRO, DIRECTOR; (50) HARESH THARANI, DIRECTOR.

Total to Part VII, Section A, line 1c

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	2,345,920.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	156,440,495.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 154,884,459.				
	h Total. Add lines 1a-1f		158786415.				
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		93,078.			93,078.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	449,398.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	515,748.				
	c Gain or (loss)	7c	-66,350.				
	d Net gain or (loss)		-66,350.			-66,350.	
8 a Gross income from fundraising events (not including \$ 2,345,920. of contributions reported on line 1c). See Part IV, line 18	8a		229,006.				
			481,265.				
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events			-252,259.		-252,259.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a OTHER REVENUE	Business Code	900099	1,475.		1,475.	
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d			1,475.			
12 Total revenue. See instructions			158562359.	0.	0.	-224,056.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	143,806,395.	143,806,395.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	11,163,064.	11,163,064.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	471,835.	90,016.	263,247.	118,572.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	172,232.	64,952.	42,912.	64,368.
7 Other salaries and wages	1,327,703.	713,709.	194,515.	419,479.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	30,485.	17,343.	3,258.	9,884.
9 Other employee benefits	107,587.	50,857.	23,382.	33,348.
10 Payroll taxes	153,962.	69,283.	38,490.	46,189.
11 Fees for services (nonemployees):				
a Management				
b Legal	537.	285.	81.	171.
c Accounting	50,318.	26,681.	7,628.	16,009.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	3,077.		3,077.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	857,911.	771,164.	74,932.	11,815.
12 Advertising and promotion	13,213.	7,928.		5,285.
13 Office expenses	69,751.	30,152.	14,868.	24,731.
14 Information technology	81,783.	36,763.	20,464.	24,556.
15 Royalties				
16 Occupancy	77,329.	34,798.	19,332.	23,199.
17 Travel	20,899.	16,719.		4,180.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	555.	305.	83.	167.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,323.	1,495.	831.	997.
23 Insurance	8,584.		8,584.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MERCHANDISE PURCHASED	380,259.	380,259.		
b STATE FILING FEES	16,372.	9,005.		7,367.
c OTHER DIRECT OPERATING	1,844.	798.	476.	570.
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	158,819,018.	157,291,971.	716,160.	810,887.
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	631,024.	1	545,077.
	2 Savings and temporary cash investments	98,745.	2	800,064.
	3 Pledges and grants receivable, net	1,211,437.	3	411,900.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	23,500.	9	115,733.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 274,666.		
	b Less: accumulated depreciation	10b 270,230.	6,678.	10c 4,436.
	11 Investments - publicly traded securities	2,007,697.	11	1,312,275.
	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		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	3,979,081.	16	3,189,485.	
Liabilities	17 Accounts payable and accrued expenses	353,728.	17	221,699.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	353,728.	26	221,699.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,911,523.	27	1,537,275.
	28 Net assets with donor restrictions	1,713,830.	28	1,430,511.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	3,625,353.	32	2,967,786.
	33 Total liabilities and net assets/fund balances	3,979,081.	33	3,189,485.

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	158,562,359.
2	Total expenses (must equal Part IX, column (A), line 25)	2	158,819,018.
3	Revenue less expenses. Subtract line 2 from line 1	3	-256,659.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,625,353.
5	Net unrealized gains (losses) on investments	5	-312,028.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-88,880.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,967,786.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2022)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization DELIVERING GOOD, INC.	Employer identification number 13-3300271
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	189109706	140660324	291286253	233310925	158786415	1013153623.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	189109706	140660324	291286253	233310925	158786415	1013153623.
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)						472386018
6 Public support. Subtract line 5 from line 4.						540767605

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	189109706	140660324	291286253	233310925	158786415	1013153623.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,011.	28,651.	40,557.	61,642.	93,078.	224,939.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,501.	5,669.	10,028.	18,471.	1,475.	38,144.
11 Total support. Add lines 7 through 10						1013416706.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	53.36 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	60.87 %
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<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 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

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

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER REVENUE

2018 AMOUNT: \$ 2,501.

2019 AMOUNT: \$ 5,669.

2020 AMOUNT: \$ 10,028.

2021 AMOUNT: \$ 18,471.

2022 AMOUNT: \$ 1,475.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

DELIVERING GOOD, INC.

Employer identification number

13-3300271

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization DELIVERING GOOD, INC.	Employer identification number 13-3300271
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>62,157,468.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>26,626,645.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>7,325,025.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>7,093,184.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>6,804,336.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>5,910,698.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization DELIVERING GOOD, INC.	Employer identification number 13-3300271
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>4,159,138.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
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	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization DELIVERING GOOD, INC.	Employer identification number 13-3300271
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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
<u>1</u>	MIXED APPAREL _____ _____ _____	\$ <u>62,157,468.</u>	<u>12/31/22</u>
<u>2</u>	MEN'S APPAREL _____ _____ _____	\$ <u>26,626,645.</u>	<u>12/31/22</u>
<u>3</u>	ENTERTAINMENT GOODS _____ _____ _____	\$ <u>7,325,025.</u>	<u>12/31/22</u>
<u>4</u>	MIXED APPAREL _____ _____ _____	\$ <u>7,093,184.</u>	<u>12/31/22</u>
<u>5</u>	CHILDREN'S APPAREL _____ _____ _____	\$ <u>6,804,336.</u>	<u>12/31/22</u>
<u>6</u>	MIXED APPAREL _____ _____ _____	\$ <u>5,910,698.</u>	<u>12/31/22</u>

Name of organization DELIVERING GOOD, INC.	Employer identification number 13-3300271
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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	MIXED APPAREL _____ _____ _____	\$ 4,159,138.	12/31/22
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization DELIVERING GOOD, INC.	Employer identification number 13-3300271
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization **DELIVERING GOOD, INC.** Employer identification number **13-3300271**

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

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

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

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

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

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	992,719.	921,436.	863,697.		
b Contributions		12,311.		800,000.	
c Net investment earnings, gains, and losses	-166,390.	93,871.	83,739.	63,697.	
d Grants or scholarships					
e Other expenditures for facilities and programs	35,726.	34,899.	26,000.		
f Administrative expenses					
g End of year balance	790,603.	992,719.	921,436.	863,697.	

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 0.0000 %
 - b Permanent endowment 100 %
 - c Term endowment 0.0000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		220,431.	220,431.	0.
d Equipment		53,430.	48,994.	4,436.
e Other		805.	805.	0.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 4,436.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	158,669,773.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-312,028.	
b	Donated services and use of facilities	2b	437,194.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	125,166.
3	Subtract line 2e from line 1		3	158,544,607.
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	17,752.	
c	Add lines 4a and 4b		4c	17,752.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	158,562,359.

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

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

1	Total expenses and losses per audited financial statements		1	159,327,340.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	437,194.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	88,880.	
e	Add lines 2a through 2d		2e	526,074.
3	Subtract line 2e from line 1		3	158,801,266.
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	17,752.	
c	Add lines 4a and 4b		4c	17,752.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	158,819,018.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE ORGANIZATION HAS ONE DONOR-RESTRICTED ENDOWMENT FUND: STUDENTS GOING THE EXTRA MILE ENDOWMENT FUND (ALSO KNOWN AS THE LARI STANTON FUND). ALL INVESTMENT INCOME FROM THIS FUND IS TO BE SPENT FOR SPECIFIED CHARITABLE PURPOSES.

PART X, LINE 2:

THE ORGANIZATION RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. MANAGEMENT HAS DETERMINED THAT THE ORGANIZATION HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION AND/OR DISCLOSURE. THE ORGANIZATION IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING

Part XIII Supplemental Information (continued)

JURISDICTIONS FOR TAX YEARS PRIOR TO DECEMBER 31, 2019.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

OTHER CONTRIBUTIONS REPORTED ON PART VIII, LINE 1 17,752.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

LOSS ON PLEDGES RECEIVABLE 88,880.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

OTHER CONTRIBUTIONS REPORTED ON PART VIII, LINE 1 17,752.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization **DELIVERING GOOD, INC.** Employer identification number **13-3300271**

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		11,163,064.
3 a Subtotal	0	0			11,163,064.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			11,163,064.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	POVERTY ASSISTANCE	0.		10560668	ASSORTED APPAREL AND OTHER ITEMS	FMV
		NORTH AMERICA	POVERTY ASSISTANCE	0.		602,396.	ASSORTED APPAREL AND OTHER ITEMS	FMV

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **2**

3 Enter total number of other organizations or entities **0**

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

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

Schedule F (Form 990) 2022

Part V Supplemental Information

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

PART I, LINE 2:

RECIPIENT ORGANIZATIONS MUST PROVIDE DOCUMENTATION OF THEIR EXEMPT STATUS IN THEIR COUNTRY BEFORE THEY ARE INITIALLY CONSIDERED FOR NON-CASH ASSISTANCE. FURTHERMORE, THESE ORGANIZATIONS MUST PROVIDE DISTRIBUTION REPORTS AND NOTIFY DELIVERING GOOD, INC. OF ANY CHANGES TO THEIR EXEMPT STATUS PRIOR TO RECEIVING ADDITIONAL SUPPORT.

