

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)

2023

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2023 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p style="text-align: center;">CALIFORNIA ASSOCIATION OF FOOD BANKS</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p>1624 FRANKLIN STREET 722</p> City or town, state or province, country, and ZIP or foreign postal code <p>OAKLAND, CA 94612</p>	D Employer identification number <p style="text-align: center;">68-0392816</p>
F Name and address of principal officer: STACIA HILL LEVENFELD SAME AS C ABOVE		E Telephone number <p style="text-align: center;">510-272-4435</p>
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 76,827,886.
J Website: WWW.CAFOODBANKS.ORG		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1996 M State of legal domicile: CA

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
Activities & Governance	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	13
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	43
	6	Total number of volunteers (estimate if necessary)	6	13
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 11,873,074.	Current Year 9,445,327.
	9	Program service revenue (Part VIII, line 2g)	59,314,163.	67,209,096.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	33,379.	172,281.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-3,531.	1,182.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	71,217,085.	76,827,886.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,751,507.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,435,537.	4,103,481.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b		Total fundraising expenses (Part IX, column (D), line 25) 408,855.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	58,989,372.	66,403,677.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	71,176,416.	77,012,259.
	19	Revenue less expenses. Subtract line 18 from line 12	40,669.	-184,373.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 29,867,417.	End of Year 28,249,397.
	21	Total liabilities (Part X, line 26)	9,654,622.	7,348,594.
	22	Net assets or fund balances. Subtract line 21 from line 20	20,212,795.	20,900,803.

Part II Signature Block

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

Sign Here	Signature of officer STACIA HILL LEVENFELD, CEO	Date
Paid Preparer Use Only	Print/Type preparer's name PENNY L. LANE, CPA	Preparer's signature
	Firm's name KARLSSON & LANE, AN ACCOUNTANCY CORP.	Date
	Firm's address 4725 FIRST ST., STE. 226 PLEASANTON, CA 94566	Check if self-employed <input type="checkbox"/> PTIN P00743411
		Firm's EIN 94-2590397
		Phone no. (925) 271-5519

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE MISSION OF THE CALIFORNIA ASSOCIATION OF FOOD BANKS IS TO ELIMINATE HUNGER IN CALIFORNIA.

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

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

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

4a (Code:) (Expenses \$ 69,265,255. including grants of \$ 2,235,126.) (Revenue \$ 69,019,333.)

FOOD DISTRIBUTION IN 2023, THE ORGANIZATION PARTNERED WITH AGRICULTURAL PARTNERS ACROSS THE STATE TO SUPPLY MORE THAN 270 MILLION POUNDS OF FOOD TO FOOD BANKS. THIS INCLUDED MORE THAN 265 MILLION POUNDS OF FRESH FRUITS AND VEGETABLES AND 5 MILLION POUNDS OF HIGH-QUALITY PROTEINS AND PANTRY ESSENTIALS TO KEEP FOOD BANKS STOCKED DURING THE UNPRECEDENTED HUNGER CRISIS. THE ORGANIZATION'S FARM TO FAMILY OPERATION IS THE STATE'S MOST EXTENSIVE CHARITABLE FOOD RECOVERY PROGRAM, WORKING WITH A NETWORK OF OVER TWO HUNDRED AND FORTY FARMS AND AGGREGATORS THROUGHOUT THE STATE. CAFB'S FARM TO FAMILY PROGRAM OPERATES ON A REIMBURSEMENT BASIS FROM ITS FUNDERS AND FLOATS THE FOOD AND FREIGHT COSTS OF ITS MEMBERSHIP, REQUIRING THE ORGANIZATION TO HAVE SEVERAL MILLION DOLLARS OF CASH ON

4b (Code:) (Expenses \$ 5,183,113. including grants of \$ 4,224,966.) (Revenue \$ 6,417,863.)

PROGRAMS CALFRESH IS CALIFORNIA'S NAME FOR SNAP (FORMERLY "FOOD STAMPS"), RECOGNIZED AS ONE OF THE MOST EFFECTIVE ANTI-POVERTY PROGRAMS IN THE NATION. THE ORGANIZATION'S CALFRESH OUTREACH PROGRAM SUPPORTS OVER FIFTY COMMUNITY PARTNERS THROUGHOUT THE STATE IN THEIR EFFORTS TO ENROLL ELIGIBLE CALIFORNIANS, HELP THEM KEEP THEIR BENEFITS, AND EDUCATE THE OUTREACH AND STAKEHOLDER COMMUNITY. IN 2023, THE ORGANIZATION CONTINUED ITS OUTREACH EFFORTS TO INCLUDE DISASTER CALFRESH AND PANDEMIC EBT UNTIL THE PROGRAMS CONCLUDED. ACTIVITIES INCLUDED TRAINING AND PROGRAMMATIC SUPPORT, PROVIDING UPDATES ON POLICIES IMPACTING CALFRESH ACCESS AND ELIGIBILITY, AND WORKING WITH STAKEHOLDERS TO IMPROVE LANGUAGE ACCESS BY TRANSLATING AND REVIEWING MATERIALS.

