

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2018

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning **JUL 1, 2018** and ending **JUN 30, 2019**

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 COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC. Doing business as		D Employer identification number 73-1184980
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1304 N KENOSHA AVENUE	E Telephone number (918) 585-2800	
	City or town, state or province, country, and ZIP or foreign postal code TULSA, OK 74106		G Gross receipts \$ 59,192,591.
	F Name and address of principal officer: EILEEN BRADSHAW SAME AS C ABOVE		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)
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶

J Website: ▶ **OKFOODBANK.ORG**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **1982** **M** State of legal domicile: **OK**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: FEED THE HUNGRY OF EASTERN OKLAHOMA THROUGH PARTNER AGENCIES AND DIRECT PROGRAMMING.		
	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	22
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	112
	6 Total number of volunteers (estimate if necessary)	6	12190
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 38	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	49,354,660.	56,951,995.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,651,521.	1,400,237.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	245,472.	297,456.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	69,579.	104,950.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	51,321,232.	58,754,638.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	46,223,165.	44,920,975.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	3,760,541.	4,071,384.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,032,877.	174,888.	146,175.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,255,101.	3,391,884.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	53,413,695.	52,530,418.	
19 Revenue less expenses. Subtract line 18 from line 12	-2,092,463.	6,224,220.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	18,151,509.	24,481,936.
	22 Net assets or fund balances. Subtract line 21 from line 20	518,037.	537,226.

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	KURT KAZMIERSKI, DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	ASHLEY M. FOGLE	ASHLEY M. FOGLE	02/11/20		P01258800
Firm's name ▶ HOGANTAYLOR LLP			Firm's EIN ▶ 73-1413977		
Firm's address ▶ 1225 N BROADWAY AVENUE, SUITE 200 OKLAHOMA CITY, OK 73103			Phone no. 405-848-2020		

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: FEED THE HUNGRY OF EASTERN OKLAHOMA THROUGH A NETWORK OF PARTNER AGENCIES AND ENGAGE OUR COMMUNITIES IN ENDING HUNGER. OUR VISION IS FOOD SECURITY, WITH DIGNITY, FOR ALL EASTERN OKLAHOMANS. WE ARE THE LARGEST PRIVATE HUNGER-RELIEF ORGANIZATION IN EASTERN OKLAHOMA.

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

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

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

4a (Code:) (Expenses \$ 50,916,717. including grants of \$ 44,920,975.) (Revenue \$ 1,513,082.) DISTRIBUTED 28,874,180 POUNDS OF FOOD THROUGH 352 PARTNER AGENCIES AND 278 DIRECT FEEDING SITES, THE EQUIVALENT OF 24,061,817 MEALS A YEAR OR 462,700 MEALS PER WEEK. 40% OF ALL FOOD PROVIDED WAS FRESH PRODUCE. AGENCIES COORDINATE FEEDING PROGRAMS WHICH INCLUDE ON-SITE FEEDING PROGRAMS, EMERGENCY SHELTERS, EMERGENCY FOOD PANTRIES, CHILDREN'S FEEDING PROGRAMS, AND SENIOR AND VETERANS FEEDING INITIATIVES. DIRECT PROGRAMS INCLUDE COOKING MATTERS, PRODUCE PROJECT, MOBILE PANTRY, MOBILE EATERY FOOD TRUCKS, SENIOR SERVINGS, CLINIC PANTRIES, AND FOOD FOR KIDS PROGRAMMING INCLUDING THE BACKPACK PROGRAM, SCHOOL PANTRIES, FREE FAMILY FARMERS' MARKETS, POP-UP MARKETS, SCHOOL BREAK FEEDING AND AFTER-SCHOOL FEEDING.

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

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

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

4e Total program service expenses 50,916,717.

**COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.**

Part IV Checklist of Required Schedules

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

**COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.**

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	9
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		112
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		7d
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	1a 22		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 22		
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?	<input checked="" type="checkbox"/>	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?		<input checked="" type="checkbox"/>
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?		<input checked="" type="checkbox"/>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	<input checked="" type="checkbox"/>	
b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<input checked="" type="checkbox"/>

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	<input checked="" type="checkbox"/>	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<input checked="" type="checkbox"/>	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<input checked="" type="checkbox"/>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<input checked="" type="checkbox"/>	
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
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	<input checked="" type="checkbox"/>	
b	Other officers or key employees of the organization		<input checked="" type="checkbox"/>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<input checked="" type="checkbox"/>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **▶OK**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in 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 - (918) 585-2800
1304 N KENOSHA AVENUE, TULSA, OK 74106

**COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MIKE MCANDREWS PRESIDENT	1.00	X					0.	0.	0.	
(2) THOMAS HUTCHISON VICE PRESIDENT	1.00	X					0.	0.	0.	
(3) JASON SMITH TREASURER	1.00	X					0.	0.	0.	
(4) LORI LEWIS DRYER SECRETARY	1.00	X					0.	0.	0.	
(5) ERIC KUNKEL PAST PRESIDENT	1.00	X					0.	0.	0.	
(6) KURT KAZMIERSKI DIRECTOR	1.00	X					0.	0.	0.	
(7) COLLEEN ALMEIDA SMITH DIRECTOR	1.00	X					0.	0.	0.	
(8) SHELLEY ALLEN DIRECTOR	1.00	X					0.	0.	0.	
(9) LEX ANDERSON DIRECTOR	1.00	X					0.	0.	0.	
(10) CHRIS CLOYDE DIRECTOR	1.00	X					0.	0.	0.	
(11) RANDY COWLING DIRECTOR	1.00	X					0.	0.	0.	
(12) DONNA MCELROY DUTTON DIRECTOR	1.00	X					0.	0.	0.	
(13) RICH FICKEN DIRECTOR	1.00	X					0.	0.	0.	
(14) MERCEDES MILLBERRY FOWLER DIRECTOR	1.00	X					0.	0.	0.	
(15) JENNA GARLAND DIRECTOR	1.00	X					0.	0.	0.	
(16) JASON GLASS DIRECTOR	1.00	X					0.	0.	0.	
(17) VANESSA HALL-HARPER DIRECTOR	1.00	X					0.	0.	0.	

**COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.**

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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) CYNTHIA HUBBARD DIRECTOR	1.00	X					0.	0.	0.	
(19) JEANNE JACOBS DIRECTOR	1.00	X					0.	0.	0.	
(20) SCOTT LEWIS DIRECTOR	1.00	X					0.	0.	0.	
(21) ANTHONY PHILLIPS DIRECTOR	1.00	X					0.	0.	0.	
(22) CAROL TANDY DIRECTOR	1.00	X					0.	0.	0.	
(23) EILEEN BRADSHAW EXECUTIVE DIRECTOR	40.00			X			136,318.	0.	13,572.	
(24) RYAN WALKER COO	40.00			X			84,916.	0.	11,002.	
(25) DAVID PARRACK CFO	40.00			X			96,407.	0.	10,525.	
1b Sub-total							317,641.	0.	35,099.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							317,641.	0.	35,099.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC.

Form 990 (2018)

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c 630,938.				
	d Related organizations	1d				
	e Government grants (contributions)	1e 6,632,752.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 49,688,305.				
	g Noncash contributions included in lines 1a-1f: \$	40,208,604.				
	h Total. Add lines 1a-1f	▶ 56,951,995.				
	Program Service Revenue	2 a STAPLE FOODS	Business Code 624210	795,854.	795,854.	
b SHARED MAINTENANCE FEE		624210	466,928.	466,928.		
c CATERING INCOME		624210	137,455.	137,455.		
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f		▶ 1,400,237.				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)	▶ 113,202.			113,202.
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities	439,011.			
		(ii) Other	28,800.			
		b Less: cost or other basis and sales expenses	283,557.	0.		
		c Gain or (loss)	155,454.	28,800.		
	d Net gain or (loss)	▶ 184,254.			184,254.	
	8 a Gross income from fundraising events (not including \$ 630,938. of contributions reported on line 1c). See Part IV, line 18	a 146,501.				
		b Less: direct expenses	b 154,396.			
c Net income or (loss) from fundraising events		▶ -7,895.			-7,895.	
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue		Business Code				
11 a MISCELLANEOUS REVENUE	624210	112,845.	112,845.			
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	▶ 112,845.				
12 Total revenue. See instructions	▶ 58,754,638.	1,513,082.	0.	289,561.		

**COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.**

Form 990 (2018)

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	44,920,975.	44,920,975.		
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	335,555.	250,660.	32,884.	52,011.
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	2,982,345.	2,227,812.	292,270.	462,263.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	100,846.	75,332.	9,883.	15,631.
9 Other employee benefits	397,775.	297,137.	38,982.	61,656.
10 Payroll taxes	254,863.	190,382.	24,977.	39,504.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	52,040.		52,040.	
d Lobbying	16,524.	16,524.		
e Professional fundraising services. See Part IV, line 17	146,175.			146,175.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	30,626.	30,626.		
12 Advertising and promotion	34,283.	24,957.	4,591.	4,735.
13 Office expenses	77,565.	38,788.	23,698.	15,079.
14 Information technology				
15 Royalties				
16 Occupancy	350,396.	330,041.	12,756.	7,599.
17 Travel	34,096.	25,469.	3,341.	5,286.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	21,453.		21,453.	
20 Interest				
21 Payments to affiliates	18,423.	18,423.		
22 Depreciation, depletion, and amortization	588,092.	550,478.	19,631.	17,983.
23 Insurance	185,482.	160,219.	12,003.	13,260.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FOOD4KIDS	651,652.	651,652.		
b FREIGHT	578,775.	578,775.		
c REPAIRS AND MAINTENANCE	219,167.	177,382.	20,121.	21,664.
d FUNDRAISING EXPENSES	164,719.			164,719.
e All other expenses	368,591.	351,085.	12,194.	5,312.
25 Total functional expenses. Add lines 1 through 24e	52,530,418.	50,916,717.	580,824.	1,032,877.
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 if following SOP 98-2 (ASC 958-720)

**COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.**

Form 990 (2018)

73-1184980 Page **11**

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	761,675.	
	2 Savings and temporary cash investments	1,478,813.	2	1,525,101.	
	3 Pledges and grants receivable, net	249,681.	3	6,221,092.	
	4 Accounts receivable, net	0.	4	92,911.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use	3,244,828.	8	3,047,652.	
	9 Prepaid expenses and deferred charges		9		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 14,448,842.			
	b Less: accumulated depreciation	10b 5,629,247.	9,060,890.	10c	8,819,595.
	11 Investments - publicly traded securities	4,117,297.	11	4,013,910.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	18,151,509.	16	24,481,936.		
Liabilities	17 Accounts payable and accrued expenses	518,037.	17	537,226.	
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26 Total liabilities. Add lines 17 through 25	518,037.	26	537,226.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	14,132,081.	27	14,428,099.	
	28 Temporarily restricted net assets	3,440,303.	28	9,455,523.	
	29 Permanently restricted net assets	61,088.	29	61,088.	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	17,633,472.	33	23,944,710.		
34 Total liabilities and net assets/fund balances	18,151,509.	34	24,481,936.		

Form **990** (2018)

**COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.**

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	58,754,638.
2	Total expenses (must equal Part IX, column (A), line 25)	2	52,530,418.
3	Revenue less expenses. Subtract line 2 from line 1	3	6,224,220.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	17,633,472.
5	Net unrealized gains (losses) on investments	5	87,018.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	23,944,710.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ 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 in 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 Single Audit Act and OMB Circular A-133? _____	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 in Schedule O and describe any steps taken to undergo such audits _____	X	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization	COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC.	Employer identification number	73-1184980
---------------------------------	---	---------------------------------------	------------

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 or 990-EZ).)
- 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 in 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						

COMMUNITY FOOD BANK OF EASTERN

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	36091176.	37280971.	44211260.	49354660.	56951995.	223890062
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	36091176.	37280971.	44211260.	49354660.	56951995.	223890062
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)						63805758.
6 Public support. Subtract line 5 from line 4.						160084304

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	36091176.	37280971.	44211260.	49354660.	56951995.	223890062
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	96,425.	94,091.	99,826.	100,069.	113,202.	503,613.
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.)	485,226.	176,454.	227,339.	248,880.	259,346.	1397245.
11 Total support. Add lines 7 through 10						225790920
12 Gross receipts from related activities, etc. (see instructions)					12	7,748,073.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	70.90	%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	68.63	%
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	► <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2017. 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 - 2018. 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 - 2017. 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, 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 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 - 2017. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</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 in 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 in 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 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 in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

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 government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<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).		

COMMUNITY FOOD BANK OF EASTERN

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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

COMMUNITY FOOD BANK OF EASTERN

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 B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2018

Name of the organization

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Employer identification number

73-1184980

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

Name of organization COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC.	Employer identification number 73-1184980
--	---

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>11,959,529.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ <u>2,866,248.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ <u>2,196,202.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ <u>1,728,608.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ <u>1,227,284.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC.	Employer identification number 73-1184980
--	---

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>1</u>	7,382,425 POUNDS OF FOOD _____ _____ _____	\$ <u>11,959,529.</u>	_____
<u>2</u>	1,731,742 POUNDS OF FOOD _____ _____ _____	\$ <u>2,805,422.</u>	_____
<u>3</u>	1,355,680 POUNDS OF FOOD _____ _____ _____	\$ <u>2,196,202.</u>	_____
<u>4</u>	1,067,042 POUNDS OF FOOD _____ _____ _____	\$ <u>1,728,608.</u>	_____
<u>5</u>	757,583 POUNDS OF FOOD _____ _____ _____	\$ <u>1,227,284.</u>	_____
	_____ _____ _____	\$ _____	_____

Name of organization COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC.	Employer identification number 73-1184980
--	---

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

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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2018

Open to Public Inspection

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.**

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 COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC.	Employer identification number 73-1184980
--	---

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-.

COMMUNITY FOOD BANK OF EASTERN

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 (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>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)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -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?														

Yes 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

COMMUNITY FOOD BANK OF EASTERN

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

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		16,093.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		431.
j Total. Add lines 1c through 1i			16,524.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
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 expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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

SCHEDULE C, PART II-B, LINE 1

WE UNDERTOOK DIRECT AND GRASSROOTS EFFORTS. WE EMAILED AND DISTRIBUTED PRINTED INFORMATION TO INFORM LEGISLATORS AND THEIR CONSTITUENTS ABOUT ISSUES SURROUNDING HUNGER IN EASTERN OKLAHOMA. WE HAVE MEMBERSHIPS IN THE OKLAHOMA POLICY INSTITUTE AND IN FEEDING AMERICA, BOTH OF WHOM UNDERTAKE SIMILAR EFFORTS. WE PARTICIPATE IN MEETINGS AND TOWN HALLS WITH SUCH

Part IV Supplemental Information *(continued)*

GROUPS AS THE TULSA FOOD SECURITY COUNCIL, TULSA METRO CHAMBER, OKLAHOMA
POLICY INSTITUTE, AMONG OTHER SUCH EVENTS. WE VISITED STATE LEGISLATORS
AND AGENCIES TO DISCUSS HUNGER AND FOOD RELATED ISSUES. WE COST SHARE
(NOTED ON LINE 10) WITH REGIONAL FOOD BANK OF OKLAHOMA FOR A STAFF MEMBER
SPECIFICALLY DESIGNATED WITH ADVOCACY DUTIES.

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

2018
Open to Public Inspection

Name of the organization COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC. **Employer identification number** 73-1184980

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 (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, 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?

Yes No

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

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

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

Yes No

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

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

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

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

(i) 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 SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	959,884.	888,342.	794,189.	803,686.	786,636.
b Contributions					
c Net investment earnings, gains, and losses	15,080.	71,542.	94,153.	-9,497.	17,050.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	2,645.				
g End of year balance	972,319.	959,884.	888,342.	794,189.	803,686.

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

- a Board designated or quasi-endowment 93.72 %
- b Permanent endowment 6.28 %
- c Temporarily restricted 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:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

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		229,060.		229,060.
b Buildings		9,998,138.	3,958,006.	6,040,132.
c Leasehold improvements		5,895.	2,334.	3,561.
d Equipment		4,215,749.	1,668,907.	2,546,842.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				8,819,595.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (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	58,979,397.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	87,018.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	154,396.	
e	Add lines 2a through 2d	2e		241,414.
3	Subtract line 2e from line 1		3	58,737,983.
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	16,655.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		16,655.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	58,754,638.

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	52,668,159.
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	154,396.	
e	Add lines 2a through 2d	2e		154,396.
3	Subtract line 2e from line 1		3	52,513,763.
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	16,655.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		16,655.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	52,530,418.

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 XI, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES REPORTED ON STATEMENT OF REVENUE 154,396.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES REPORTED ON STATEMENT OF REVENUE 154,396.

COMMUNITY FOOD BANK OF EASTERN

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		EMPTY BOWLS (event type)	GIVING SPIRITS (event type)	1 (total number)	
Revenue	1	635,079.	100,195.	42,165.	777,439.
	2	535,753.	70,995.	24,190.	630,938.
	3	99,326.	29,200.	17,975.	146,501.
Direct Expenses	4				
	5				
	6	15,415.	12,093.	6,835.	34,343.
	7	54,153.	5,165.	3,717.	63,035.
	8	850.	625.	300.	1,775.
	9	39,401.	13,129.	2,713.	55,243.
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶			
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				-7,895.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1				
	2				
Direct Expenses	3				
	4				
	5				
6	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				
8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

COMMUNITY FOOD BANK OF EASTERN

Schedule G (Form 990 or 990-EZ) 2018 OKLAHOMA, INC.