PART I, LINE 3:

THE ACCRUAL METHOD IS USED TO ACCOUNT FOR EXPENDITURES.

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: DELIVERING GOOD, INC. Employer identification number: 13-3300271

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations, b Internet and email solicitations, c Phone solicitations, d In-person solicitations, e Solicitation of non-government grants, f Solicitation of government grants, g Special fundraising events

- 2 a Did the organization have a written or oral agreement with any individual... b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (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 col. (i), (vi) Amount paid to (or retained by) organization.

Total

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.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		ANNUAL GALA (event type)	W.O.I. LUNCHEON (event type)	NONE (total number)	
Revenue	1	Gross receipts	2,189,057.	385,869.	2,574,926.
	2	Less: Contributions	2,003,063.	342,857.	2,345,920.
	3	Gross income (line 1 minus line 2)	185,994.	43,012.	229,006.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	193,473.	30,221.	223,694.
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	147,203.	110,368.	257,571.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			481,265.
11	Net income summary. Subtract line 10 from line 3, column (d)			-252,259.	

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

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

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

Name _____

Address _____

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

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

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

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

Part IV Supplemental Information *(continued)*

Multiple horizontal lines for supplemental information.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **DELIVERING GOOD, INC.** Employer identification number **13-3300271**

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
914 CARES, INC. 901 N. BROADWAY SUITE 17 WHITE PLAINS, NY 10603	47-5210636	501(C)(3)	0.	54,367.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
A GIFT FOR TEACHING, INC. 6501 MAGIC WAY, BLDG 400C ORLANDO, FL 32809-5677	59-3515162	501(C)(3)	0.	174,178.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
A GRATEFUL MIND INTERNATIONAL, INC. - PO BOX 721915 - ORLANDO, FL 32872-1915	45-3260393	501(C)(3)	0.	19,630.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
A NEW LEAF, INC./LA MESITA FAMILY HOMELESS SHELTER - 2245 WEST ELLA STREET, BLDG A - MESA, AZ 85201	86-0256667	501(C)(3)	0.	6,337.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ACACIA NETWORK HOUSING, INC. 915 WESTCHESTER AVENUE, FLOOR BRONX, NY 10459	26-0076866	501(C)(3)	0.	7,493.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
AGGIELAND PREGNANCY OUTREACH 410 HARVEY ROAD, SUITE 300 COLLEGE STATION, TX 77840	74-2893803	501(C)(3)	0.	5,247.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **245.**