4c (Code:) (Expenses \$ 955,218. including grants of \$ 45,009.) (Revenue \$ 303,203.)

RESEARCH & PUBLIC POLICY THE ORGANIZATION'S ADVOCACY TEAM LEADS THE FIGHT TO ERADICATE FOOD INSECURITY AND HUNGER IN CALIFORNIA, ADVANCING LEGISLATIVE AND BUDGET INITIATIVES, AND CONDUCTING ADMINISTRATIVE ADVOCACY AT THE STATE AND FEDERAL LEVELS TO PRIORITIZE EQUITY IN STRENGTHENING THE PUBLIC AND CHARITABLE NUTRITION SAFETY NETS. IN 2023 THE ORGANIZATION ADVOCATED FOR ROBUST INVESTMENTS IN FOOD BANKS AND PUBLIC BENEFITS ADEQUACY AND IMPROVEMENTS. SPECIFICALLY, THE ORGANIZATION WORKED TO PROTECT THE \$60 MILLION OF CALFOOD IN THE 2023-24 STATE BUDGET FOR FOOD BANKS TO PURCHASE CALIFORNIA GROWN AND MANUFACTURED FOODS, SECURED FUNDING FOR A CALFRESH MINIMUM NUTRITION BENEFIT PILOT PROGRAM TO RAISE THE CALFRESH TO \$50 FROM THE CURRENT MINIMUM OF \$23, AND SECURED LEGISLATION THAT

4d Other program services (Describe on Schedule O.) (Expenses \$ 500,402. including grants of \$) (Revenue \$ 136,600.)

4e Total program service expenses 75,903,988.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, and other IRS filings.

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 []

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding Form 1096 and backup withholding rules.

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, unrelated business 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (13); 1b Enter the number of voting members included on line 1a, above, who are independent (13); 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); 7b 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.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b 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); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (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); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
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. [X] Own website [] Another's website [X] 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
THE ORGANIZATION - 510-272-4435
1624 FRANKLIN STREET, 722, OAKLAND, CA 94612

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) MONICA WHITE CHAIR	2.00	X		X				0.	0.	0.
(2) LESLIE BACHO VICE CHAIR	2.00	X		X				0.	0.	0.
(3) BLAKE YOUNG TREASURER	2.00	X		X				0.	0.	0.
(4) PATRICIA L. NICKOLS-BUTLER SECRETARY	2.00	X		X				0.	0.	0.
(5) NATALIE CAPLES MEMBER	1.00	X						0.	0.	0.
(6) NICOLE CELAYA MEMBER	1.00	X						0.	0.	0.
(7) WILLY ELLIOT-MCCREA MEMBER	1.00	X						0.	0.	0.
(8) MICHAEL FLOOD MEMBER	1.00	X						0.	0.	0.
(9) AMANDA FRISCIA MEMBER	1.00	X						0.	0.	0.
(10) SARA GRIFFEN MEMBER	1.00	X						0.	0.	0.
(11) KEENON KRICK MEMBER	1.00	X						0.	0.	0.
(12) SHURLA LOVEJOY MEMBER	1.00	X						0.	0.	0.
(13) JUAN MARTINEZ MEMBER	1.00	X						0.	0.	0.
(14) BRUCE RANKIN MEMBER	1.00	X						0.	0.	0.
(15) BETH STANTON MEMBER	1.00	X						0.	0.	0.
(16) STACIA LEVENFELD CHIEF EXECUTIVE OFFICER	37.50			X				279,831.	0.	15,449.
(17) STACY ROBSON CHIEF FINANCIAL OFFICER	37.50			X				212,087.	0.	10,304.

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) MARIA HOULNE FARM TO FAMILY VICE PRESIDENT	37.50					X		185,713.	0.	9,111.
(19) MAY LYNN TAN DIRECTOR OF RESEARCH & PROGRAM DEVEL	37.50					X		151,658.	0.	15,091.
(20) STEPHANIE NISHIO DIRECTOR OF PROGRAMS	37.50					X		145,112.	0.	10,595.
(21) SABRINA THAKKAR DIRECTOR OF FARM TO FAMILY	37.50					X		143,625.	0.	9,729.
(22) LAUREN LATHAN REID COMMUNICATIONS DIRECTOR	37.50					X		137,811.	0.	9,591.
(23) REBECCA SILVA DIRECTOR OF GOVERNMENT AFFAIRS	37.50					X		127,685.	0.	16,041.
(24) COURTNEY SCULLIN-TAYLOR ACCOUNTING MANAGER	37.50					X		116,711.	0.	13,230.
(26) ALICE LEE-OSBORNE DIRECTOR OF DEVELOPMENT	37.50					X		101,161.	0.	13,373.
1b Subtotal								1,601,394.	0.	122,514.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,601,394.	0.	122,514.