73-1184980 Page 3

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

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

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

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

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

Name ▶ _____

Address ▶ _____

- 16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:

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

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

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

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: L&H CONSULTING

(I) ADDRESS OF FUNDRAISER: 539 S. PITTSBURG AVENUE, TULSA, OK 74112

**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

2018

**Open to Public
Inspection**

Name of the organization **COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.**

**Employer identification number
73-1184980**

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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CALVARY FOOD PANTRY 204 E ASH WILBURTON, OK 74578	73-0621888	501 (C) (3)	0.	83,247.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HELP IN CRISIS SHELTER PO BOX 1975 TAHLEQUAH, OK 74465	73-1125382	501 (C) (3)	0.	6,859.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BROKEN ARROW NEIGHBORS 315 W COLLEGE ST BROKEN ARROW, OK 74012	73-1195548	501 (C) (3)	0.	654,992.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BROKEN ARROW NEIGHBORS/BACKPACK ST STEPHEN'S, 400 W NEW ORLEANS BROKEN ARROW, OK 74012	73-1195548	501 (C) (3)	0.	87,357.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CATHOLIC CHARITIES/TULSA PO BOX 580460 TULSA, OK 74158	73-1171950	501 (C) (3)	0.	2,332,894.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CATHOLIC CHARITIES ON-SITE PO BOX 580460 TULSA, OK 74158	73-1171950	501 (C) (3)	0.	6,715.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ **321.**