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

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

Schedule I (Form 990) 2022

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AID FOR KIDS 18 MARKET SQ HOULTON, ME 04730-1733	20-3918985	501(C)(3)	0.	441,326.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ALPHA PROJECT FOR THE HOMELESS 3737 FIFTH AVENUE, SET 203 SAN DIEGO, CA 92103	33-0215585	501(C)(3)	0.	7,075.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
AMERICA CARES TOO 3120 ADAMS STREET BELLWOOD, IL 60104-2230	27-4996382	501(C)(3)	0.	7,878.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ANCHOR HOUSE, INC. 482 CENTRE STREET TRENTON, NJ 08611	22-2229995	501(C)(3)	0.	7,482.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ANSHE EMETH COMMUNITY DEVELOPMENT CORPORATION - 222 LINGSTON AVE - NEW BRUNSWICK, NJ 08901	22-3625904	501(C)(3)	0.	16,172.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ARAB AMERICAN FAMILY SUPPORT CENTER - 150 COURT STREET, SUITE 3 - BROOKLYN, NY 11201-6274	11-3167245	501(C)(3)	0.	310,270.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ARIZONA HELPING HANDS 3110 E. THUNDERBIRD ROAD, STE 100 PHOENIX, AZ 85032	86-0935988	501(C)(3)	0.	317,919.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ARIZONA HYGIENE FOR HOPE 1830 WEST FILLMORE STREET PHOENIX, AZ 85007	46-4998097	501(C)(3)	0.	57,027.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ARIZONA STATE HEAD START ASSOCIATION INC - PO BOX 11281 - CASA GRANDE, AZ 85130-0150	86-0815229	501(C)(3)	0.	7,548.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSISTANCE LEAGUE OF LOS ANGELES/FOSTER CHILDREN'S RESOURCE CENTER - 1370 NORTH STREET ANDREWS PLACE - LOS ANGELES, CA 90028	95-1641960	501(C)(3)	0.	13,771.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
AUC INSTITUTE FOR CAREER STUDIES 1115 MT ZION ROAD #C MORROW, GA 30260	27-3311281	501(C)(3)	0.	60,000.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
BABY BUNDLES 8349-M ARROWRIDGE BLVD CHARLOTTE, NC 28273	27-3384164	501(C)(3)	0.	993,006.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
BABY2BABY 6435 WILSHIRE BOULEVARD LOS ANGELES, CA 90048-4907	95-4302067	501(C)(3)	0.	1,230,038.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
BACKPACK BEGINNINGS 3711 ALLIANCE DRIVE GREENSBORO, NC 27407	46-1251223	501(C)(3)	0.	41,464.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
BEVERLY'S BIRTHDAYS 31 ROBBINS STATION ROAD NORTH HUNTINGDON, PA 15642	45-4248006	501(C)(3)	0.	374,747.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
BIRTHRIGHT OF GREATER HARTFORD, INC. - 914 MAIN ST STE 216 - EAST HARTFORD, CT 06108-2275	23-7378225	501(C)(3)	0.	5,394.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
BLESSINGS OF HOPE EMPOWERMENT OUTREACH, INC. - 435 FOREST DR N - HAVANA, FL 32333	46-4137314	501(C)(3)	0.	74,825.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
BOONE COUNTY CARES 900 WEST THIRD STREET BOONE, IA 50036	42-1204003	501(C)(3)	0.	5,046.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF METROPOLITAN BALTIMORE - 11 WEST MOUNT VERNON PLACE - BALTIMORE, MD 21201	26-4371125	501(C)(3)	0.	6,463.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
BREAD OF LIFE MINISTRY, INC. 13188 SPURGEON ROAD LYNNVILLE, IN 47619	35-1672783	501(C)(3)	0.	72,240.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
BRIDGE OVER TROUBLED WATERS 47 WEST STREET BOSTON, MA 02111	04-2472126	501(C)(3)	0.	77,200.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
BROCKTON NEIGHBORHOOD HEALTH CENTER - 63 MAIN STREET - BROCKTON, MA 02301-4042	04-3165044	501(C)(3)	0.	16,201.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CARING FOR OTHERS 3537 BROWNS MILL ROAD SE, SUITE 2 ATLANTA, GA 30354-2706	16-1622195	501(C)(3)	0.	7,753,677.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CARLOS DUNLAP FOUNDATION, INC. 5857 DORCHESTER ROAD NORTH CHARLESTON, SC 29418	46-2898940	501(C)(3)	0.	1,239,437.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CASA CENTRAL 1343 NORTH CALIFORNIA AVENUE CHICAGO, IL 60622-2803	36-2728618	501(C)(3)	0.	14,512.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CATHOLIC CHARITIES CARE CAMPUS 466 S BELLVIEW MESA, AZ 85204	13-4148824	501(C)(3)	0.	210,501.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CATHOLIC CHARITIES OF THE DIOCESE OF ST. CLOUD - 911 18TH STREET N - WILLMAR, MN 56201	41-0737799	501(C)(3)	0.	7,240.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC CHARITIES OF SOUTHERN NEVADA - 1501 LAS VEGAS BOULEVARD NORTH - LAS VEGAS, NV 89101-1120	88-0059425	501(C)(3)	0.	7,113.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CENTRAL CITY NEIGHBORHOOD PARTNERS 501 SOUTH BIXEL STREET LOS ANGELES, CA 90017-2007	95-4837709	501(C)(3)	0.	463,990.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHERRY KIDS 420 EAST 111TH STREET, APT 2205 NEW YORK, NY 10029-3026	27-0968429	501(C)(3)	0.	210,372.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHILD CRISIS CENTER OF EL PASO 2100 N STEVENS EL PASO, TX 79930	74-2055761	501(C)(3)	0.	7,390.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHILD FUTURE INTERNATIONAL, INC. 100 EAST EUCLID AVENUE, SUITE 113 DES MOINES, IA 50313-4581	46-1660645	501(C)(3)	0.	5,486.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHILDREN'S AID CLUB 2494 NW 25TH STREET BOCA RATON, FL 33431	59-6194364	501(C)(3)	0.	7,474.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHILDREN'S HEALTH CARE FOUNDATION (DBA CHILDREN'S MINNESOTA) - 5901 LINCOLN DR - EDINA, MA 55436	41-1814223	501(C)(3)	0.	5,714.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHILDREN'S HOME SOCIETY - PENSACOLA - 1300 NORTH PALAFOX STREET, SUITE 103 - PENSACOLA, FL 32501	59-0192430	501(C)(3)	0.	5,965.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHILDREN'S HOMES, INC. 5515 WALCOTT ROAD PARAGOULD, AR 72450-3398	71-0356241	501(C)(3)	0.	6,636.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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CHILDREN'S HUNGER FUND 4940 EISENHAWER ROAD, BLDG. A #146 SAN ANTONIO, TX 78218	95-4335462	501(C)(3)	0.	4,076,855.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHILDREN'S RESOURCE NETWORK OF THE CENTRAL COAST - 220 HOUSTON WAY - PISMO BEACH, CA 93449	27-1473791	501(C)(3)	0.	5,092.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHRIST OWNED CHURCH LEARNING FACILITY - 383 BRADDOCK ROAD - SMYRNA, DE 19977-1588	61-1459415	501(C)(3)	0.	6,233.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHRISTIAN APPALACHIAN PROJECT 441 KY 2417 CORBIN, KY 40701-6503	61-0661137	501(C)(3)	0.	371,395.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHRISTIAN UNITY MISSIONARY BAPTIST INC - 5815 E. 38TH STREET - INDIANAPOLIS, IN 46218	41-2087632	501(C)(3)	0.	5,130.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHURCH OF BIBLE UNDERSTANDING HAITI - 400 GILLIGAN STREET - SCRANTON, PA 18508-2569	23-7184229	501(C)(3)	0.	7,094.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CHURCH OF THE HOLY APOSTLES 296 9TH AVE NEW YORK, NY 10001	13-2892297	501(C)(3)	0.	257,970.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CIRCLES OF CARE 5333 EVERHART ROAD, SUITE 150B CORP CHRISTI, TX 78411-4835	74-2927898	501(C)(3)	0.	7,186.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CIS DEVELOPMENT FOUNDATION, INC 77 MILLTOWN RD E BRUNSWICK, NJ 08816-2302	22-3304404	501(C)(3)	0.	9,579,529.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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CITIZENS CARING FOR CHILDREN, INC. 730 WEST WILSHIRE BOULEVARD, SUITE OKLAHOMA CITY, OK 73116-7738	73-1230194	501(C)(3)	0.	389,955.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CITY UNION MISSION 1100 E 11TH ST KANSAS CITY, MO 64106-3095	44-6005481	501(C)(3)	0.	7,905.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
COMMUNITY ACTION OF GREENE COUNTY, INC. - 7856 US HIGHWAY 9W - CATSKILL, NY 12414-5043	14-1498767	501(C)(3)	0.	7,000.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
COMMUNITY ACTION PARTNERSHIP OF LANCASTER AND SAUNDERS COUNTIES - 210 O STREET - LINCOLN, NE 68508	47-0491162	501(C)(3)	0.	5,609.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
COMMUNITY ACTION SERVICE CENTER INC. DBA RISE - 116 NORTH MAIN STREET - HIGHTSTOWN, NJ 08520-3247	22-2405087	501(C)(3)	0.	18,231.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
COMMUNITY SHELTER SERVICES 655 WEST 16TH STREET ERIE, PA 16502-1606	25-1365966	501(C)(3)	0.	5,168.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
COMUNIDAD LATINX INC 51-02 103RD STREET CORONA, NY 11368	85-4051742	501(C)(3)	0.	152,531.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
COPS CARE CANCER FOUNDATION, INC. 1711 HAMILTON AVENUE, SUITE K SAN JOSE, CA 95125-5426	52-2444747	501(C)(3)	0.	14,676.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
COVENANT COMMUNITY SERVICES, INC. 1700 NORTH CHESTER AVENUE BAKERSFIELD, CA 93308-2563	42-1584502	501(C)(3)	0.	7,458.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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COVENANT HOUSE NEW JERSEY 330 WASHINGTON STREET NEWARK, NJ 07102	13-3537710	501(C)(3)	0.	56,100.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
CREATIVE SOLUTIONS FOR KIDS & FAMILIES - 24760 SUNNYMEAD BOULEVARD, SUITE 102 - MORENO VALLEY, CA 92553-3791	20-2882315	501(C)(3)	0.	13,631.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
DAYBREAK 605 S PATTERSON BLVD DAYTON, OH 45402	31-0864474	501(C)(3)	0.	79,070.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
DECISIONS OR DESTINY INC. 1219 GREYSTONE AVENUE RICHMOND, VA 23224-4905	20-2113908	501(C)(3)	0.	11,608.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
DISABLED VETERANS NATIONAL FOUNDATION - 5001 FORBES BLVD SUITE G - LANHAM, MD 20706	26-1446183	501(C)(3)	0.	107,788.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