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 10

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
TOTAL QUALITY LOGISTICS, LLC PO BOX 799, MILFORD, OH 45150	TRANSPORTATION	1,084,620.
JOSE L GONZALES, 800 MEMORIAL DRIVE #27, SOUTH SAN FRANCISCO, CA 94080	TRANSPORTATION	797,740.
SERGIO A ROMO 1630 GIBSON AVENUE, CLOVIS, CA 93611	TRANSPORTATION	291,850.
EDGAR PACHECO PO BOX 8714, FRESNO, CA 93747	TRANSPORTATION	283,075.
IGNACIO PACHECO PO BOX 8064, FRESNO, CA 93747	TRANSPORTATION	204,100.

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 6

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	644,565.					
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e	5,958,615.					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	2,842,147.					
	g Noncash contributions included in lines 1a-1f	1g	\$					
	h Total. Add lines 1a-1f			9,445,327.				
Program Service Revenue	2 a FARM TO FAMILY	Business Code	624210	67,209,096.	67,209,096.			
	b							
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f			67,209,096.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			172,281.			172,281.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	6a	(i) Real	(ii) Personal				
			b Less: rental expenses ...	6b				
			c Rental income or (loss)	6c				
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other				
			b Less: cost or other basis and sales expenses	7b				
			c Gain or (loss)	7c				
	d Net gain or (loss)							
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
			b Less: direct expenses	8b				
			c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses			9b					
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	10a							
		b Less: cost of goods sold	10b					
		c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a OTHER	Business Code	624210	1,182.	1,182.			
	b							
	c							
	d All other revenue							
	e Total. Add lines 11a-11d			1,182.				
12 Total revenue. See instructions				76,827,886.	67,210,278.	0.	172,281.	

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	6,505,101.	6,505,101.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	491,918.	280,910.	146,559.	64,449.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,923,187.	2,628,135.	160,872.	134,180.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	188,785.	145,452.	33,402.	9,931.
9 Other employee benefits	260,534.	208,877.	35,309.	16,348.
10 Payroll taxes	239,057.	203,633.	21,520.	13,904.
11 Fees for services (nonemployees):				
a Management				
b Legal	10,552.		10,552.	
c Accounting	25,456.		25,456.	
d Lobbying	45,000.	45,000.		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	19,415.		19,415.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	878,673.	611,444.	149,153.	118,076.
12 Advertising and promotion				
13 Office expenses	294,852.	225,413.	41,109.	28,330.
14 Information technology				
15 Royalties				
16 Occupancy	236,359.	195,300.	30,950.	10,109.
17 Travel	172,051.	143,599.	19,175.	9,277.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	8,836.		8,836.	
23 Insurance				
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 FARM TO FAMILY	64,644,351.	64,644,351.		
b OTHER EXPENSES	67,332.	66,773.	-3,692.	4,251.
c TAXES AND FEES	800.		800.	
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	77,012,259.	75,903,988.	699,416.	408,855.
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	1,999,737.	1	548,856.
	2 Savings and temporary cash investments	10,810,509.	2	8,942,114.
	3 Pledges and grants receivable, net	4,566,923.	3	3,474,433.
	4 Accounts receivable, net	5,951,453.	4	7,998,582.
	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	60,851.	9	195,338.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 71,988.		
	b Less: accumulated depreciation	10b 16,855.		
	11 Investments - publicly traded securities	10,848.	10c	55,133.
	12 Investments - other securities. See Part IV, line 11	6,014,431.	11	6,731,001.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	452,665.	14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	29,867,417.	15	303,940.	
		16	28,249,397.	
Liabilities	17 Accounts payable and accrued expenses	9,209,481.	17	5,628,815.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	445,141.	25	1,719,779.
	26 Total liabilities. Add lines 17 through 25	9,654,622.	26	7,348,594.
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	17,425,213.	27	18,907,615.
	28 Net assets with donor restrictions	2,787,582.	28	1,993,188.
	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	20,212,795.	32	20,900,803.
	33 Total liabilities and net assets/fund balances	29,867,417.	33	28,249,397.

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	76,827,886.
2	Total expenses (must equal Part IX, column (A), line 25)	2	77,012,259.
3	Revenue less expenses. Subtract line 2 from line 1	3	-184,373.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,212,795.
5	Net unrealized gains (losses) on investments	5	872,381.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	20,900,803.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	X	

Form 990 (2023)

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

2023

Open to Public Inspection

Name of the organization CALIFORNIA ASSOCIATION OF FOOD BANKS	Employer identification number 68-0392816
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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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
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 2023 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2023. 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 type="checkbox"/>
b 33 1/3% support test - 2022. 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 - 2023. 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 - 2022. 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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5,448,483.	67,871,101.	38,638,299.	11,873,074.	9,445,327.	133,276,284.
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	23,584,484.	34,366,067.	45,986,930.	59,082,363.	67,209,096.	230,228,940.
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	29,032,967.	102,237,168.	84,625,229.	70,955,437.	76,654,423.	363,505,224.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c Add lines 7a and 7b						0.
8 Public support. (Subtract line 7c from line 6.)						363,505,224.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6	29,032,967.	102,237,168.	84,625,229.	70,955,437.	76,654,423.	363,505,224.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	294.	1,248.	101,416.	33,379.	172,281.	308,618.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	294.	1,248.	101,416.	33,379.	172,281.	308,618.
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.)	123,863.	5,883.	500.		1,182.	131,428.
13 Total support. (Add lines 9, 10c, 11, and 12.)	29,157,124.	102,244,299.	84,727,145.	70,988,816.	76,827,886.	363,945,270.