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

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

Schedule I (Form 990) (2018)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC CHARITIES/ CSFP PO BOX 580460 TULSA, OK 74158	73-1171950	501 (C) (3)	0.	52,860.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MARY MARTHA OUTREACH PO BOX 314 BARTLESVILLE, OK 74005	73-1588880	501 (C) (3)	0.	5,539,161.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CHRISTS CUPBOARD/PAWHUSKA 127 E 12TH ST. PAWHUSKA, OK 74056	47-3767240	501 (C) (3)	0.	83,799.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
GREEN COUNTRY BHCS 619 N MAIN MUSKOGEE, OK 74401	73-1084521	501 (C) (3)	0.	71,095.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CONCERN EMERGENCY SERVICES PO BOX 404 BARTLESVILLE, OK 74005	73-6113224	501 (C) (3)	0.	152,847.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
COOKSON HILLS CHRISTIAN SCHOOL 60416 HWY 10 KANSAS, OK 74347	73-0665495	501 (C) (3)	0.	20,422.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
D.V.I.S. 3124 E APACHE ST TULSA, OK 74110	73-1028332	501 (C) (3)	0.	31,550.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
EMERGENCY INFANT SERVICES 222 S HOUSTON AVE TULSA, OK 74127	73-1039524	501 (C) (3)	0.	295,916.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CHRIST THE KING MIRACLE CHURCH PO BOX 700815 TULSA, OK 74170	73-1519653	501 (C) (3)	0.	5,351.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHURCH OF SAINT MARY 1347 E 49TH PL TULSA, OK 74104	73-0631499	501 (C) (3)	0.	56,933.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TOM SENIOR CITIZENS 60 GRANITE RIDGE RD HAWORTH, OK 74740	73-1456381	501 (C) (3)	0.	7,867.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HAWORTH SENIOR CITIZENS PO BOX 196 HAWORTH, OK 74740	73-1456381	501 (C) (3)	0.	7,250.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BOULEVARD CHRISTIAN CHURCH/BP 1700 W SHAWNEE ST MUSKOGEE, OK 74401	73-0657681	501 (C) (3)	0.	21,838.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
EZRA HOUSE/ CSFP P. O. BOX 1622 KANSAS, OK 74347	73-1623853	501 (C) (3)	0.	33,506.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
LIVING WORD FAMILY CHURCH PO BOX 762 NOWATA, OK 74048	73-1163073	501 (C) (3)	0.	57,061.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
THE MINISTRY CENTER 10310 S SHERIDAN RD TULSA, OK 74133	73-1143855	501 (C) (3)	0.	143,621.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
VICTORY PARK BAPTIST CHURCH 601 E HARRISON MCALESTER, OK 74501	73-6067098	501 (C) (3)	0.	53,803.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HOUSE OF HOPE PO BOX 451585 GROVE, OK 74345	73-1022204	501 (C) (3)	0.	5,902.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HENRYETTA CHURCH OF CHRIST 413 W BROADWAY HENRYETTA, OK 74437	73-0665492	501 (C) (3)	0.	509,276.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
PARADISE BAPTIST CHURCH 507 E KING ST TULSA, OK 74106	73-0796961	501 (C) (3)	0.	16,147.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KENDALL WHITTIER FOOD PANTRY PO BOX 4165 TULSA, OK 74159	73-1016797	501 (C) (3)	0.	56,656.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
LOCUST GROVE MINISTERIAL ALLNC PO BOX 218 LOCUST GROVE, OK 74352	73-1485553	501 (C) (3)	0.	87,773.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KIAMICHI VALLEY MINISTERIAL ALLIANCE, INC. - PO BOX 1163 - TALIHINA, OK 74571	74-3242626	501 (C) (3)	0.	34,035.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
AGAPE MISSION/BP PO BOX 1085 BARTLESVILLE, OK 74005	73-1608794	501 (C) (3)	0.	34,913.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
AGAPE MISSION ON-SITE PO BOX 1085 BARTLESVILLE, OK 74005	73-1608794	501 (C) (3)	0.	170,644.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ST PAUL'S MANNA MEALS 1442 S QUAKER AVE TULSA, OK 74120	73-0596128	501 (C) (3)	0.	12,848.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
LOAVES AND FISHES PO BOX 690304 TULSA, OK 74169	73-1144861	501 (C) (3)	0.	526,852.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOAVES AND FISHES PO BOX 690304 TULSA, OK 74169	73-1144861	501 (C) (3)	0.	86,772.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ZOE INSTITUTE PO BOX 1864 TAHLEQUAH, OK 74465	11-3717573	501 (C) (3)	0.	227,080.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
THE OAKS R.S.C. PO BOX 1404 MCALESTER, OK 74502	73-0770231	501 (C) (3)	0.	5,801.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SALVATION ARMY/MIAMI 217 W STEVE OWENS BLVD MIAMI, OK 74354	58-0660607	501 (C) (3)	0.	112,041.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NEIGHBORS ALONG THE LINE 5000 CHARLES PAGE BLVD TULSA, OK 74127	73-1160840	501 (C) (3)	0.	269,194.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NEW LIFEHOUSE PO BOX 670 DISNEY, OK 74340	73-1324022	501 (C) (3)	0.	32,360.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST BAPTIST CHURCH/OKAY/MANNA HOUSE - PO BOX 100 - OKAY, OK 74446	73-1160403	501 (C) (3)	0.	33,411.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NE OK COUNCIL ON ALCOHOLISM PO BOX 1271 MIAMI, OK 74354	73-0980866	501 (C) (3)	0.	26,971.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST UNITED METHODIST CHURCH/CLAREMORE - 1615 N HWY 88 - CLAREMORE, OK 74017	73-0632933	501 (C) (3)	0.	444,303.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST UNITED METHODIST CHURCH/CLAREMORE/ CSFP - 1615 N HWY 88 - CLAREMORE, OK 74017	73-0632933	501 (C) (3)	0.	23,076.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
WAGONER COMMUNITY OUTREACH PO BOX 1157 WAGONER, OK 74477	51-0437951	501 (C) (3)	0.	112,020.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
WAGONER COMMUNITY ON-SITE PO BOX 1157 WAGONER, OK 74467	51-0437951	501 (C) (3)	0.	56,854.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
DOC SERVICES/GROVE PO BOX 848 MIAMI, OK 74355	73-1615506	501 (C) (3)	0.	39,996.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
DOC SERVICES/MIAMI PO BOX 848 MIAMI, OK 74355	73-1615506	501 (C) (3)	0.	179,144.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ROCMND WELCH SKILL CENTER PO BOX 912 VINITA, OK 74301	73-1013488	501 (C) (3)	0.	20,219.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SHARED BLESSINGS PO BOX 328 MCALESTER, OK 74502	73-1527791	501 (C) (3)	0.	91,807.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ST CLEMENTS COMMUNITY OUTREACH 15501 S MEMORIAL DR BIXBY, OK 74008	73-1328272	501 (C) (3)	0.	75,848.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
PRUE SENIOR CITIZENS PO BOX 144 PRUE, OK 74060	48-0870644	501 (C) (3)	0.	5,288.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALVATION ARMY/CENTER OF HOPE 102 N DENVER AVE TULSA, OK 74103	58-0660607	501 (C) (3)	0.	159,565.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SALVATION ARMY/ARC 601 N MAIN ST TULSA, OK 74106	58-0660607	501 (C) (3)	0.	224,318.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SALVATION ARMY/MUSKOGEE PO BOX AA MUSKOGEE, OK 74401	58-0660607	501 (C) (3)	0.	15,440.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SOUTH TULSA COMMUNITY HOUSE 5780 S PEORIA AVE TULSA, OK 74105	73-1433838	501 (C) (3)	0.	791,062.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CHRISTIAN H.E.L.P. CENTER PO BOX 451626 GROVE, OK 74345	73-1491982	501 (C) (3)	0.	341,365.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CHRISTVIEW CHRISTIAN CHURCH 2525 S GARNETT RD TULSA, OK 74129	73-1069351	501 (C) (3)	0.	209,215.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ARMS AROUND BA 700 W FORT WORTH BROKEN ARROW, OK 74012	20-3384145	501 (C) (3)	0.	216,482.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TIMOTHY BAPTIST/OPERATION PIN 821 E 46TH ST NORTH TULSA, OK 74126	73-1325079	501 (C) (3)	0.	35,144.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TULSA DAY CENTER FOR HOMELESS 415 W. ARCHER AVE. TULSA, OK 74103	73-1557819	501 (C) (3)	0.	13,120.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARBLE CITY COMMUNITY PANTRY PO BOX 263 MARBLE CITY, OK 74945	20-1411098	501 (C) (3)	0.	210,193.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
IRON GATE 501 S. CINCINNATI AVE. TULSA, OK 74103	20-3196451	501 (C) (3)	0.	260,718.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
IRON GATE 501 S CINCINNATI AVE TULSA, OK 74103	20-3196451	501 (C) (3)	0.	336,322.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TULSA C.A.R.E.S./ST. JEROMES FOOD PANTRY - 3712 EAST 11TH STREET - TULSA, OK 74112	73-1388569	501 (C) (3)	0.	23,015.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CATHOLIC CHARITIES/SALLISAW PO BOX 1321 SALLISAW, OK 74955	73-1171950	501 (C) (3)	0.	286,341.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SUGARLOAF CHRISTIAN FELLOWSHIP 35204 MIDWAY RD POTEAU, OK 74953	73-1228461	501 (C) (3)	0.	40,876.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ST JEROME'S 205 W KING ST TULSA, OK 74106	73-1512982	501 (C) (3)	0.	21,836.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TWELVE & TWELVE TRANSITION HSE 6333 E SKELLY DR TULSA, OK 74135	73-1242962	501 (C) (3)	0.	14,599.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
RESTORE HOPE MINISTRIES, INC. 2960 CHARLES PAGE BLVD TULSA, OK 74127	73-1037026	501 (C) (3)	0.	271,718.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTERN NEIGHBORS FAMILY SERVICES PO BOX 570976 TULSA, OK 74157	73-1109460	501 (C) (3)	0.	63,651.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
DAYSRING VILLA WOMEN'S SHELTE 4235 SW BLVD. TULSA, OK 74107	73-1474319	501 (C) (3)	0.	28,917.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
YOUTH SERVICES OF TULSA 311 S. MADISON AVE. TULSA, OK 74120	73-0785251	501 (C) (3)	0.	7,011.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
PRYOR MINISTRIES CENTER 311 S. MADISON AVE. TULSA, OK 74120	81-0577112	501 (C) (3)	0.	500,635.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CHECOTAH METHODIST MISSION PO BOX 36 CHECOTAH, OK 74426	73-1189192	501 (C) (3)	0.	142,892.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CORNERSTONE FREE WILL BAPT. CH 713 N. BROADWAY CHECOTAH, OK 74426	73-1467235	501 (C) (3)	0.	79,895.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CORNERSTONE FREE WILL BAPT. CH 7770 N. WHIRLPOOL DR. SPERRY, OK 74073	73-1467235	501 (C) (3)	0.	25,826.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
DEEP FORK COMMUNITY ACTION FOUNDATION - PO BOX 670 - OKMULGEE, OK 74447	73-0776899	501 (C) (3)	0.	5,655.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST UNITED METHODIST/DEPEW P O BOX 255 DEPEW, OK 74028	73-1484721	501 (C) (3)	0.	21,463.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY CRISIS CENTER 118 A STREET SE MIAMI, OK 74354	73-1115656	501 (C) (3)	0.	12,216.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CATHOLIC CHARITIES/MUSKOGEE 1220 W BROADWAY MUSKOGEE, OK 74401	73-1171950	501 (C) (3)	0.	111,697.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CATHOLIC CHARITIES/MUSKOGEE CSFP 1220 W BROADWAY MUSKOGEE, OK 74401	73-1171950	501 (C) (3)	0.	25,028.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MOON CHURCH OF GOD PANTRY 30 EMERALD HILL LANE HAWORTH, OK 74740	73-1420433	501 (C) (3)	0.	68,437.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