DISCOVERY HOME CARE 500 LANIER AVENUE MOUNT HOLLY, NC 28120-1866	02-0762132	501(C)(3)	0.	7,850.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
DOLLARS FOR DAET 1000 DON BLAIR DRIVE SMYRNA, TN 37167-9308	81-0650111	501(C)(3)	0.	8,181.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
DOMESTIC VIOLENCE ADVOCACY CENTER/TREE HOUSE HAVEN - 1515 CASTILLE STREET - CELEBRATION, FL 34747	26-1997681	501(C)(3)	0.	136,987.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
DOWNTOWN RESCUE MISSION, INC. 1400 EVANGEL DRIVE NW HUNTSVILLE, AL 35816-2210	63-0735295	501(C)(3)	0.	7,723.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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DURHAM RESCUE MISSION 1201 EAST MAIN STREET DURHAM, NC 27701-4028	58-1482590	501(C)(3)	0.	6,171.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
EAST HARRIS COUNTY EMPOWERMENT COUNCIL - 11821 EAST FREEWAY #500 - HOUSTON, TX 77029	27-0377576	501(C)(3)	0.	537,565.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
EASTSIDE BABY CORNER 1510 NW MAPLE STREET ISSAQUAH, WA 98027-8973	91-1617032	501(C)(3)	0.	5,431.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
EL CENTRO INC. 650 MINNESOTA AVENUE, FLOOR 1 KANSAS CITY, KS 66101-2800	48-1167383	501(C)(3)	0.	5,096.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
EMERALD CARE INTERNATIONAL 1200 DEL MAR CLUB DRIVE DACULA, GA 30019-7599	47-1570217	501(C)(3)	0.	7,669.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
EPIDAURUS AMITY FOUNDATION OF CALIFORNIA - 721 N. 4TH AVENUE - TUCSON, AZ 85705	77-0418201	501(C)(3)	0.	2,588,306.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ETHIOPIAN COMMUNITY DEVELOPMENT COUNCIL, INC. - 5250 LEETSDALE DRIVE, SUITE 200 - DENVER, CO 80246	52-1308986	501(C)(3)	0.	8,724.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
EVERY CHILD'S DREAM FOUNDATION 2048 ROSEBAY STREET WESTLAKE VLG, CA 91361-1821	27-1043421	501(C)(3)	0.	45,855.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FACING HUNGER 1327 7TH AVE HUNTINGTON, WV 25701-2903	55-0625915	501(C)(3)	0.	673,839.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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FAMILIES HELPING FAMILIES OF IOWA 3516 CENTER POINT ROAD NE CEDAR RAPIDS, IA 52402-5525	71-0985937	501(C)(3)	0.	30,427.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FAMILY & CHILDREN'S AID, INC. 75 WEST ST DANBURY, CT 06810-6528	06-0888719	501(C)(3)	0.	5,606.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FAMILY SERVICES BABY BOUTIQUE 1900 RAINIER AVENUE SOUTH SEATTLE, WA 98144-4606	91-1345075	501(C)(3)	0.	13,784.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FARM SHARE, INC. 14125 SW 320 STREET HOMESTEAD, FL 33033	65-0342192	501(C)(3)	0.	16,828.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FATHER'S ALIVE IN THE HOOD INC. 116-36 139TH STREET JAMAICA, NY 11436	46-1091203	501(C)(3)	0.	128,241.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FEARLESS HUDSON VALLEY INC./SAFE HOMES OF ORANGE COUNTY - PO BOX 649 - NEWBURGH, NY 12551-0649	14-1679391	501(C)(3)	0.	7,997.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FEED MORE, INC. /CENTRAL FOOD BANK 1415 RHOADMILLER STREET RICHMOND, VA 23220-1111	54-1150923	501(C)(3)	0.	6,884.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FOR GOOD PGH 910 BRADDOCK AVENUE BRADDOCK, PA 15104	82-0809728	501(C)(3)	0.	538,061.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FOR THE LOVE OF GOD, INC. PO BOX 44481 LOS ANGELES, CA 90044-0481	35-2410342	501(C)(3)	0.	6,534.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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FORGET ME NOT FAMILIES 132 SANDY DR, SUITE B NEWARK, NJ 19713	46-0796907	501(C)(3)	0.	60,175.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FOSTER KIDS CHARITY INC. TEXAS 12830 HILLCREST RD SUITE 111 DALLAS, TX 75230-1547	35-2409387	501(C)(3)	0.	6,885.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FOSTERING HOPE, INC. 308 ELM STREET CONWAY, SC 29526-5120	34-2003272	501(C)(3)	0.	7,815.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FREEDOM VILLAGE U.S.A. 5275 ROUTE 14 LAKEMONT, NY 14857	27-1263611	501(C)(3)	0.	5,922.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
FRIENDS OF CASA HAWAII 94-428 MOKUOLA ST. SUITE 103 WAIPAHU, HI 96797	26-3599945	501(C)(3)	0.	4,805,149.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
GARDNER FAMILY CARE CORPORATION, INC. - 160 EAST VIRGINIA STREET, SUITE 100 - SAN JOSE, CA 95112-5865	23-7153068	501(C)(3)	0.	5,526.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
GAUDENZIA, INC. 106 MAIN STREET NORRISTOWN, PA 19401	23-1706895	501(C)(3)	0.	223,903.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
GINGERBREAD HOUSE LEARNING CENTER, INC. - 6005 CHESTER AVENUE - JACKSONVILLE, FL 32217	80-0204979	501(C)(3)	0.	14,532.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
GIVING FRIENDS, INC. 1434 CROSBY AVENUE BRONX, NY 10461	85-0609954	501(C)(3)	0.	145,300.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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GLOBAL CRISIS INTERVENTIONS ORG 130 WILLIAM STREET, SUITE 509 BRONX, NY 10454	80-0287985	501(C)(3)	0.	2,112,393.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
GOD IS JIREH RAPHA SHAMMAH 4301 AGATE STREET RIVERSIDE, CA 92509-3201	26-0020181	501(C)(3)	0.	9,064.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
GRACE CHURCH DBA FIRST ASSEMBLY OF GOD CHURCH - 26-28 2ND STREET - HICKORY, NC 28601	56-1330840	501(C)(3)	0.	5,790.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
GREATER BIRMINGHAM MINISTRIES 2304 12TH AVENUE NORTH BIRMINGHAM, AL 35234-3111	63-0577439	501(C)(3)	0.	179,924.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
GREATER NEW HOPE FAMILY SERVICES LLC - 11936 NORTHEAST SANDY BOULEVARD - PORTLAND, OR 97220	88-1275831	501(C)(3)	0.	856,636.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
GROVE COMMUNITY CHURCH 19900 GROVE COMMUNITY DRIVE RIVERSIDE, CA 92508-8114	47-3503534	501(C)(3)	0.	18,176.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
GUADALUPE ECONOMIC SERVICES CORPORATION - 1502 ERSKINE STREET - LUBBOCK, TX 79403-3214	75-1867465	501(C)(3)	0.	6,876.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
H.E.R.O.E.S. CARE 330 SUN VALLEY CIRCLE DRIVE FENTON, MO 63026-4323	01-0777850	501(C)(3)	0.	10,479,576.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
HANDS IN SERVICE INCORPORATED 216 OLD MILL ROAD SELLERSVILLE, PA 18960-1415	26-1992241	501(C)(3)	0.	793,769.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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HEALING AND DELIVERANCE MINISTRY 15960 DERWOOD ROAD, 2ND LEVEL ROCKVILLE, MD 20855	01-0060379	501(C)(3)	0.	7,259.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
HEALTHRIGHT 360/WALDEN HOUSE 563 MISSION STREET 2050 LOS ANGELES, CA 94103-2543	94-6129071	501(C)(3)	0.	59,325.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
HEARTS OF HUMANITY 20986 BRIDGE STREET SOUTHFIELD, MI 48033	81-2759760	501(C)(3)	0.	3,041,087.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
HERITAGE TRAINING AND CAREER CENTER - 2249 CONGRESSMAN WL DICKINSON DRIVE - MONTGOMERY, AL 36109	20-5984290	501(C)(3)	0.	153,795.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
HOPE FOR HAITI 1021 FIFTH AVENUE NORTH NAPLES, FL 34102-5818	59-3564329	501(C)(3)	0.	32,158.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
HOPE FOR YOU 515 COUNTY ROAD 1118 GREENVILLE, TX 75401	46-4884985	501(C)(3)	0.	27,719.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
HOPE SUPPLY CO. 10480 SHADY TRAIL, SUITE 104 DALLAS, TX 75220-2533	75-2284779	501(C)(3)	0.	28,843.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
HOUSTON WOMEN'S CENTER 1010 WAUGH DRIVE HOUSTON, TX 77019-3996	74-2029166	501(C)(3)	0.	11,915.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
HUNTINGTON AREA FOOD BANK 1327 SEVENTH AVENUE HUNTINGTON, WV 25701-2903	55-0625915	501(C)(3)	0.	80,520.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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MATTHEW 25 40 HEARTSIDE INC (IN THE IMAGE) - 1823 DIVISION AVENUE SOUTH - GRAND RAPIDS, MI 49507-2458	38-3075239	501(C)(3)	0.	6,809.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
INDIAN MINISTRIES OF NORTH AMERICA, INC. - 911 KEITH STREET NW - CLEVELAND, TN 37311-1804	73-1659743	501(C)(3)	0.	6,106.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
INDO-AMERICAN CENTER 6328 N CALIFORNIA AVE CHICAGO, IL 60659	36-3689665	501(C)(3)	0.	13,190.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
INFANT WELFARE SOCIETY OF CHICAGO 3600 WEST FULLERTON AVENUE CHICAGO, IL 60647-2319	36-2167752	501(C)(3)	0.	5,074.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
INLAND FUTURES FOUNDATION OF THE SAN BERNARDINO COMMUNITY COLLEGE DISTRICT - 114 S. DEL ROSA DRIVE - SAN BERNARDINO, CA 92408	47-1803579	501(C)(3)	0.	6,278.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
INSTITUTE FOR CHILDREN'S AID 41745 RIDER WAY, # 2 TEMECULA, CA 92590-4826	33-0412343	501(C)(3)	0.	7,881.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
INSTITUTE FOR MAXIMUM HUMAN POTENTIAL - PO BOX 72059 - LOS ANGELES, CA 90002-0059	95-4439557	501(C)(3)	0.	9,197.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
INTERNATIONAL HUMANITARIAN SERVICES - 1901 MASSACHUSETTS AVENUE - LANSING, MI 48906-4624	52-2284833	501(C)(3)	0.	7,507.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
INVINCIBLE KIDS ACCEPTING NOTHING NEGATIVE - 12300 SOUTHWESTERN AVENUE - BLUE ISLAND, IL 60406	36-4406598	501(C)(3)	0.	9,655.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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ISLAND HARVEST 40 MARCUS BLVD HAUPPAUGE, NY 11788-3704	11-3136350	501(C)(3)	0.	8,549.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