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 2023 (line 8, column (f), divided by line 13, column (f))	15	99.88 %
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	99.86 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	.08 %
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	.04 %

19a 33 1/3% support tests - 2023. 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 - 2022. 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? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
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? 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.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
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)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
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.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI .			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
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 - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2023 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-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

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.)

Multiple horizontal lines for supplemental information.

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

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

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

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

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

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

Name of organization CALIFORNIA ASSOCIATION OF FOOD BANKS	Employer identification number 68-0392816
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

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

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

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)	45,000.													
c Total lobbying expenditures (add lines 1a and 1b)	45,000.													
d Other exempt purpose expenditures	76,967,259.													
e Total exempt purpose expenditures (add lines 1c and 1d)	77,012,259.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 70%; text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	not over \$500,000,	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000,	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
not over \$500,000,	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000,	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	57,500.	57,500.	83,875.	45,000.	243,875.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures					

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

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

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

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

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

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

Part IV Supplemental Information

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

PART II-B, LINE 1, LOBBYING ACTIVITIES:

DURING 2023, \$45,000 WAS PAID TO MOSAIC SOLUTIONS & ADVOCACY, A FIRM THAT PERFORMS ADMINISTRATIVE AND LEGISLATIVE ADVOCACY ON BEHALF OF THE ORGANIZATION.

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

2023

Open to Public
Inspection

Name of the organization **CALIFORNIA ASSOCIATION OF FOOD BANKS** Employer identification number **68-0392816**

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 on line 2a	2c
d Number of conservation easements included on line 2c 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 2d 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) 2023

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 in 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations? | 3a(i) | |
| (ii) Related organizations? | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 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				
d Equipment		71,988.	16,855.	55,133.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				55,133.

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, line 12, col. (B))		

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, line 13, col. (B))		

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, line 15, col. (B))	

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) OPERATING LEASE LIABILITY	298,507.
(3) REFUNDABLE ADVANCES	1,421,272.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	1,719,779.

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	13,036,501.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	872,381.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	872,381.
3	Subtract line 2e from line 1	3	12,164,120.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,415.
b	Other (Describe in Part XIII.)	4b	64,644,351.
c	Add lines 4a and 4b	4c	64,663,766.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	76,827,886.

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	12,348,493.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	12,348,493.
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	19,415.
b	Other (Describe in Part XIII.)	4b	64,644,351.
c	Add lines 4a and 4b	4c	64,663,766.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	77,012,259.

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 X, LINE 2:

IN MANAGEMENT'S JUDGMENT THERE ARE NO UNCERTAIN TAX POSITIONS AS OF
DECEMBER 31, 2023.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

PRODUCE EXPENSE AND TRANSPORTATION

PART XII, LINE 4B - OTHER ADJUSTMENTS:

PRODUCE EXPENSE AND TRANSPORTATION

**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

2023

**Open to Public
Inspection**

Name of the organization **CALIFORNIA ASSOCIATION OF FOOD BANKS** Employer identification number **68-0392816**

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
CENTRAL CALIFORNIA FOOD BANK 4010 E AMENDOLA DRIVE FRESNO, CA 93725	77-0320851	501(C)(3)	156,523.	43,476.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
COMMUNITY ACTION AGENCY OF BUTTE COUNTY - PO BOX 6369 - CHICO, CA 95927	94-1640546	501(C)(3)	0.	9,084.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
COMMUNITY ALLIANCE WITH FAMILY FARMERS - P O BOX 363 - DAVIS, CA 95617	94-2914745	501(C)(3)	50,372.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
COMMUNITY FOOD BANK OF SAN BENITO COUNTY - 1133 SAN FELIPE ROAD - HOLLISTER, CA 95023	77-0306871	501(C)(3)	1,537.	76,324.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FOOD BANK OF CONTRA COSTA & SOLANO 4010 NELSON AVENUE CONCORD, CA 94520	94-2418054	501(C)(3)	381,732.	81,886.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FOOD FOR PEOPLE 307 W. 14TH ST. EUREKA, CA 95501	94-2772549	501(C)(3)	2,661.	131,860.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **63.**
- 3** Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2023