LIFECHANGER CHURCH 30 EMERALD HILL LANE HAWORTH, OK 74740	73-0976624	501 (C) (3)	0.	168,041.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
OWASSO COMMUNITY RESOURCES 109 N. BIRCH, SUITE 109 OWASSO, OK 74055	73-1445318	501 (C) (3)	0.	661,187.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
WRIGHT CITY SENIOR CITIZENS PO BOX 524 WRIGHT CITY, OK 74766	73-1456381	501 (C) (3)	0.	7,745.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST BAPTIST CHURCH/DRUMRIGHT 1000 N. NORWOOD WRIGHT CITY, OK 74766	73-1169302	501 (C) (3)	0.	50,251.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MT. ZION PROJECT HELP 229 SOUTH OHIO DRUMRIGHT, OK 74030	73-0999988	501 (C) (3)	0.	8,920.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JOHN 3:16 FAMILY MINISTRY 4115 W EDISON TULSA, OK 74127	73-0744834	501 (C) (3)	0.	250,462.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
JOHN 3:16 MISSION INC. 575 N 39TH W AVE TULSA, OK 74127	73-0744834	501 (C) (3)	0.	39,740.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SPRINGS INC. PO BOX 398 SAND SPRINGS, OK 74063	73-1217550	501 (C) (3)	0.	6,334.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NUEVA ESPERANZA UMC 1027 N HARVARD AVE TULSA, OK 74115	73-1214929	501 (C) (3)	0.	246,363.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KIBOIS CAF PANTRY/POTEAU PO BOX 965 POTEAU, OK 74933	73-0770231	501 (C) (3)	0.	218,423.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
WOMEN IN SAFE HOMES PO BOX 487 MUSKOGEE, OK 74402	73-1233396	501 (C) (3)	0.	9,552.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CRSOK / SAND SPRINGS 7010 S YALE AVE STE 215 TULSA, OK 74138	73-1064338	501 (C) (3)	0.	14,972.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BOYS & GIRLS CLUB BARTLESVILLE 401 S. SEMINOLE BARTLESVILLE, OK 74003	73-0618201	501 (C) (3)	0.	16,816.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CHRIST FOR HUMANITY PO BOX 580127 TULSA, OK 74158	73-1421083	501 (C) (3)	0.	155,799.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUBILEE CHRISTIAN CENTER P O BOX 434 OKMULGEE, OK 74447	73-1552394	501 (C) (3)	0.	173,431.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
VISION OF FAITH CHURCH 8730 S LYNN LANE BROKEN ARROW, OK 74012	73-1483316	501 (C) (3)	0.	6,143.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST ASSEMBLY OF GOD PO BOX 716 MULDROW, OK 74948	73-1191157	501 (C) (3)	0.	119,064.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HELPING HAND MINISTRY 709 S BOSTON AVE TULSA, OK 74119	73-1501065	501 (C) (3)	0.	47,503.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BRISTOW PRESBYTERIAN CHURCH/BP PO BOX 805 BRISTOW, OK 74010	73-6172223	501 (C) (3)	0.	23,007.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SAND SPRINGS COMMUNITY SERVICES, INC. - PO BOX 25 - SAND SPRINGS, OK 74063	73-0582550	501 (C) (3)	0.	355,579.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CLAREMORE 7TH DAY ADVENTIST CHURCH PO BOX 1162 CLAREMORE, OK 74018	73-0683149	501 (C) (3)	0.	95,462.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
EOYS DETENTION CENTER 1208 N WEST ST MCALESTER, OK 74501	73-1325874	501 (C) (3)	0.	20,982.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
GRACE COMMUNITY CHURCH 804 N COLUMBUS SPIRO, OK 74959	37-1457692	501 (C) (3)	0.	127,896.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST BAPTIST CHURCH/ANTLERS P 208 NE "B" ST ANTLERS, OK 74523	73-1092316	501 (C) (3)	0.	62,527.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CROSSTOWN PENTECOSTAL HOLINESS 1206 W 5TH ST OKMULGEE, OK 74447	73-1201480	501 (C) (3)	0.	61,413.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
PARENT CHILD CENTER 1421 S. BOSTON AVE. TULSA, OK 74119	73-1113167	501 (C) (3)	0.	9,997.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MEMBERS IN CHRIST ASSEMBLY/VIAN HC 68 BOX 210 VIAN, OK 74962	71-0914053	501 (C) (3)	0.	58,234.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NEW CREATURE MINISTRIES 463610 E 648 RD WATTS, OK 74964	47-1665606	501 (C) (3)	0.	209,370.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KIAMICHI YOUTH SERVICES, INC. 463610 E 648 RD WATTS, OK 74964	73-0954088	501 (C) (3)	0.	27,676.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CRAIG COUNTY SALVATION ARMY PO BOX 263 VINITA, OK 74301	58-0660607	501 (C) (3)	0.	7,703.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SAFE HAVEN YALE 5330 E. 31ST SUITE 1000 TULSA, OK 74135	73-0657931	501 (C) (3)	0.	63,376.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST UNITED METHODIST CHURCH/MCALESTER - 5330 E. 31ST SUITE 1000 - TULSA, OK 74135	73-0642609	501 (C) (3)	0.	9,697.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PINEY CREEK FELLOWSHIP CHURCH 110 DOGWOOD DR STIGLER, OK 74462	20-1147439	501 (C) (3)	0.	114,777.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CRAIG COUNTY DETENTION CENTER PO BOX 413 VINITA, OK 74301	73-1013488	501 (C) (3)	0.	28,292.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
THE ASSEMBLY AT BROKEN ARROW 3500 W NEW ORLEANS ST. BROKEN ARROW, OK 74011	73-6069616	501 (C) (3)	0.	57,411.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ARK OF FAITH FOUNDATION PO BOX 1412 MUSKOGEE, OK 74402	73-1035111	501 (C) (3)	0.	43,181.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
RED FORK BAPTIST CHURCH FOOD PANTRY - 2821 W. 40TH ST. - TULSA, OK 74107	73-0671203	501 (C) (3)	0.	69,216.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MARY LOU TROLINGER SR CENTER PO BOX 230 CROWDER, OK 74430	73-1193977	501 (C) (3)	0.	17,379.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NEW FAITH/CRESTVIEW 110 B AVENUE INDIANOLA, OK 74430	73-1428617	501 (C) (3)	0.	18,272.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ABUNDANT RAIN MINISTRIES 12425 S 273RD E AVE COWETA, OK 74429	73-1615887	501 (C) (3)	0.	1,532,308.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HOPE CENTER INC PO BOX 602 WESTVILLE, OK 74965	73-1572728	501 (C) (3)	0.	135,442.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARVEST HOUSE 1439 E 71ST ST TULSA, OK 74136	20-3781764	501 (C) (3)	0.	140,394.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
WOMEN'S CRISIS SERVICES PO BOX 774 POTEAU, OK 74953	73-1305940	501 (C) (3)	0.	6,438.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ST PAUL UNITED METHODIST CHURCH/BP 510 N. BROADWAY (CONFIDENTIAL) POTEAU, OK 74953	73-0632936	501 (C) (3)	0.	16,978.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST BAPTIST CHURCH/MUSKOGEE 111 S 7TH ST MUSKOGEE, OK 74401	73-0579253	501 (C) (3)	0.	173,879.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
INDIANOLA SENIOR CITIZENS 111 S 7TH ST MUSKOGEE, OK 74401	73-1129661	501 (C) (3)	0.	18,577.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BIXBY COMMUNITY OUTREACH CENTER 77 E BRECKENRIDGE AVE. BIXBY, OK 74008	20-5301279	501 (C) (3)	0.	227,349.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SOPER SENIOR CITIZENS PO BOX 242 SOPER, OK 74759	73-0972003	501 (C) (3)	0.	11,400.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HAND TO HAND, INC. PO BOX 343 IDABEL, OK 74745	73-1342402	501 (C) (3)	0.	123,131.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HAND TO HAND, INC. CSFP PO BOX 343 IDABEL, OK 74745	73-1342402	501 (C) (3)	0.	23,569.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JENKS CHURCH OF CHRIST 1015 W MAIN ST JENKS, OK 74037	73-1088678	501 (C) (3)	0.	41,295.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BRISTOW SOCIAL SERVICES INC. PO BOX 574 BRISTOW, OK 74010	73-1345471	501 (C) (3)	0.	217,399.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SAFE HAVEN P.O. BOX 982 MCALESTER, OK 74502	73-0657931	501 (C) (3)	0.	10,300.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KIBOIS CAF/WILBURTON 705 N. QUAKER AVE. TULSA, OK 74106	73-0770231	501 (C) (3)	0.	50,450.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CROSSTOWN CHURCH OF CHRIST P O BOX 1422 BARTLESVILLE, OK 74005	73-1108777	501 (C) (3)	0.	54,720.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
S.T.E.P.S. RESOURCE CENTER 4301 S UNION TULSA, OK 74107	73-1552724	501 (C) (3)	0.	65,058.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
THE GOOD SAMARITAN MINISTRY, INC. 715 S HWY 88 CLAREMORE, OK 74017	20-1621058	501 (C) (3)	0.	169,620.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TULSA INDIAN UMC 1901 N COLLEGE AVE TULSA, OK 74110	73-1343038	501 (C) (3)	0.	15,886.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HANDS OF HOPE/HUGO PO BOX 910 HUGO, OK 74743	73-1400154	501 (C) (3)	0.	15,899.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADAIR COUNTY RESOURCE CENTER, INC. PO BOX 910 HUGO, OK 74743	73-1587275	501 (C) (3)	0.	129,809.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ADAIR CO RESOURCE CENTER/BP PO BOX 547 STILWELL, OK 74960	73-1587275	501 (C) (3)	0.	22,931.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BREAD OF LIFE/TAHLEQUAH 325 E WARD ST TAHLEQUAH, OK 74464	73-1439995	501 (C) (3)	0.	86,919.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
POTEAU CHURCH OF CHRIST 20690 292ND ST POTEAU, OK 74953	73-1199681	501 (C) (3)	0.	17,562.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
JOHN 6:13/ALL SAINTS EPISCOPAL CH PO BOX 534 MCALESTER, OK 74502	73-0715060	501 (C) (3)	0.	29,009.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HEAVENER FIRST BAPTIST CHURCH PO BOX 845 HEAVENER, OK 74937	73-0605695	501 (C) (3)	0.	94,422.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
WALKER HALL 1729 S. BALTIMORE TULSA, OK 74119	73-0657931	501 (C) (3)	0.	6,192.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
JAY SENIOR CITIZENS CENTER 316 N. 6TH CHOUTEAU, OK 74337	73-1189221	501 (C) (3)	0.	23,850.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
F&CS HEADSTART PROGRAM 650 S PEORIA AVE TULSA, OK 74120	73-0580270	501 (C) (3)	0.	12,171.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
F&CS MIDTOWN 650 S PEORIA AVE TULSA, OK 74120	73-0580270	501 (C) (3)	0.	35,844.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
PARKSIDE PANTRY 1620 E 12TH ST TULSA, OK 74120	73-1280067	501 (C) (3)	0.	12,362.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BETHEL BAPTIST CHURCH PO BOX 368 WISTER, OK 74966	73-1200675	501 (C) (3)	0.	6,867.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SOULS HARBOR CHURCH 7429 N. 198TH EAST COURT OWASSO, OK 74055	73-1342828	501 (C) (3)	0.	60,301.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
B&GC OF GREEN COUNTRY 1111 SE 9TH PRYOR, OK 74361	73-1527045	501 (C) (3)	0.	8,116.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST BAPTIST CHURCH OF SAPULPA PO BOX 1089 SAPULPA, OK 74067	73-6060776	501 (C) (3)	0.	11,283.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
STANDING IN THE GAP PO BOX 1195 OWASSO, OK 74055	73-1596451	501 (C) (3)	0.	48,734.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CALVARY BAPTIST CH / CITY OF REFUGE - PO BOX 834 - EUFAULA, OK 74432	73-1052693	501 (C) (3)	0.	153,442.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