JANNAH'S HANDS INC 495 FLATBUSH AVE, SUITE 50 BROOKLYN, NY 11225	84-4289169	501(C)(3)	0.	128,971.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
JOURNEY FAMILY CHURCH 313 DEPOT STREET GOBLES, MI 49055-8854	38-3575358	501(C)(3)	0.	5,226.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
JOY BALTIMORE 2653 MARYLAND AVE APT 1 BALITMORE, MD 21218-4522	81-3819911	501(C)(3)	0.	57,625.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
KAMILEON PROFESSIONAL DEVELOPMENT, INC. - 2451 CUMBERLAND PKWY SUITE 3736 - ATLANTA, GA 30339-6136	46-5115573	501(C)(3)	0.	2,530,935.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
KIDANGO, INC. 44000 OLD WARM SPRINGS BOULEVARD FREMONT, CA 94538-6145	94-2581686	501(C)(3)	0.	6,106.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
KIDS WITHOUT BORDERS 7064 S. 220TH ST. KENT, WA 98032	76-0723622	501(C)(3)	0.	199,014.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
KIPP NEW ORLEANS INC 2625 THALIA STREET NEW ORLEANS, LA 70113-2843	20-2277213	501(C)(3)	0.	12,638.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
KNIGHTS OF COLUMBUS 206 SOUTH EUCLID, #H ANAHEIM, CA 92801	95-3073931	501(C)(3)	0.	5,121.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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LEVELING THE PLAYING FIELD 1794 UNION AVE BALTIMORE, MD 21211	45-2682632	501(C)(3)	0.	30,242.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
LIAMS FOUNDATION INTERNATIONAL, INC - 484 EAST 167TH STREET - BRONX, NY 10456	82-2787564	501(C)(3)	0.	61,862.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
LIBERATION AND HEALING PENTECOSTAL CHURCH - 570 W 156TH STREET SUITE# 35 - NEW YORK, NY 10032	13-3758060	501(C)(3)	0.	1,532,319.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
LILY'S PLACE PO BOX 2 HUNTINGTON, WV 25706-0002	46-2235123	501(C)(3)	0.	11,249.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
LIVING WORD CHRISTIAN CENTER 7600 W ROOSECELT FOREST PARK FOREST PARK, IL 60130	36-3623010	501(C)(3)	0.	2,324,757.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
LONG ISLAND CARES, INC. 10 DAVIDS DRIVE HAUPPAUGE, NY 11788	11-2524512	501(C)(3)	0.	7,161.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
LOS ANGELES MISSION 303 EAST 5TH STREET LOS ANGELES, CA 90013-1505	95-3134049	501(C)(3)	0.	6,877.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
LUTHERAN SOCIAL SERVICES OF SOUTH DAKOTA - 705 EAST 41ST STREET, SUITE 200 - SIOUX FALLS, SD 57105-6048	46-0224731	501(C)(3)	0.	7,069.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
MANASSEH MINISTRY 4982 BRISTOL ROCK ROAD BLACK JACK, MO 63033	43-1757349	501(C)(3)	0.	109,783.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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MASSACHUSETTS COALITION FOR THE HOMELESS INC - 73 BUFFUM STREET - LYNN, MA 01902-3965	22-2599662	501(C)(3)	0.	85,909.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
MERCY INCORPORATED PO BOX A/941 FRY RD GREENWOOD, IN 46142	51-0159341	501(C)(3)	35,000.	0.			DISASTER RELIEF
MATERIALS FOR THE ARTS 3300 NORTHERN BOULEVARD, SUITE 3A LONG ISLAND CITY, NY 11101-2215	81-0551712	501(C)(3)	0.	21,000.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
METHODIST CHURCH OF PUERTO RICO CALLE MARIANA BRACETTI #8 SAN JUAN, PR 06680	66-0448908	501(C)(3)	0.	4,878,584.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
MIA'S CLOSET 16006 ELMBANK DR HOUSTON, TX 77095	45-2411965	501(C)(3)	0.	14,647.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
MILLENNIUM SISTAHS, INC. 543 NORTHERN PARKWAY UNIONDALE, NY 11553-2833	11-3523194	501(C)(3)	0.	917,136.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
MISAMEACH MISAMEACH 326 3RD STREET LAKEWOOD, NJ 08701-6300	26-2356784	501(C)(3)	0.	8,958.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
MISSION WACO, MISSION WORLD, INC. 1315 NORTH 15TH STREET WACO, TX 76707-2203	74-2605621	501(C)(3)	0.	5,673.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
MITZVAH CIRCLE FOUNDATION 1561 GEHMAN ROAD HARLEYSVILLE, PA 19438-2930	26-3705891	501(C)(3)	0.	585,987.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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NATHAN'S PLAYROOM PO BOX 491 CAMBY, IN 46113-0491	26-4781815	501(C)(3)	0.	9,472.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
NATIONAL CENTER FOR CHILDREN AND FAMILIES - 6301 GREENTREE ROAD - BETHESDA, MD 20817-3368	52-0591586	501(C)(3)	0.	530,624.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
NATIONAL HIGH BASKETBALL 11610 PLEASANT RIDGE RD., SUITE 103, BOX #105 - LITTLE ROCK, AR 72223	26-2171670	501(C)(3)	0.	256,789.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
NATIONAL ODD SHOE EXCHANGE PO BOX 1120 SCOTTSDALE, AZ 85244-1120	42-1207783	501(C)(3)	0.	9,035.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
NDCC PARENTS WITHOUT LIFE PARTNERS LIFE CENTER - 6625 MIAMI LAKES, SUITE 350 - MIAMI LAKES, FL 33014	03-0539302	501(C)(3)	0.	12,825.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
NEW YORK DISASTER INTERFAITH SERVICES - 4 WEST 43RD STREET, SUITE 407 - NEW YORK, NY 10036-7408	13-3640786	501(C)(3)	0.	112,760.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
NEWARK BETHEL ASSEMBLY 107 HEDDEN TERRACE NEWARK, NJ 07108-1707	80-0475444	501(C)(3)	0.	487,054.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
NORWESCAP 350 MARSHALL STREET PHILLIPSBURG, NJ 08865-3273	22-1777156	501(C)(3)	0.	6,807.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
OGDEN-WEBER COMMUNITY ACTION PARTNERSHIP, INC. - 3159 GRANT AVENUE - OGDEN, UT 84401-3942	87-6124938	501(C)(3)	0.	5,355.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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OKLAHOMA CITY INDIAN CLINIC 4913 WEST RENO AVENUE OKLAHOMA CITY, OK 73127-6339	73-1422379	501(C)(3)	0.	6,876.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
OPEN DOOR FAMILY MEDICAL CENTER INC - 2 CHURCH STREET, SUITE 201 - OSSINING, NY 10562-4818	13-2813103	501(C)(3)	0.	5,464.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
OPEN DOOR MISSION 2828 N 23RD ST E OMAHA, NE 68110-2726	47-0411375	501(C)(3)	0.	8,588.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
OPERATION COMPASSION 114 STUART ROAD NE, SUITE 370 CLEVELAND, TN 37312-4803	62-1697490	501(C)(3)	0.	2,091,283.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
OPERATION HOMEFRONT/FORT DIX 114 STUART RD NE STE 370 CLEVELAND, TN 37312-4803	62-1697490	501(C)(3)	0.	45,311.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
P E A C E INCORPORATED 217 SOUTH SALINA STREET SYRACUSE, NY 13202-1501	76-0761821	501(C)(3)	0.	83,528.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
PANOLA OUTREACH 384 ST JOHN DRIVE ALICEVILLE, AL 35442	80-0568293	501(C)(3)	0.	306,317.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
PARTNERSHIPS FOR CHILDREN PO BOX 204444 AUSTIN, TX 78720-4444	43-2004770	501(C)(3)	0.	10,980.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
PEACE BUILDERS 743 ATLANTIC AVENUE LONG BEACH, CA 90813-4510	31-1527317	501(C)(3)	0.	7,142.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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PERFECTING FAITH CHURCH 311 NORTH MAIN STREET FREEPORT, NY 11520-1641	11-3067138	501(C)(3)	0.	7,436.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
PILSEN WELLNESS CENTER, INC. 2319 SOUTH DAMEN AVENUE CHICAGO, IL 60608-4209	36-2836998	501(C)(3)	0.	7,694.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
PITTSBURGH FAMILY DEVELOPMENT INC. 708 TALBOT AVENUE BRADDOCK, PA 15104-1929	23-2897011	501(C)(3)	0.	17,483.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
PREGNANCY RESOURCE CENTER OF PINE CITY - 315 MAIN STREET, SUITE 20 - PINE CITY, MN 55063	41-1427989	501(C)(3)	0.	7,091.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
PROJECT NEW HOPE PO BOX 91 LEICESTER, MA 01524-0091	27-4555998	501(C)(3)	0.	6,127.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
PROVISION MINISTRY, INC. 7 THOMAS NEWTON DRIVE WESTBORO, MA 01581	81-5481524	501(C)(3)	0.	1,996,398.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
QUEENS LAW ASSOCIATES NOT-FOR-PROFIT - 148-02 JAMAICA - JAMAICA, NY 11435	27-0364845	501(C)(3)	0.	263,850.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
RACE TRACK CHAPLAINCY OF AMERICA NY DIVISION - 2150 HEMPSTEAD TPKE - ELMONT, NY 11003-1551	27-0485424	501(C)(3)	0.	7,940.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
RAINBOW DAYS, INC. 8150 NORTH CENTRAL EXPY, SUITE 1600 DALLAS, TX 75206-1883	75-1844908	501(C)(3)	0.	5,525.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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RAINBOWS REIGN PO BOX 430 JONESBORO, GA 30253-0430	83-0802932	501(C)(3)	0.	231,025.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
RAZOM INC 140 2ND AVE STE 305 NEW YORK, NY 10003	46-4604398	501(C)(3)	25,000.	0.			DIASTER RELIEF
REACH OUT AND READ, INC. - BOSTON 89 SOUTH STREET, SUITE 201 BOSTON, MA 02111-2678	04-3481253	501(C)(3)	0.	13,268.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
RESCUE MISSION OF EL PASO 221 NORTH LEE STREET EL PASO, TX 79901	74-6062443	501(C)(3)	0.	8,167.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
RESTORE GLOBAL 9525 MONROE ROAD STE 150 CHARLOTTE, NC 28270	26-0745879	501(C)(3)	0.	1,354,175.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
REVIVAL MINISTRIES INTERNATIONAL 3738 RIVER INTERNATIONAL DRIVE TAMPA, FL 33610	59-3273513	501(C)(3)	0.	7,442.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
RICHLAND COUNTY CHILDREN'S AUXILIARY - PO BOX 2525 - MANSFIELD, OH 44906-0525	34-1875985	501(C)(3)	0.	9,648.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
RIVER FUND 8911 LEFFERTS BOULEVARD RICHMOND HILLS, NY 11418	11-3450363	501(C)(3)	0.	891,145.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