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
IMPERIAL VALLEY FOOD BANK P O BOX 4406 EL CENTRO, CA 92244	33-0633364	501(C)(3)	145,741.	2,797.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
INTERFAITH COUNCIL OF AMADOR 12181 AIRPORT RD. JACKSON, CA 95642	68-0363653	501(C)(3)	0.	14,188.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
MATERNAL AND CHILD HEALTH ACCESS 1111 W 6TH STREET, FOURTH FLOOR LOS ANGELES, CA 90017	95-4555879	501(C)(3)	418,200.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
MENDOCINO FOOD & NUTRITION PROGRAM P O BOX 70 FORT BRAGG, CA 95437	94-2577092	501(C)(3)	0.	40,272.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
SACRAMENTO FOOD BANK & FAMILY SERVICES - 1951 BELL AVENUE - SACRAMENTO, CA 95838	94-3315566	501(C)(3)	133,043.	110,968.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
SAN DIEGO HUNGER COALITION 4305 UNIVERSITY AVE, STE 630 SAN DIEGO, CA 92105	30-0507718	501(C)(3)	2,160,241.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
SECOND HARVEST OF SILICON VALLEY 750 CURTNER AVENUE SAN JOSE, CA 95125	94-2614101	501(C)(3)	362,106.	122,935.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
THE RESOURCE CONNECTION P O BOX 919 SAN ANDREAS, CA 95249	94-2705790	501(C)(3)	0.	17,041.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
ALAMEDA COUNTY COMMUNITY FOOD BANK P O BOX 2599 OAKLAND, CA 94614	94-2960297	501(C)(3)	126,115.	102,640.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA

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
AMADOR-TUOLUMNE COMMUNITY ACTION 10590 HWY 88 JACKSON, CA 95642	94-2765408	GOVT	0.	26,530.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
COMMUNITY ACTION PARTNERSHIP OF KERN COUNTY - 5005 BUSINESS PARK NORTH - BAKERSFIELD, CA 93309	95-2402760	501(C)(3)	0.	19,212.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
CALIF-ILC 634 S SPRING STREET, 2ND FLOOR LOS ANGELES, CA 90014	95-4860169	501(C)(3)	25,660.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
COMMUNITY ACTION PARTNERSHIP OF ORANGE COUNTY - 11870 MONARCH STREET - GARDEN GROVE, CA 92841	95-2452787	501(C)(3)	32,968.	100,718.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
COMMUNITY BRIDGES 519 MAIN STREET WATSONVILLE, CA 95076	94-2460211	501(C)(3)	256,398.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
COMMUNITY SERVICES UNLIMITED P O BOX 62696 LOS ANGELES, CA 90062	95-3218396	501(C)(3)	69,560.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
DIGNITY HEALTH CONNECTED LIVING 200 MERCY OAKS DRIVE, BUILDING 1 REDDING, CA 96003	23-7115371	501(C)(3)	0.	20,482.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
EAST BAY AGENCY FOR CHILDREN 2828 FORD STREET OAKLAND, CA 94601	94-1358309	501(C)(3)	202,137.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
EMERGENCY FOOD BANK 7 W SCOTTS AVENUE STOCKTON, CA 95203	68-0002165	501(C)(3)	0.	12,247.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA

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
FEEDING AMERICA RIVERSIDE/SAN BERNARDINO COS. - 2950-A JEFFERSON STREET - RIVERSIDE, CA 92504	26-0457477	501(C)(3)	47,731.	18,068.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FEEDING SAN DIEGO 9477 WAPLES STREET, SUITE 100 SAN DIEGO, CA 92121	26-0457477	501(C)(3)	3,450.	122,451.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FIND FOOD BANK 83775 CITRUS AVENUE INDIO, CA 92201	33-0006007	501(C)(3)	168,459.	28,414.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FOOD BANK COALITION OF SLO COUNTY 1180 KENDALL RD SAN LUIS OBISPO, CA 93401	77-0210727	501(C)(3)	0.	12,660.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FOOD BANK OF EL DORADO COUNTY 4550 BUSINESS DR CAMERON PARK, CA 95682	68-0457594	501(C)(3)	0.	17,941.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FOOD SHARE, INC. 4156 N SOUTHBANK RD OXNARD, CA 93036	77-0018162	501(C)(3)	0.	8,855.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FOODBANK OF SANTA BARBARA COUNTY 4554 HOLLISTER AVENUE SANTA BARBARA, CA 93110	77-0169214	501(C)(3)	45,056.	26,628.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FOODLINK FOR TULARE COUNTY 611 2ND STREET EXETER, CA 93221	94-2558802	501(C)(3)	0.	15,970.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FREMONT FAMILY RESOURCE CENTER 39550 LIBERTY STREET FREMONT, CA 94538	94-3333831	501(C)(3)	29,638.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA

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
FRESNO METRO MINISTRY 3845 N CLARK ST, STE 101 FRESNO, CA 93726	94-2181848	501(C)(3)	43,207.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
HELP ME HELP YOU P O BOX 32861 LONG BEACH, CA 90832	71-0898124	501(C)(3)	143,919.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
HUNGER ACTION LOS ANGELES, INC 961 S MARIPOSA AVE #205 LOS ANGELES, CA 90006	20-5142259	501(C)(3)	147,500.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
INDEPENDENT LIVING CENTER OF SOUTHERN CALIFORNIA INC - 14141 HAYNES STREET - VAN NUYS, CA 91401	95-3026060	501(C)(3)	10,681.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
JACOBS & CUSHMAN SAN DIEGO FOOD BANK - 9850 DISTRIBUTION AVE - SAN DIEGO, CA 92121	20-4374795	501(C)(3)	0.	157,227.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
KINGS COMMUNITY ACTION ORGANIZATION - 1130 N 11TH AVE - HANFORD, CA 93230	94-1604455	501(C)(3)	0.	14,237.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
LOS ANGELES REGIONAL FOOD BANK 1734 E 41ST STREET VERNON, CA 90058	95-3135649	501(C)(3)	245,978.	61,445.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
MEXICAN AMERICAN OPPORTUNITY FOUNDATION - 401 N GARFIELD AVE - MONTEBELLO, CA 90640	95-2594166	501(C)(3)	139,437.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
NATIONAL HEALTH FOUNDATION 515 S FIGUEROA STREET, SUITE 1300 LOS ANGELES, CA 90071	23-7314808	501(C)(3)	285,711.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA

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
PLACER FOOD BANK 8284 INDUSTRIAL AVENUE ROSEVILLE, CA 95678	94-1740316	501(C)(3)	80,395.	37,908.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
PROVIDENCE LITTLE COMPANY OF MARY FOUNDATION - 2601 AIRPORT DRIVE, SUITE 220 - TORRANCE, CA 90505	51-0224944	501(C)(3)	531,300.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
REDWOOD EMPIRE FOOD BANK 3990 BRICKWAY BLVD. SANTA ROSA, CA 95403	68-0121855	501(C)(3)	161,002.	24,390.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
RIVER CITY FOOD BANK P O BOX 160204 SACRAMENTO, CA 95816	91-1851398	501(C)(3)	152,964.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
SECOND HARVEST OF THE GREATER VALLEY - 1220 VANDERBILT CIR - MANTECA, CA 95337	68-0376587	501(C)(3)	0.	14,427.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
SF-MARIN FOOD BANK 900 PENNSYLVANIA AVE SAN FRANCISCO, CA 94114	94-0341517	501(C)(3)	159,341.	172,128.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
SHFB SANTA CRUZ COUNTY 800 OHLONE PARKWAY WATSONVILLE, CA 95076	77-0326685	501(C)(3)	131,137.	84,674.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
THE CHILDREN'S CLINIC 701 EAST 28TH ST, SUITE 200 LONG BEACH, CA 90806	95-1643332	501(C)(3)	190,589.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
WESTSIDE FOOD BANK 1710 22ND STREET SANTA MONICA, CA 90404	95-3685875	501(C)(3)	0.	30,247.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA

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
YOLO COUNTY CHILDREN'S ALLIANCE 600 A STREET, SUITE Y DAVIS, CA 95616	68-0526185	501(C)(3)	56,450.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
YOLO FOOD BANK 233 HARTER AVENUE WOODLAND, CA 95776	23-7111782	501(C)(3)	0.	43,016.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
YUBA SUTTER GLEANERS FOOD BANK INC 760 STAFFORD WAY YUBA CITY, CA 95991	94-2909773	501(C)(3)	0.	29,998.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
ST. MARGARET'S CENTER 1531 JAMES M. WOOD BOULEVARD LOS ANGELES, CA 90015	95-1690973	501(C)(3)	50,000.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
ROLLING START INC 1955 S HUNTS LANE #101 SAN BERNARDINO, CA 92408	95-3178138	501(C)(3)	56,401.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
SILICON VALLEY INDEPENDENT LIVING CENTER - 25 N 14TH STREET, SUITE 1000 - SAN JOSE, CA 95112	94-2332246	501(C)(3)	57,730.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
COLLEGE OF THE CANYONS FOUNDATION 26455 ROCKWELL CANYON ROAD SANTA CLARITA, CA 91355	95-3574259	501(C)(3)	72,500.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
JWCH INSTITUTE INC 5650 JILSON STREET COMMERCE, CA 90040	95-2289916	501(C)(3)	75,000.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
CHINATOWN SERVICE CENTER 767 N HILL STREET, SUITE 400 LOS ANGELES, CA 90012	95-2918844	501(C)(3)	150,000.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA

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
ST. LOUISE RESOURCE SERVICES 8535 FLORENCE AVENUE DOWNEY, CA 90240	81-2922252	501(C)(3)	75,000.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
FRESH APPROACH 5060 COMMERCIAL CIRCLE, SUITE C CONCORD, CA 94520	26-2438206	501(C)(3)	50,372.	0.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA
SHFB OF ORANGE COUNTY 8014 MARINE WAY IRVINE, CA 92618	32-0362611	501(C)(3)	34,238.	43,806.	FMV	PRODUCE AND TRANSPORTATION SUBSIDIES	TO END HUNGER IN CALIFORNIA