GOD'S HELPING HANDS PO BOX 533 EUFAULA, OK 74432	73-1582823	501 (C) (3)	0.	12,331.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VINITA DAY CENTER PO BOX 223 VINITA, OK 74301	73-1312406	501 (C) (3)	0.	14,941.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KANSAS SENIOR CENTER PO BOX 226 KANSAS, OK 74347	48-0986126	501 (C) (3)	0.	6,018.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HIGHER ESTEEM 205 E. PINE ST SUITE 501 TULSA, OK 74106	73-1479217	501 (C) (3)	0.	19,186.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
LEONARD UMC / BP PO BOX 36 LEONARD, OK 74043	73-1135798	501 (C) (3)	0.	7,656.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
GATESWAY FOUNDATION 1217 E COLLEGE ST BROKEN ARROW, OK 74012	73-0746440	501 (C) (3)	0.	213,359.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SALVATION ARMY/BARTLESVILLE 1217 EAST COLLEGE BROKEN ARROW, OK 74012	58-0660607	501 (C) (3)	0.	30,288.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SALVATION ARMY/BARTLESVILLE 1217 EAST COLLEGE BROKEN ARROW, OK 74012	58-0660607	501 (C) (3)	0.	146,085.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TULSA DREAM CENTER 200 WEST 46TH ST N. TULSA, OK 74126	73-1610216	501 (C) (3)	0.	1,171,821.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TULSA DREAM CENTER 200 WEST 46TH ST N TULSA, OK 74126	73-1610216	501 (C) (3)	0.	8,351.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIGHTHOUSE FAMILY WORSHIP CTR. 1755 WEST 53RD ST N TULSA, OK 74126	73-1530470	501 (C) (3)	0.	16,623.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CATHOLIC CHARITIES/ POTEAU PO BOX 363 POTEAU, OK 74953	73-1171950	501 (C) (3)	0.	190,188.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CATHOLIC CHARITIES/ POTEAU CSFP PO BOX 363 POTEAU, OK 74953	73-1171950	501 (C) (3)	0.	21,719.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SHIRLEY COOK MEMORIAL FOOD BANK P.O. BOX 913 WISTER, OK 74966	45-4493988	501 (C) (3)	0.	51,761.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST UNITED METHODIST CHURCH/OKMULGEE - 410 N. BAGWELL - POTEAU, OK 74953	73-0674203	501 (C) (3)	0.	31,522.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HOUSING PARTNERS OF TULSA 410 N. BAGWELL POTEAU, OK 74953	73-1397452	501 (C) (3)	0.	175,103.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MANNA HOUSE MINISTRIES 4921 E ADMIRAL PL TULSA, OK 74115	73-7598976	501 (C) (3)	0.	376,925.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MCALESTER CARE CENTER PO BOX 3324 MCALESTER, OK 74501	73-0770231	501 (C) (3)	0.	10,198.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CARING COMMUNITY FRIENDS HWY 70 & 147 N SAWYER, OK 74756	73-1429214	501 (C) (3)	0.	648,815.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARING COMMUNITY FRIENDS / BP PO BOX 1524 SAPULPA, OK 74067	73-1429214	501 (C) (3)	0.	13,354.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CROSSROADS, INC. 1888 E. 15TH ST. TULSA, OK 74104	73-1447897	501 (C) (3)	0.	48,939.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CROSSROADS, INC 1888 E 15TH ST TULSA, OK 74104	73-1447897	501 (C) (3)	0.	8,286.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST BAPTIST CHURCH/TULSA/CARING CENTER - 403 S CINCINNATI AVE - TULSA, OK 74103	73-0621892	501 (C) (3)	0.	258,706.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
EAGLETOWN SENIOR CITIZENS CTR. 377 LASTER LANE EAGLETOWN, OK 74734	73-6006392	501 (C) (3)	0.	16,527.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
GRAND LAKE COMMUNITY MINISTRY PO BOX 936 LANGLEY, OK 74350	73-1316143	501 (C) (3)	0.	62,632.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SALVATION ARMY/BROKEN ARROW 1400 W. WASHINGTON BROKEN ARROW, OK 74012	58-0660607	501 (C) (3)	0.	109,028.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
OKMULGEE CO. HOMELESS SHELTER 377 LASTER LANE EAGLETOWN, OK 74734	73-1485176	501 (C) (3)	0.	6,681.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
WAGONER AREA NEIGHBORS PO BOX 993 WAGONER, OK 74477	73-1351405	501 (C) (3)	0.	268,807.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TULSA COUNTY SOCIAL SERVICES 2233 N. SURREY LANE SAPULPA, OK 74066	73-6006419	501 (C) (3)	0.	16,211.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SPECIAL KIDS 6311 E. TECUMSEH STREET TULSA, OK 74115	02-0645322	501 (C) (3)	0.	21,402.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TRIUMPH WORSHIP CENTER PO BOX 520 GLENPOOL, OK 74033	75-1485285	501 (C) (3)	0.	205,597.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FUMC SAPULPA/BP 1401 EAST TAFT SAPULPA, OK 74066	73-0579226	501 (C) (3)	0.	8,471.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CARE FOOD PANTRY, INC. PO BOX 1598 TAHLEQUAH, OK 74465	73-1423261	501 (C) (3)	0.	103,152.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CARE FOOD PANTRY BACKPACK PO BOX 1598 TAHLEQUAH, OK 74465	73-1423261	501 (C) (3)	0.	22,576.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KIAMICHI OPPORTUNITIES/ BP 308 ELITE STREET ANTLERS, OK 74523	73-1219338	501 (C) (3)	0.	6,553.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MEMORIAL DRIVE CHURCH OF CHRIST 747 S MEMORIAL DR TULSA, OK 74112	73-1070217	501 (C) (3)	0.	256,657.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ABOUNDING FAITH MINISTRIES INC 410 "M" ST NW MIAMI, OK 74354	73-1225245	501 (C) (3)	0.	65,668.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALVARY TEMPLE ASSEMBLY OF GOD FOOD PANTRY - PO BOX 27247 - TULSA, OK 74149	73-1051571	501 (C) (3)	0.	25,513.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
JESUS' HELPING HANDS / BP PO BOX 528 CHECOTAH, OK 74426	86-1054057	501 (C) (3)	0.	12,665.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
COURTYARD CHURCH BP 1201 SOUTH OSAGE SKIATOOK, OK 74070		501 (C) (3)	0.	11,398.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
OOLOGAH UMC/ CSFP 5834 EAST 410 RD OOLOGAH, OK 74053	73-1191160	501 (C) (3)	0.	6,769.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BROKEN ARROW CHURCH OF CHRIST 505 EAST KENOSHA BROKEN ARROW, OK 74012	73-0992051	501 (C) (3)	0.	5,197.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BROKEN ARROW CHURCH OF CHRIST FOOD PANTRY - 505 E KENOSHA - BROKEN ARROW, OK 74012	73-0992051	501 (C) (3)	0.	51,581.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SHARING HOPE IN HUGO 1218 NORTH B ST. HUGO, OK 74743	90-0428299	501 (C) (3)	0.	108,056.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BEAVER STREET BAPTIST CHURCH 311 S. MCCLURE ST BROKEN BOW, OK 74728	73-0936730	501 (C) (3)	0.	57,654.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CHRIST'S FOOD CENTER, INC. 60591 CLIFF LANE (BIG CEDAR) HODGEN, OK 74939	30-0284075	501 (C) (3)	0.	9,568.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOLY HIGHWAY EVANGELISTIC CTR 1019 E 54TH ST NORTH TULSA, OK 74126	73-1543886	501 (C) (3)	0.	182,312.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
PEOPLE'S PANTRY OF TULSA, INC. 5110 S YALE AVE STE 430 TULSA, OK 74135	45-5481268	501 (C) (3)	0.	34,088.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
VALLIANT FOOD BANK PO BOX 540 VALLIANT, OK 74764	75-1169478	501 (C) (3)	0.	5,469.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FUMC GROVE/BP 1005 LEISURE ROAD GROVE, OK 74344	73-1116596	501 (C) (3)	0.	11,805.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TEMPLO CRISTIANO 9326 S 94TH EAST AVE TULSA, OK 74133	20-4440431	501 (C) (3)	0.	352,778.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SPRINGDALE BAPTIST CHURCH 1511 N LEWIS AVE TULSA, OK 74110	73-6004419	501 (C) (3)	0.	54,461.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CLAREMORE MEALS ON WHEELS PO BOX 92 CLAREMORE, OK 74018	73-1284865	501 (C) (3)	0.	42,428.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CHURCH IN POWER PO BOX 470964 TULSA, OK 74112	04-3667569	501 (C) (3)	0.	96,928.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KINGDOM LIFE COMMUNITY CHURCH 130 N MAIN ST PORTER, OK 74454	73-1114158	501 (C) (3)	0.	7,817.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIVING WATERS FOOD PANTRY PO BOX 874 CLAYTON, OK 74536	45-4296402	501 (C) (3)	0.	106,513.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FFATC 2000 E. HASKELL BLVD MUSKOGEE, OK 74403	73-1599276	501 (C) (3)	0.	28,300.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CATHOLIC CHARITIES/ST JUDE HELPING CENTER - PO BOX 3502 - MCALESTER, OK 74502	73-1171950	501 (C) (3)	0.	121,293.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
EASTLAND ASSEMBLY OF GOD 12310 E 21ST ST TULSA, OK 74129	73-0775116	501 (C) (3)	0.	24,243.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CAAIR 8TH & CHOCTAW CLAYTON, OK 74536	20-8810021	501 (C) (3)	0.	301,594.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
VICTORY WORSHIP COGOP PO BOX 544 QUINTON, OK 74561	73-1263057	501 (C) (3)	0.	88,538.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NORTHSTAR STOREHOUSE PO BOX 787 PRYOR, OK 74362	36-4663894	501 (C) (3)	0.	386,226.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NORTHSTAR STOREHOUSE/ CSFP 114 S MILL ST PRYOR, OK 74361	36-4663894	501 (C) (3)	0.	40,382.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
DIVIDING BREAD PANTRY 13811 N YORKTOWN AVE SKIATOOK, OK 74070	27-2364217	501 (C) (3)	0.	327,402.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DIVIDING BREAD MINISTRY 13811 N YORKTOWN AVE SKIATOOK, OK 74070	27-2364217	501 (C) (3)	0.	10,089.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
VICTORY WORSHIP CENTER/COLCORD 6899 HWY 412 COLCORD, OK 74338	36-4524348	501 (C) (3)	0.	262,992.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
IN THE SPIRIT CHRISTIAN CHURCH 115 S. 11TH ST. COLLINSVILLE, OK 74021	35-0868116	501 (C) (3)	0.	49,590.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
IN THE SPIRIT CHRISTIAN CHURCH 1020 S GARNETT ROAD TULSA, OK 74128	35-0868116	501 (C) (3)	0.	15,924.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HIGHLAND PARK CHRISTIAN CHURCH 5708 E 31ST ST TULSA, OK 74135	73-1166965	501 (C) (3)	0.	30,369.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BOYS & GIRLS CLUB OF MCALESTER PO BOX 1111 MCALESTER, OK 74502	73-0708243	501 (C) (3)	0.	15,627.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BOYS & GIRLS CLUB OF NOWATA BP 300 SOUTH PINE NOWATA, OK 74048	73-1569974	501 (C) (3)	0.	6,555.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ISLAMIC SOCIETY OF TULSA 4630 S IRVINGTON AVE TULSA, OK 74135	73-1531678	501 (C) (3)	0.	38,632.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
EUFAULA BACKPACK BUDDIES 1705 WEST J M BAILEY HWY EUFAULA, OK 74432	81-3225546	501 (C) (3)	0.	8,204.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OTTAWA TRIBE/ADAWE CENTER PO BOX 110 MIAMI, OK 74355	73-1049084	501 (C) (3)	0.	5,132.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
COMMON GROUND CHURCH 7810 E 49TH ST TULSA, OK 74145	11-3758806	501 (C) (3)	0.	2,064,314.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
VIAN PEACE CENTER PANTRY P O BOX 258 VIAN, OK 74962	45-2444485	501 (C) (3)	0.	95,275.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST BAPTIST CHURCH/QUAPAW PO BOX 76 QUAPAW, OK 74363	73-1192572	501 (C) (3)	0.	118,801.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