RIVER OAK CENTER FOR CHILDREN 5445 LAUREL HILLS DRIVE SACRAMENTO, CA 95841-3105	94-2519001	501(C)(3)	0.	8,226.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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RIVERSIDE COMMUNITY COLLEGE DISTRICT FOUNDATION - P.O. BOX 907 - RIVERSIDE, CA 92503	95-2993847	501(C)(3)	0.	116,900.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ROCCO S. NAPOLITANO FOUNDATION 5447 SW 24TH AVE FORT LAUDERDALE, FL 33312	46-3856833	501(C)(3)	0.	2,033,288.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
ROCKFORD RESCUE MISSION PO BOX 1958 ROCKFORD, IL 61110	36-6132381	501(C)(3)	0.	5,685.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
RONALD MCDONALD HOUSE CHARITIES/RIO GRANDE - 1720 TREASURE HILLS BLVD - HARLINGEN, TX 78550-8911	74-2656780	501(C)(3)	0.	5,299.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
RUTH ELLIS CENTER INC 77 VICTOR STREET HIGHLAND PARK, MI 48203	38-3501697	501(C)(3)	0.	58,050.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SAFE SPACE 8974 162ND STREET JAMAICA, NY 11432-5011	11-1711014	501(C)(3)	0.	11,498.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SAFY FOUNDATION INC. 10100 ELIDA RD DELPHOS, OH 45833	86-3019448	501(C)(3)	0.	10,270.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SALT LAKE CITY MISSION 1151 S REDWOOD RD STE 106 SALT LAKE CTY, UT 84104-3727	87-0431443	501(C)(3)	0.	5,425.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SALVADORAN AMERICAN HUMANITARIAN FOUNDATION - 2050 CORAL WAY, SUITE 600 - MIAMI, FL 33145	59-2339140	501(C)(3)	0.	379,030.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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SAN ANTONIO THREADS 10446 SENTINEL STREET SAN ANTONIO, TX 78217	81-3461678	501(C)(3)	0.	517,215.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SANTA CLAUS, INC. OF GREATER SAN BERNARDINO - PO BOX 2642 - SAN BERNARDINO, CA 92406-2642	95-6101275	501(C)(3)	0.	2,118,466.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SAVANNAH AREA FAMILY EMERGENCY (SAFE) SHELTER - PO BOX 61119 - SAVANNAH, GA 31420-1119	58-1392664	501(C)(3)	0.	7,594.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SAVE A LIFE 4 CHRIST OUTREACH MINISTRY - 4445 CYPRESS COVE COURT - AUSTELL, GA 30106-2654	20-3720322	501(C)(3)	0.	10,111.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SECAUCUS MUNICIPAL CENTER 1203 PATERSON PLANK ROAD SECAUCUS, NJ 07094-1918	80-0797133	501(C)(3)	0.	3,123,503.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SECOND HARVEST FOOD BANK OF NORTHWEST LOUISIANA - 2307 TEXAS AVENUE - SHREVEPORT, LA 71103-3621	72-1328890	501(C)(3)	0.	3,366,259.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SECOND HARVEST MOUNTAINEER FOOD BANK - 484 ENTERPRISE DRIVE - GASSAWAY, WV 26624-7888	55-0611100	501(C)(3)	0.	2,659,284.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SEVENTH DAY ADVENTIST CHURCH 45 FAIRMOUNT AVENUE HACKENSACK, NJ 07601-4720	52-0643036	501(C)(3)	0.	18,153.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SHELTER PARTNERSHIP 5600 RICKENBACKER ROAD, BLDG 1101 BELL, CA 90201	95-3976214	501(C)(3)	0.	10,529,523.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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SHOES AND CLOTHES FOR KIDS INC 3500 LORAIN AVENUE, SUITE 301 CLEVELAND, OH 44113	34-1554285	501(C)(3)	0.	57,802.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SILENT CRY INC 2861 EXTERIOR STREET, APT 14L BRONX, NY 10463	45-4934038	501(C)(3)	0.	13,938.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SISTER JOSE WOMEN'S CENTER P.O. BOX 1028 TUCSON, AZ 85702	46-1290517	501(C)(3)	0.	5,510.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SMOKY MOUNTAIN CHILDREN'S HOME 449 MCCARN CIR SEVIERVILLE, TN 37862-4176	23-7110635	501(C)(3)	0.	9,240.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SPECIALIZED ALTERNATIVES FOR FAMILIES AND YOUTH OF KENTUCKY INC - 861 CORPORATE DRIVE SUITE 101 - LEXINGTON, KY 40503	26-1641642	501(C)(3)	0.	7,349.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
STAR OF HOPE MISSION 6897 ARDMORE STREET HOUSTON, TX 77054	74-1152599	501(C)(3)	0.	6,209.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SUNDAY'S CHILD FOUNDATION 75-5968 ALII DRIVE KAILUA KONA, HI 96740-1324	26-2094622	501(C)(3)	0.	5,284.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
SWEETSER 50 MOODY STREET SACO, ME 04072	01-0211807	501(C)(3)	0.	5,590.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
TABLE TO TABLE 611 ROUTE 46 WEST, SUITE 240 HASBROUCK HEIGHTS, NJ 07604	22-3646125	501(C)(3)	0.	17,282.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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TACKLE TOMORROW 2121 N PEARL ST, FLOOR 3 DALLAS, TX 75201	84-4660554	501(C)(3)	0.	47,268.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
TEACHER'S DESK 22 NORTHAMPTON STREET BUFFALO, NY 89502	47-2033964	501(C)(3)	0.	8,265.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
TWO LIVES CHANGES (TEEN LIFE CENTER) - PO BOX 194 - BROOKSHIRE, TX 77423	35-2349932	501(C)(3)	0.	7,409.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
TEXAS DIAPER BANK 1803 GRANDSTAND DRIVE SUITE 150 SAN ANTONIO, TX 78238	74-2886380	501(C)(3)	0.	229,742.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
THE ARC OF SAN DIEGO 3030 MARKET STREET SAN DIEGO, CA 92102-3230	95-1863913	501(C)(3)	0.	10,677.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
THE CATHEDRAL CHURCH OF ST. JOHN DIVINE - 1047 AMSTERDAM AVENUE - NEW YORK, NY 10025	13-1623934	501(C)(3)	0.	160,935.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
THE GOODNESS PROJECT 103 BAYNE ROAD HASLEY, TX 76052	68-0512138	501(C)(3)	0.	152,800.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
THE MAIN PLACE CHRISTIAN FELLOWSHIP - 1631 EL CAMINO REAL, SUITE A - TUSTIN, CA 92780-5248	33-0527268	501(C)(3)	0.	6,215.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
THE NEW WORLD FOUNDATION 680 WEST END AVENUE NEW YORK, NY 10025	13-1919791	501(C)(3)	0.	1,162,370.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALLY R BRASLEY FOUNDATION 3408 ELMHURST RD COLUMBIA, SC 29203	46-0949757	501(C)(3)	0.	1,118,922.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
THE SECOND BEGINNING 5183 DANITA CIRCLE EAST WILMER, AL 36587	26-3796304	501(C)(3)	0.	8,713.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
THE SHARING SHELF 47 PURDY AVENUE PORT CHESTER, NY 10573-5028	13-1773419	501(C)(3)	0.	844,503.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
THE TEACHER'S DESK 22 NORTHAMPTON STREET BUFFALO, NY 14209-2116	16-1331766	501(C)(3)	0.	117,648.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
TIME OF REFRESHING PRAISE AND WORSHIP - 4511 WEST HUNTING STREET - HOUSTON, TX 77026-3323	75-2974143	501(C)(3)	0.	657,137.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
TREASURE HUNT 4 GOOD, INC. 211 GOAD CEMETERY RD E NEW HARMONY, IN 47631	85-1574845	501(C)(3)	0.	9,980,248.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
TRUE TABERNACLE OF JESUS CHRIST MINISTRIES - 1670 SOUTH CONGRESS AVENUE - PALM SPRINGS, FL 33406-5904	65-0851346	501(C)(3)	0.	8,821,128.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
UNDER THE BRIDGES AND ON THE STREETS - 2261 WEST 28TH STREET - LOS ANGELES, CA 90018-2533	48-1255040	501(C)(3)	0.	40,370.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
UNTO, INC. (GLOBAL AID NETWORK) 1506 QUARRY ROAD MOUNT JOY, PA 17552-8806	95-4578963	501(C)(3)	0.	7,464.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USO HAWAII/ UNITED SERVICE ORGANIZATIONS OF HAWAII INC - 300 RODGERS BOULEVARD, UNIT 48 - HONOLULU, HI 96819-1831	99-0185740	501(C)(3)	0.	17,043.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
VARIETY - THE CHILDREN'S CHARITY OF SOUTHERN CALIFORNIA - 4601 WILSHIRE BOULEVARD, SUITE 260 - LOS ANGELES, CA 90010-3883	95-1330495	501(C)(3)	0.	24,482.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
VARIETY CLUB - THE CHILDREN'S CHARITY TENT 5 - 600 SOUTH ADAMS ROAD, SUITE 230 - BIRMINGHAM, MI 48009-6863	38-2140520	501(C)(3)	0.	2,336,655.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
VARIOUS AGENCIES/RETAIL PROGRAM 266 WEST 37TH STREET, FL 22 NEW YORK, NY 10018	13-3300271	501(C)(3)	0.	4,793,961.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
VOLUNTEERS OF AMERICA LOS ANGELES 240 NORTH BREED STREET LOS ANGELES, CA 36609-1590	95-1691330	501(C)(3)	0.	30,088.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
VOLUNTEERS OF AMERICA, SOUTHWEST 600 AZALEA ROAD MOBILE, AL 06890	63-1220329	501(C)(3)	0.	6,074.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
WE WILL SERVE MINISTRIES 13681 NEWPORT AVENUE, SUITE 8257 TUSTIN, CA 11233-4153	26-4019037	501(C)(3)	0.	19,167.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
WHITE PONY EXPRESS 3380 VINCENT ROAD, SUITE B PLEASANT HILL, CA 94523-4324	46-5220565	501(C)(3)	0.	493,304.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
WNYSHARES/TEACHER'S DESK 22 NORTHAMPTON ST BUFFALO, NY 14209	47-2033964	501(C)(3)	0.	9,025.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN OF SUBSTANCE PO BOX 117 LINDENHURST, NY 11757-0117	11-3436757	501(C)(3)	0.	30,438.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
WOMEN RISING 270 FAIRMONT AVENUE JERSEY CITY, NJ 07306	22-1501370	501(C)(3)	0.	15,978.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
WORKING WARDROBES CAREER CENTER 1851 KETTERING STREET IRVINE, CA 92614	33-0669145	501(C)(3)	0.	5,564,388.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE
WORLD CENTRAL KITCHEN INCORPORATED 200 MASSACHUSETTS AVENUE NORTHWEST WASHINGTON, DC 20001	27-3521132	501(C)(3)	25,000.	0.			DISASTER RELIEF
WORTH FIGHTING 4 3425 CLIFF SHADOWS PARKWAY SUITE 25 LAS VEGAS, NV 89129	83-1030825	501(C)(3)	0.	394,251.	FMV	ASSORTED APPAREL AND OTHER ITEMS	POVERTY ASSISTANCE