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:

THE CALIFORNIA ASSOCIATION OF FOOD BANKS MONITORS THE RECIPIENTS,
 SUB-AGENCIES, OF PASS THROUGH FUNDS BY GATHERING THEN REVIEWING TIME AND
 INVOICE TRACKING DOCUMENTS ON A MONTHLY BASIS. FURTHER MONITORING IS
 PERFORMED THROUGH DESK AND SITE REVIEWS USING SELECTION GUIDELINES PROVIDED
 BY THE STATE OF CALIFORNIA. BASED ON THE DESK AND SITE REVIEWS, REVIEW
 REPORTS ARE DRAFTED WITH CORRECTIVE FOLLOW UP ACTION THAT THE SUB-AGENCIES
 ARE TO IMPLEMENT.

**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

2023

Open to Public
Inspection

Name of the organization

CALIFORNIA ASSOCIATION OF FOOD BANKS

Employer identification number

68-0392816

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 **1b**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2023

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) STACIA LEVENFELD CHIEF EXECUTIVE OFFICER	(i)	239,181.	34,650.	6,000.	15,449.	0.	295,280.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) STACY ROBSON CHIEF FINANCIAL OFFICER	(i)	190,653.	15,434.	6,000.	10,304.	0.	222,391.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MARIA HOULNE FARM TO FAMILY VICE PRESIDENT	(i)	166,313.	13,400.	6,000.	9,111.	0.	194,824.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MAY LYNN TAN DIRECTOR OF RESEARCH & PROGRAM DEVELOPMENT	(i)	142,975.	8,683.	0.	7,166.	7,925.	166,749.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) STEPHANIE NISHIO DIRECTOR OF PROGRAMS	(i)	138,122.	6,990.	0.	5,378.	5,217.	155,707.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SABRINA THAKKAR DIRECTOR OF FARM TO FAMILY	(i)	126,625.	11,000.	6,000.	9,729.	0.	153,354.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

**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

2023

Open to Public
Inspection

Name of the organization

CALIFORNIA ASSOCIATION OF FOOD BANKS

Employer identification number

68-0392816

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

CALIFORNIA ASSOCIATION OF FOOD BANKS ("THE ORGANIZATION") IS A NON
PROFIT PUBLIC BENEFIT CORPORATION LOCATED IN OAKLAND, CALIFORNIA.

TOGETHER WITH ITS 41-MEMBER FOODBANKS, THE ORGANIZATION IS THE LARGEST

CHARITABLE HUNGER-RELIEF AND ANTI-HUNGER LEADER IN THE STATE. THE

ORGANIZATION PURSUES ITS MISSION OF ENDING HUNGER IN CALIFORNIA THROUGH

PROGRAMS FORTIFYING THE CHARITABLE AND PUBLIC NUTRITION SAFETY NETS AND

SUPPORTING THE COLLECTIVE SUCCESS OF ITS MEMBERS. IN 2021 THE

ORGANIZATION ADOPTED A NEW STRATEGIC PLAN, CENTERING ITS CORE

PRIORITIES ON REMOVING BARRIERS TO FOOD BANKS RECEIVING INCREASED

VOLUMES AND VARIETIES OF FRESH PRODUCE, BECOMING THE LEADING SOURCE OF

INFORMATION ON FOOD SECURITY IN CALIFORNIA, DEVELOPING CATALYST

PROGRAMS FOR FOOD BANKS TO SERVE HARD-TO-REACH POPULATION, AND

ADVOCATING FOR ANTI-HUNGER LEGISLATION AND SUSTAINED ACCESS TO

RESOURCES FOR FOOD BANKS ACROSS THE STATE.

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

HAND.

IN 2022, THE ORGANIZATION COMPLETED A STUDY THAT IDENTIFIED THE

OPPORTUNITY TO MOVE 30% MORE PRODUCE AND HIGHLY NUTRITIOUS PROTEINS TO

FOOD BANKS SERVING CALIFORNIA'S RURAL AND REMOTE COMMUNITIES. YEAR ONE

OF THE PILOT PROJECT MET THIS MILESTONE AND TWO YEAR PROGRAM IS ON

TRACK TO ACCOMPLISH THAT GOAL.

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

MAKES CALIFORNIA THE FIRST STATE IN THE COUNTRY TO CODIFY PRESIDENT

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization CALIFORNIA ASSOCIATION OF FOOD BANKS	Employer identification number 68-0392816
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BIDEN'S NEW FEDERAL SCHOOL MEAL GUIDELINES ON NUTRITION STANDARDS, ENSURES THAT CHILDREN HAVE ADEQUATE TIME TO EAT THOSE MEALS DURING THEIR SCHOOL LUNCH PERIODS, AND CODIFIES CALIFORNIA'S COMMITMENT TO MAXIMIZE THE NEW SUMMER EBT PROGRAM.