THE CARING KITCHEN 13717 E 390 RD JAY, OK 74346	05-0643036	501 (C) (3)	0.	109,160.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
THE CARING KITCHEN PANTRY 13717 E 390 RD JAY, OK 74346	05-0643036	501 (C) (3)	0.	23,012.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TRINITY BAPTIST CHURCH 419 KENTUCKY ST. QUAPAW, OK 74363	23-7326700	501 (C) (3)	0.	472,377.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CROSSPOINT 4929 N. PEORIA AVE TULSA, OK 74126	73-1231033	501 (C) (3)	0.	151,958.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MERCY MISSION II PO BOX 502 GLENPOOL, OK 74033	46-5615456	501 (C) (3)	0.	166,372.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALDERSGATE UMC EMERGENCY FOOD PANTRY - 13650 E 21ST ST - TULSA, OK 74134	73-6098431	501 (C) (3)	0.	5,848.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
WARNER COMMUNITY FOOD PANTRY P O BOX 620 WARNER, OK 74469	73-1167503	501 (C) (3)	0.	25,554.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST UNITED METHODIST CHURCH OF OWASSO - 13800 E 106TH ST NORTH - OWASSO, OK 74055	73-1116596	501 (C) (3)	0.	5,173.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MIAMI MINISTERIAL ALLIANCE PO BOX 1456 MIAMI, OK 74355	73-1080560	501 (C) (3)	0.	51,260.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
S & B FOOD PANTRY HC 71 BOX 191-2 SOPER, OK 74759	45-0566044	501 (C) (3)	0.	75,259.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CALVARY BAPTIST CHURCH PO BOX 665 SAPULPA, OK 74067	73-1114416	501 (C) (3)	0.	7,990.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
AGAPE BIBLE FELLOWSHIP 2111 S DARLINGTON AVE TULSA, OK 74114	87-1777341	501 (C) (3)	0.	152,191.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST UMC/MIAMI BP 200 "B" STREET NW MIAMI, OK 74354	73-0706633	501 (C) (3)	0.	16,691.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
EASTERN SHAWNEE TRIBE OF OK 10170 S. BLUEJACKET RD. WYANDOTTE, OK 74370	73-1024490	501 (C) (3)	0.	7,183.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WYANDOTTE NATION 64700 EAST HWY 60 WYANDOTTE, OK 74370	73-1029082	501 (C) (3)	0.	17,524.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
BOKOSHE FIRST BAPTIST CHURCH PO BOX 405 BOKOSHE, OK 74930	73-1102889	501 (C) (3)	0.	7,185.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
VINITA FIRST UNITED METHODIST CHURCH - 314 W CANADIAN - VINITA, OK 74301	73-0957189	501 (C) (3)	0.	38,281.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HEAVENLY HOPE CHURCH FOOD OUTREACH PO BOX 241 PORUM, OK 74455	87-0715436	501 (C) (3)	0.	36,529.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST BAPTIST CHURCH POTEAU 300 N WITTE ST POTEAU, OK 74953	73-0582547	501 (C) (3)	0.	196,804.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
LIVING WORD INTERNATIONAL CHURCH 2545 S YALE AVE TULSA, OK 74114	27-4151414	501 (C) (3)	0.	30,203.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ALL SOULS UNITARIAN CHURCH 2952 S PEORIA AVE TULSA, OK 74114	79-0593301	501 (C) (3)	0.	100,876.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SHOW, INC 425 WEST WELLS SAPULPA, OK 74066	73-1028650	501 (C) (3)	0.	5,894.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
GREEN COUNTRY TEEN CHALLENGE 1701 S. MAIN ST. SAPULPA, OK 74066	73-1324022	501 (C) (3)	0.	167,129.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILY SAFETY CENTER 600 CIVIC CENTER, STE 103 TULSA, OK 74103	45-4544393	501 (C) (3)	0.	7,094.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
GUTS CHURCH/SKIATOOK 9120 E BROKEN ARROW EXPY TULSA, OK 74145	71-3161025	501 (C) (3)	0.	11,251.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HUDSON VILLAS 727 SOUTH HUDSON TULSA, OK 74112	73-1557819	501 (C) (3)	0.	30,821.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
THE LANDING PO BOX 190 FAIRLAND, OK 74343	80-0727431	501 (C) (3)	0.	9,137.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
LOCUST GROVE COMMUNITY COALITION PO BOX 203 LOCUST GROVE, OK 74352	73-1476525	501 (C) (3)	0.	67,128.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TRINITY UNITED METHODIST CHURCH/MULDROW - PO BOX 430 - MULDROW, OK 74948	73-1085756	501 (C) (3)	0.	39,104.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
WESLEY CHAPEL 1312 SOUTH QUAKER #12 TULSA, OK 74120	73-1526353	501 (C) (3)	0.	14,732.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
WESLEY CHAPEL 1312 SOUTH QUAKER # 12 TULSA, OK 74120	73-1526353	501 (C) (3)	0.	112,561.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NEIGHBORS IN NEED 9907 N 118TH EAST AVE OWASSO, OK 74055	47-3702348	501 (C) (3)	0.	225,412.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDSHIP KITCHEN 107 MCKINLEY ST STE 3 EUFAULA, OK 74432	73-1582823	501 (C) (3)	0.	9,326.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
GOOD SAMARITAN OUTREACH PO BOX 174 MCALESTER, OK 74502	80-0709537	501 (C) (3)	0.	25,212.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FEED THE NEED/MCALESTER PO BOX 100 WRIGHT CITY, OK 74766	47-1926101	501 (C) (3)	0.	27,906.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FEED THE NEED/WILBURTON PO BOX 100 WRIGHT CITY, OK 74766	47-1926101	501 (C) (3)	0.	8,085.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FEED THE NEED/SPIRO PO BOX 100 WRIGHT CITY, OK 74766	47-1926101	501 (C) (3)	0.	8,654.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FEED THE NEED / POTEAU PO BOX 100 WRIGHT CITY, OK 74766	47-1926101	501 (C) (3)	0.	14,888.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
JENKS COMMUNITY FOOD BANK PO BOX 324 JENKS, OK 74037	73-1456097	501 (C) (3)	0.	259,305.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
VICTORY WORSHIP CENTER/KEOTA PO BOX 475 KEOTA, OK 74941	30-0356349	501 (C) (3)	0.	20,652.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ST. ANNE CATHOLIC CHURCH 301 S 9TH BROKEN ARROW, OK 74012	73-0711169	501 (C) (3)	0.	311,633.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST CHURCH OF GOD / PRYOR PO BOX 1091 PRYOR, OK 74362	73-0645151	501 (C) (3)	0.	10,549.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIREHOUSE MINISTRY PO BOX 722 BRISTOW, OK 74010	45-3733584	501 (C) (3)	0.	6,938.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
THERE IS HOPE 14482 N. LANTANA BLVD SKIATOOK, OK 74070	47-1776820	501 (C) (3)	0.	40,553.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HELP WORKS, INC. PO BOX 1475 PAWHUSKA, OK 74056	73-1078009	501 (C) (3)	0.	28,284.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KIBOIS CAF STIGLER PO BOX 965 POTEAU, OK 74953	73-0770231	501 (C) (3)	0.	145,551.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TULSA COUNTY JUVENILE BUREAU PANTRY - 315 S. GILCREASE MUSEUM RD - TULSA, OK 74115	73-1479217	501 (C) (3)	0.	9,367.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SHIDLER MIN ALLIANCE/CSFP PO BOX 366 SHIDLER, OK 74652	83-3259220	501 (C) (3)	0.	16,257.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NEW LIFE FOURSQUARE CH/CSFP 442989 EAST 335 RD VINITA, OK 74301	94-2869499	501 (C) (3)	0.	44,972.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NEW LIFE FOURSQUARE CHURCH/CSFP OTTAWA - 442989 EAST 335 RD - VINITA, OK 74301	94-2869499	501 (C) (3)	0.	45,950.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW LIFE FOURSQUARE CHURCH/CSFP DELAWARE - 442989 EAST 335 RD - VINITA, OK 74301	94-2869499	501 (C) (3)	0.	39,362.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CITY LIGHTS FOUNDATION 7204 SOUTH BIRCH AVE BROKEN ARROW, OK 74011	47-4362563	501 (C) (3)	0.	5,505.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HAPPY HANDS EDUCATION CENTER 8801 SOUTH GARNETT RD BROKEN ARROW, OK 74012	73-1425473	501 (C) (3)	0.	32,820.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CHURCH OF THE RESURRECTION 4804 S FULTON AVE TULSA, OK 74135	73-0632924	501 (C) (3)	0.	20,111.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TWIN CITIES CHRISTIAN OUTREACH 106 APACHE HARTSHORNE, OK 74547	47-3848044	501 (C) (3)	0.	50,913.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
RAYS HOUSE 3991 E. PEAK BLVD MUSKOGEE, OK 74403	26-2139183	501 (C) (3)	0.	40,788.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KIDS CONNECTION 425 W. WELLS BLVD SAPULPA, OK 74066	73-1028650	501 (C) (3)	0.	6,412.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
SPRING CREEK/CREOKS 23 E. ROSS AVE SAPULPA, OK 74066	73-1108774	501 (C) (3)	0.	26,864.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
APOSTOLICS OF MCALESTER 300 E. CARL ALBERT PARKWAY MCALESTER, OK 74501	32-0497981	501 (C) (3)	0.	26,783.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APOSTOLICS OF MCALESTER 300 E CARL ALBERT PKWY MCALESTER, OK 74501	32-0497981	501 (C) (3)	0.	11,240.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
UNITED FAITH CHURCH 814 EAST CHEROKEE AVE SALLISAW, OK 74955	73-1597100	501 (C) (3)	0.	9,158.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CENTRAL BAPTIST CHURCH 624 EAST SIDE BLVD MUSKOGEE, OK 74403	73-0619620	501 (C) (3)	0.	9,129.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CALVARY PCG PANTRY PO BOX 1993 MCALESTER, OK 74502	90-0658357	501 (C) (3)	0.	5,785.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
ALABASTER BOX SOUP KITCHEN PO BOX 374 HEAVENER, OK 74937	73-1543151	501 (C) (3)	0.	7,143.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MEMORIAL DRIVE UMC FOOD PANTRY 7903 E 15TH ST TULSA, OK 74112	73-0719384	501 (C) (3)	0.	33,563.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FAITH LOVE COMMUNITY OUTREACH 1208 TAMAROA STREET MUSKOGEE, OK 74403	81-1969064	501 (C) (3)	0.	17,583.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MANNFORD FOOD FOR KIDS BP PO BOX 1511 MANNFORD, OK 74044	90-0606023	501 (C) (3)	0.	13,893.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
IGLESIA HISPANA VICTORY 10811 E 41ST ST TULSA, OK 74146	46-3090298	501 (C) (3)	0.	1,804,602.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
D.A.R.P. INC. TWO ONE PLAZA SOUTH SUITE 392 TAHLEQUAH, OK 74464	73-1611805	501 (C) (3)	0.	6,038.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
JAMES MISSION, INC. 4122 W 55TH PL TULSA, OK 74107	46-3071831	501 (C) (3)	0.	102,514.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
MATOAKA BAPTIST FOOD PANTRY 24660 N. 3940 RD OCHELATA, OK 74051		501 (C) (3)	0.	5,296.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CHURCH OF THE WORD 1915 W TAFT AVE SAPULPA, OK 74066	73-1153333	501 (C) (3)	0.	159,714.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
HEAVEN SENT PO BOX 70 SKIATOOK, OK 74070	44-0577787	501 (C) (3)	0.	202,929.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FUMC PORTER / BP PO BOX 270 PORTER, OK 74454	73-1116596	501 (C) (3)	0.	9,607.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
TRIUMPHANT CHURCH PO BOX 2276 OWASSO, OK 74055	46-2387713	501 (C) (3)	0.	42,635.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST CHURCH OF GOD - VINITA 113 W TAHLEQUAH VINITA, OK 74301	73-1198209	501 (C) (3)	0.	21,075.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST ASSEMBLY SOUP N SOULS 420 W CHEROKEE SALLISAW, OK 74955	73-1167505	501 (C) (3)	0.	7,039.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Schedule I (Form 990)