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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:

RECIPIENT ORGANIZATIONS MUST BE IN GOOD STANDING WITH THE IRS AND PROVIDE DOCUMENTATION OF THEIR EXEMPT STATUS BEFORE THEY ARE INITIALLY CONSIDERED FOR NON-CASH ASSISTANCE. RECIPIENT ORGANIZATIONS ARE REQUIRED TO PROVIDE DELIVERING GOOD, INC., WITH A REPORT DETAILING HOW GOODS WERE USED OR DISTRIBUTED IN THEIR COMMUNITY PRIOR TO RECEIVING ADDITIONAL SUPPORT.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

DELIVERING GOOD, INC.

Employer identification number

13-3300271

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

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

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) RON ROSTOW CHIEF FINANCIAL & ADMIN. OFFICER	(i)	159,114.	10,000.	0.	5,721.	11,447.	186,282.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MERRIE KELLER DIR. OF PRODUCT PROCUREMENT	(i)	164,400.	10,000.	0.	6,976.	120.	181,496.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MATTHEW FASCIANO PRESIDENT & CEO, AS OF JULY 2022	(i)	166,923.	0.	0.	3,769.	50.	170,742.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) DONNA CHARLES DIR. OF STRATEGIC INITIATIVES	(i)	142,719.	13,000.	0.	5,612.	9,146.	170,477.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) HEATHER REYNOLDS DIR. OF MARKETING AND COMMUNICATIONS	(i)	139,525.	0.	0.	4,785.	11,957.	156,267.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 7:

THE EXECUTIVE COMMITTEE APPROVED A YEAR-END PERFORMANCE BONUS POOL FOR
EMPLOYEES. THE BONUSES WERE INCLUDED AS TAXABLE COMPENSATION TO THE
RECIPIENTS.

SCHEDULE L
(Form 990)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open To Public
Inspection

Name of the organization **DELIVERING GOOD, INC.** Employer identification number **13-3300271**

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total \$ _____												

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
SEE PART V	SEE PART V	172,232.	SEE PART V		X

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

FORM 990, SCHEDULE L, PART IV:

NAME OF INTERESTED PERSON: S&G CONSULTING

RELATIONSHIP BETWEEN THE INTERESTED PERSON AND ORGANIZATION: CO-FOUNDER OF S&G CONSULTING IS AN OFFICER OF THE ORGANIZATION.

DESCRIPTION OF TRANSACTION: INDEPENDENT CONTRACTOR ARRANGEMENT

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization: **DELIVERING GOOD, INC.** Employer identification number: **13-3300271**

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	X		154,884,459.	SELLING PRICE
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				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** **5**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

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

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

DELIVERING GOOD, INC.

Employer identification number

13-3300271

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

IMPACTED BY POVERTY AND TRAGEDY WITH NEW MERCHANDISE. THE ORGANIZATION
WORKS WITH A NATIONWIDE NETWORK OF AGENCY PARTNERS TO DISTRIBUTE GOODS,
AND BRING HOPE, DIGNITY AND SELF-ESTEEM TO AT-RISK CHILDREN, FAMILIES,
AND ADULTS. IN THIS WAY, WE AIM TO BUILD A MORE EQUITABLE WORLD IN
WHICH CHILDREN, ADULTS, AND FAMILIES FACING ECONOMIC, MEDICAL, SOCIAL,
AND ENVIRONMENTAL CHALLENGES HAVE THE USEFUL ITEMS THAT THEY NEED AND
VALUE, IN ORDER TO OVERCOME ADVERSITY AND REACH THEIR FULL POTENTIAL.

FORM 990, PART I, QUESTION 5, AND PART V, QUESTION 2A:

THE ORGANIZATION CONTRACTED WITH A PROFESSIONAL EMPLOYER ORGANIZATION
(PEO) FOR SERVICES, INCLUDING BUT NOT LIMITED TO, PAYROLL, TIMEKEEPING,
EMPLOYEE BENEFITS, HR ADMINISTRATION AND WORKFORCE REGULATORY
COMPLIANCE NEEDS. AS THE EMPLOYER OF RECORD FOR TAX PURPOSES, FORMS W-2
AND W-3 ARE ISSUED BY THE PEO AND FILED UNDER THE PEO'S FEDERAL EIN. IN
THIS CO-EMPLOYMENT ARRANGEMENT, THE ORGANIZATION IS THE COMMON LAW
EMPLOYER AND, ACCORDINGLY, COMPENSATION IS REPORTED ON FORM 990, PART
VII, SECTION A AND PART IX, LINES 5-10.