HIRING ITS FIRST DIRECTOR OF RESEARCH IN 2022, 2023 WAS THE FIRST YEAR FOR THE ORGANIZATION TO PUBLISH ORIGINAL RESEARCH AND BEGIN RELEASING ANALYTICS ON THE STATE OF FOOD SECURITY IN CALIFORNIA. OVER THE COURSE OF THE YEAR, THE ORGANIZATION RELEASED PROJECTIONS ABOUT THE FORESEEN IMPACT OF CALFRESH EMERGENCY ALLOTMENTS ENDING IN EARLY 2023, AN ANALYSIS OF SB 1383 GROCERY RECOVERY MODELS, AN IMPACT STUDY & DASHBOARD ON THE EXPANSION OF CALFRESH BENEFITS TO SSI RECIPIENTS, AND A QUANTITATIVE AND QUALITATIVE STUDY OF THE IMPACT OF EMERGENCY ALLOTMENTS IN CALIFORNIA IN LATE 2023.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

COMMUNICATIONS & MEMBER ENGAGEMENT -

THE ORGANIZATION IS COMMITTED TO RAISING PUBLIC AND STAKEHOLDER COMMUNITIES' UNDERSTANDING OF HUNGER AND ITS HEALTH AND SOCIAL IMPACTS. THIS INCLUDES UPLIFTING THE ESSENTIAL WORK OF FOOD BANKS AND EDUCATING THE PUBLIC ABOUT FOOD ACCESS ISSUES, CALFRESH AND OTHER PUBLIC NUTRITION BENEFITS, AND POLICY PRIORITIES TO PERMANENTLY END HUNGER IN CALIFORNIA. FOR THE FIRST TIME IN 2023, THE ORGANIZATION RELEASED ORIGINAL RESEARCH ON THE PROJECT IMPACT OF CAL FRESH EMERGENCY ALLOTMENTS ENDING, WHICH DROVE THE PUBLIC NARRATIVE ON FOOD SECURITY IN CALIFORNIA THROUGHOUT THE YEAR.

THE ORGANIZATION PROVIDES DIRECT SUPPORT AND RESOURCES TO ITS MEMBER FOOD BANKS THROUGH TRAINING, TECHNICAL ASSISTANCE, ADVOCACY TOOLKITS, AND SECURING CAPACITY-BUILDING GRANTS AND RESOURCES. THE HOSTED

Name of the organization CALIFORNIA ASSOCIATION OF FOOD BANKS	Employer identification number 68-0392816
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VIRTUAL MEMBER PROGRAMS TO INCREASE THE RESILIENCE AND CAPACITY OF ITS MEMBERS BY HOSTING PROFESSIONAL DEVELOPMENT WEBINARS, AS WELL AS 25 DISCIPLINE-SPECIFIC CROSS-NETWORK COMMUNITIES OF PRACTICE TO SHARE BEST PRACTICES AND FIND INNOVATIVE SOLUTIONS TO CHALLENGES FACED BY FOOD BANKS ACROSS THE STATE.

EXPENSES \$ 500,402. INCLUDING GRANTS OF \$ 0. REVENUE \$ 136,600.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS 41 FULL MEMBERS ACROSS THE STATE OF CALIFORNIA.

FORM 990, PART VI, SECTION A, LINE 7A:

CAFB HAS 41 MEMBER FOOD BANKS THAT MEET ANNUALLY TO ELECT THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B:

CAFB HAS 41 MEMBER FOOD BANKS THAT MEET ANNUALLY TO DISCUSS ISSUES OF IMPORTANCE TO THE ASSOCIATION AND ITS MEMBER FOOD BANKS. MEMBERS HAVE THE RIGHT TO VOTE ON THE ELECTION OF BOARD MEMBERS, BYLAWS REVISIONS AND DISSOLUTION OF ORGANIZATION.

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

BOARD MEMBERS REVIEW THE TAX FILINGS BEFORE THEY ARE SENT TO THEIR RESPECTIVE REGULATORY AGENCIES.

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

THE BOARD OF DIRECTORS ANNUALLY REVIEW AND SIGN OFF ON THE CONFLICT OF INTEREST POLICY. A SIMILAR POLICY, AS WELL AS A WHISTLE BLOWER POLICY, IS PRESENTED TO ALL EMPLOYEES IN THE EMPLOYEE HANDBOOK. IN ADDITION, ALL

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EMPLOYEES HAVE EASY ACCESS TO BOARD MEMBER CONTACT INFORMATION, SHOULD THEY FEEL IT NECESSARY TO REPORT.

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

WAGE AND SALARY LEVELS ARE DETERMINED ACCORDING TO PREVAILING RATES FOR SIMILAR POSITIONS IN OTHER BAY AREA ORGANIZATIONS.

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION MAKES ITS FORM 1023 AND 990 AVAILABLE TO THE PUBLIC UPON REQUEST.

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

FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST AS WELL AS SOME DOCUMENTS BEING AVAILABLE ON THE ORGANIZATION'S WEBSITE.