73-1184980

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERGE CHURCH PO BOX 9615 TULSA, OK 74157	46-4593722	501 (C) (3)	0.	42,663.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CRAIG COUNTY NEIGHBORS HELPING NEIGHBORS - PO BOX 263 - VINITA, OK 74301	83-1473821	501 (C) (3)	0.	60,105.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
NEW LIFE CHURCH/ BP PO BOX 1329 STILWELL, OK 74960	73-1604126	501 (C) (3)	0.	29,110.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
OK HEARTLAND HEROES FOUNDATION 12812 S. MEMORIAL DR., SUITE 304 BIXBY, OK 74008	83-1441890	501 (C) (3)	0.	33,518.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
THE MISSION AT OWASSO 11341 N. GARNETT RD. OWASSO, OK 74055	62-0535346	501 (C) (3)	0.	6,981.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
RAY MINISTRIES 12222 S. 129TH E. AVE. BROKEN ARROW, OK 74011	81-3985632	501 (C) (3)	0.	7,266.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
CALVARY MISSIONARY BAPTIST CHURCH 2402 SE WASHINGTON ST. IDABEL, OK 74745	73-1197872	501 (C) (3)	0.	14,275.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
KINGDOM CULTURE CHURCH 6404 S. PEORIA AVE TULSA, OK 74136	81-4107907	501 (C) (3)	0.	7,698.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY
FIRST BAPTIST CHURCH OF DEWAR 507 W. 6TH ST. DEWAR, OK 74331	73-1505883	501 (C) (3)	0.	10,954.	VALUATION STUDY	FOOD PRODUCTS	FOOD ASSISTANCE TO NEEDY

Schedule I (Form 990)

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

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:

WE MAINTAIN RECORDS TO SUBSTANTIATE THE AMOUNT OF FOOD WE DISTRIBUTE. EACH ORGANIZATION SIGNS A CONTRACT THAT INCLUDES A DESCRIPTION OF HOW THE FOOD CAN BE USED. THE ORGANIZATION FILLS OUT A SELF-MONITORING FORM ONCE A YEAR AND WE CONDUCT ON-SITE MONITORING VISITS EVERY 24 MONTHS. FOOD IS VALUED AT \$1.62 PER POUND BASED ON ANNUAL PRODUCT VALUATION STUDY CONDUCTED BY FEEDING AMERICA.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization **COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC.** Employer identification number **73-1184980**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X		40,140,633.	VALUATION STUDY
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (MISCELLANEOUS)	X	0	42,971.	DETERMINED BY DONOR
26 Other ▶ (FREEZER)	X	0	25,000.	DETERMINED BY DONOR
27 Other ▶ ()				
28 Other ▶ ()				

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

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? **X**
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **X**
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **X**
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a		X

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

Schedule M (Form 990) 2018

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

SCHEDULE M, PART I, COLUMN (B):

FOOD WAS VALUED AT \$1.62/LB BASED ON ANNUAL PRODUCT VALUATION STUDY
CONDUCTED BY FEEDING AMERICA.

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Employer identification number
73-1184980

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

TOM HUTCHISON AND LEX ANDERSON HAVE A FATHER-IN-LAW/SON-IN-LAW
RELATIONSHIP.

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

ONCE THE FORM 990 IS COMPLETE, THE EXECUTIVE DIRECTOR AND CFO WILL REVIEW.
EITHER A PAPER OR ELECTRONIC COPY WILL BE PRESENTED TO THE FINANCE
COMMITTEE FOR REVIEW AND THEN RELEASED TO THE FULL BOARD.

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

THERE IS A CONFLICT OF INTEREST FORM THAT ALL BOARD MEMBERS SIGN ANNUALLY
THAT SPEAKS TO DISCLOSURE WHEN A CONFLICT OF INTEREST COULD ARISE. IT IS
TYPICALLY SIGNED AT THE BEGINNING OF A NEW FISCAL YEAR AND THE FIRST BOARD
MEETING AFTER.

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

THE BOARD WILL REVIEW AND APPROVE COMPENSATION AND CHANGE IN COMPENSATION
FOR THE EXECUTIVE DIRECTOR/CEO AND THE EXECUTIVE DIRECTOR/CEO WILL
DETERMINE COMPENSATION FOR KEY EMPLOYEES BASED ON REVIEWS AND COMPARABILITY
DATA IN THE MARKETPLACE.

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

THE ORGANIZATION'S FINANCIAL STATEMENTS ARE ALWAYS AVAILABLE TO THE PUBLIC
VIA THE WEBSITE AS WELL AS ANYTIME THEY ARE REQUESTED.

Form 990-T

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

OMB No. 1545-0687

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

2018

Go to www.irs.gov/Form990T for instructions and the latest information.

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

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

Department of the Treasury Internal Revenue Service

A Check box if address changed

Name of organization (Check box if name changed and see instructions.)

COMMUNITY FOOD BANK OF EASTERN OKLAHOMA, INC.

D Employer identification number (Employees' trust, see instructions.)

73-1184980

B Exempt under section

- 501(c)(3) (checked), 408(e), 220(e), 408A, 530(a), 529(a)

Print or Type

Number, street, and room or suite no. If a P.O. box, see instructions.

1304 N KENOSHA AVENUE

E Unrelated business activity code (See instructions.)

900099

City or town, state or province, country, and ZIP or foreign postal code

TULSA, OK 74106

C Book value of all assets at end of year

24,481,936.

F Group exemption number (See instructions.)

G Check organization type (501(c) corporation checked, 501(c) trust, 401(a) trust, Other trust)

H Enter the number of the organization's unrelated trades or businesses. 1. Describe the only (or first) unrelated trade or business here: N/A

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? No (checked)

J The books are in care of THE ORGANIZATION Telephone number (918) 585-2800

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows 1a-13.

Table with 4 columns: Part II Deductions Not Taken Elsewhere, (A) Income, (B) Expenses, (C) Net. Rows 14-32.

COMMUNITY FOOD BANK OF EASTERN
OKLAHOMA, INC.

Form 990-T (2018)

73-1184980

Page 2

Part III Total Unrelated Business Taxable Income

33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	0.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	0.

Part IV Tax Computation

39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.

Part V Tax and Payments

45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	0.
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50a	Payments: A 2017 overpayment credited to 2018	50a	
b	2018 estimated tax payments	50b	
c	Tax deposited with Form 8868	50c	250.
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	50g	
51	Total payments. Add lines 50a through 50g	51	250.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	250.
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	55	250.

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

56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	ASHLEY M. FOGLE	ASHLEY M. FOGLE	02/11/20		P01258800
	Firm's name HOGANTAYLOR LLP	Firm's address 1225 N BROADWAY AVENUE, SUITE 200		Firm's EIN 73-1413977	Phone no. 405-848-2020

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ► **N/A**

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

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ... 0.

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

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A). 0.	Enter here and on page 1, Part I, line 7, column (B). 0.
Total dividends-received deductions included in column 8				0.

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

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
Totals			0.	0.

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

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
Totals		0.		0.

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

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.
Totals		0.	0.			0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

COMMUNITY FOOD BANK OF EASTERN

Form 990-T (2018) OKLAHOMA, INC.

73-1184980

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

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A). 0.	Enter here and on page 1, Part I, line 11, col. (B). 0.				Enter here and on page 1, Part II, line 27. 0.

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

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