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

MATERIALS, COATS, UNIFORMS, HOME GOODS, JUVENILE PRODUCTS, TOYS,
FURNITURE, AND A VARIETY OF OTHER NECESSARY ITEMS THAT EMPOWER
RECIPIENTS TO BUILD STABLE AND SUSTAINABLE LIVES.

IN 2022, OUR NETWORK OF DONORS PROVIDED OVER 15 MILLION UNITS OF NEW

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

Schedule O (Form 990) 2022

Name of the organization DELIVERING GOOD, INC.	Employer identification number 13-3300271
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PRODUCT VALUED AT MORE THAN \$154,000,000, WHICH WE DISTRIBUTED TO OVER 500 CHARITY PARTNERS IN OUR NATIONWIDE NETWORK. MONETARY DONATIONS AND OTHER FINANCIAL SUPPORT HELP PAY FOR PROGRAMS, LOGISTICS, COORDINATION AND FREIGHT COSTS SO THAT NEW PRODUCTS REACH THE PEOPLE WHO NEED IT MOST. WITH AN OVERHEAD OF LESS THAN 3%, DELIVERING GOOD HAS BEEN WIDELY RECOGNIZED FOR ITS EFFICIENCY AND ITS EFFECTIVE SUPPORT OF PEOPLE IN NEED.

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

ENVIRONMENTAL IMPACT. IN 2022, WE WORKED WITH BUSINESS PARTNERS TO REDUCE THE MORE THAN 34 BILLION POUNDS OF TEXTILE WASTE PRODUCED IN MANUFACTURING. BY TAKING HIGH-QUALITY GOODS THAT WOULD OTHERWISE END UP IN LANDFILLS AND SENDING THEM TO HOMES IN NEED ACROSS THE UNITED STATES, WE PROVIDE INDUSTRIES WITH SUSTAINABLE SOLUTIONS FOR A HEALTHIER PLANET, WHILE SIMULTANEOUSLY SUPPORTING OUR COMMUNITIES TO FULFILL OUR VISION OF A MORE EQUITABLE WORLD.

- PURPOSE MARKETING AND TARGETED AID - DELIVERING GOOD UNDERSTANDS THAT BUSINESSES EXIST FOR MORE THAN SIMPLY PROFIT: THEY ALSO SERVE AS SOURCES OF SUPPORT AND RESPONSIBILITY TOWARD THE COMMUNITIES THAT TRUST THEM. AS CORPORATE SOCIAL RESPONSIBILITY (CSR) BECOMES A MAJOR PART OF A GROWING NUMBER OF BUSINESSES, DELIVERING GOOD HAS BEEN ESTABLISHING ITSELF AS A TRUSTED PARTNER IN CSR PROGRAMS THAT MAKE STRATEGIC, TANGIBLE DIFFERENCES IN AREAS BOTH LOCAL AND NATIONAL. IN 2021, OUR SPECIALIZED PARTNERSHIPS INCLUDED A BENEFIT EVENT STAGED WITH RALPH LAUREN THAT DONATED 15% OF SALES AT NEW YORK CITY STORES TO DELIVERING GOOD'S AID EFFORTS FOR THOSE IN POVERTY. THIS JOINT EFFORT RAISED MORE THAN \$27,000 TO HELP FAMILIES IN NEED THROUGH NEW CLOTHING.

- DISASTER RELIEF AND HUMANITARIAN SUPPORT - SINCE OUR FOUNDING IN

Name of the organization DELIVERING GOOD, INC.	Employer identification number 13-3300271
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1985, DELIVERING GOOD HAS RESPONDED TO DISASTERS AROUND THE WORLD WITH DONATIONS OF NEW MERCHANDISE, HELPING DISTRESSED FAMILIES AND INDIVIDUALS RECOVER THEIR LIVES. IN 2022, WE WERE ACTIVE IN SUPPORTING THOSE IMPACTED BY THE TRAGIC WAR IN UKRAINE. WORKING WITH PARTNERS ACROSS THE INDUSTRY, WE FILLED 10 SHIPPING CONTAINERS WITH NEARLY 700,000 ITEMS LIKE UNDERWEAR, SOCKS, HOODIES, BLANKETS, BABY CLOTHING OR SUPPLIES, AND DIAPERS, VALUED AT \$2.7 MILLION IN ALL. OVER THE COURSE OF THE YEAR, DELIVERING GOOD WAS ALSO ACTIVE IN RESPONDING TO DEVASTATING FLOODS IN EASTERN KENTUCKY, AND THE EFFECTS OF HURRICANE IAN IN FLORIDA, HELPING FAMILIES REBUILD HOMES AND RESTORE NORMALCY TO THEIR LIVES.

- ANNUAL COAT DRIVE - EACH YEAR DURING THE HOLIDAY SEASON, DELIVERING GOOD PARTNERS WITH BURLINGTON FOR AN ANNUAL COAT DRIVE TO PROVIDE MORE THAN 400 NATIONWIDE LOCAL CHARITIES WITH WARM WINTER COATS FOR THEIR LOW-INCOME CLIENTS. TO DATE, WE'VE COLLECTED MORE THAN 2.5 MILLION COATS AND COUNTING.

FORM 990, PART VI, SECTION A, LINE 2:

BOARD MEMBER HARESH THARANI AND BOARD MEMBER MICHAEL SETOLA HAVE A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 4:

IN NOVEMBER 2022, THE ORGANIZATION AMENDED ITS BYLAWS TO INCREASE BOARD TERM LIMITS FROM THREE FULL TERMS TO FOUR FULL TERMS.

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

THE ORGANIZATION HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING FIRM. IT IS REVIEWED BY THE CHIEF FINANCE & ADMINISTRATIVE OFFICER AND IS

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PRESENTED TO MANAGEMENT AND THE AUDIT COMMITTEE. A COMPLETE COPY OF THE FORM 990 IS PROVIDED TO ALL MEMBERS OF THE BOARD OF DIRECTORS FOR THEIR REVIEW AND COMMENT PRIOR TO FILING.

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

THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY THAT APPLIES TO DIRECTORS, OFFICERS, AND KEY PERSONS OF THE ORGANIZATION. EACH YEAR, ALL SUCH PERSONS SIGN A CONFLICT OF INTEREST STATEMENT AND DISCLOSE ANY POTENTIAL CONFLICTS THAT MAY EXIST. IF A POTENTIAL CONFLICT EXISTS, THE INTERESTED PERSON IS GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE SECRETARY/OR DESIGNEE THEREOF, OF THE ORGANIZATION. DISCLOSURES OF POTENTIAL CONFLICTS ARE PROVIDED TO THE BOARD OF DIRECTORS. THE INTERESTED PERSON MUST NOT BE PRESENT AT THE BOARD OR EXECUTIVE COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE BOARD OR COMMITTEE CONSIDERS ALTERNATE TRANSACTIONS AND VOTES WHETHER TO APPROVE THE TRANSACTION BY NO LESS THAN A MAJORITY VOTE. THE MINUTES OF THE BOARD MEETINGS RECORD THE PROCESS AND DECISION.

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

THE COMPENSATION OF THE ORGANIZATION'S PRESIDENT & CEO, AND CHIEF FINANCIAL & ADMINISTRATIVE OFFICER IS REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS. BENCHMARK COMPENSATION DATA FROM OTHER NON-PROFIT ORGANIZATIONS IS USED, AS WELL AS A COMPENSATION STUDY PERFORMED BY AN OUTSIDE CONSULTANT IN 2019. THE PROCESS WAS LAST UNDERTAKEN IN 2022 AND THE COMPENSATION COMMITTEE'S DECISIONS WERE CONTEMPORANEOUSLY DOCUMENTED.

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

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AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, NJ, NM, NY, NC, ND, OR, PA, RI, SC, TN, UT, VA
WV, WI

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

DELIVERING GOOD, INC. MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS
REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. IT IS POSTED ON
THE ORGANIZATION'S WEBSITE, ALONG WITH THE AUDITED FINANCIAL STATEMENTS.
THE ORGANIZATIN'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE
AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

LOSS ON PLEDGES RECEIVABLE	-88,880.
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FORM 990, PART XII, LINE 2C:

DELIVERING GOOD, INC. HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR
OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN
INDEPENDENT ACCOUNTANT. THIS PROCESS DID NOT CHANGE FROM THE PRIOR
YEAR.