PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury

Go to www.irs.gov/Form990 for instructions and the latest information. 2024 A For the 2023 calendar year, or tax year beginning OCT 2023 and ending SEP Check if applicable: C Name of organization D Employer identification number CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF Address change DBA OPEN CUPBOARD Name change 36-3298764 OPEN CUPBOARD Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ termin-ated 651-233-1296 8264 4TH STREET NORTH 17,647,260. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return 55128 OAKDALE, MN H(a) Is this a group return Applica-tion pending F Name and address of principal officer: JESSICA FRANCIS for subordinates? Yes X No SAME AS C ABOVE _ Yes **H(b)** Are all subordinates included? Tax-exempt status: **X** 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.OPENCUPBOARD.ORG H(c) Group exemption number **K** Form of organization: X Corporation Association Other L Year of formation: 1983 M State of legal domicile: MN Trust Part I Summary Briefly describe the organization's mission or most significant activities: TO PROVIDE NUTRITIOUS FOOD TO **Activities & Governance** OUR NEIGHBORS IN A RESPECTFUL MANNER WHILE ENGAGING OUR COMMUNITY IN 2 if the organization discontinued its operations or disposed of more than 25% of its net assets. 10 3 Number of voting members of the governing body (Part VI, line 1a) 3 10 Number of independent voting members of the governing body (Part VI, line 1b) 4 19 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 13,082,953. 17,568,900. Contributions and grants (Part VIII, line 1h) 8 94,229. 57,209. Program service revenue (Part VIII, line 2g) 5.073. 21.151. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 11 13,182,255. 17,647,260 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 563,019. 760,097. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 12,702,539. 16,332,316. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17,092,413. 13,265,558. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -83,303. 554,847. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 1,807,121. 3,254,722 Total assets (Part X, line 16) 148,378. 1,041,476 21 Total liabilities (Part X, line 26) 三年 658,743. 2,213,246 Net assets or fund balances. Subtract line 21 from line 20 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. Date Sign JESSICA FRANCIS, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature MATT PILLSBURY MATT PILLSBURY 04/08/25 self-employed P01565609 Paid Firm's EIN 41-1534805 CARPENTER, EVERT & ASSOCIATES, LTD. Preparer Firm's name

7760 FRANCE AVE S,

May the IRS discuss this return with the preparer shown above? See instructions

BLOOMINGTON, MN 55435

Use Only

Firm's address

Phone no. (952) 831-0085

X Yes

SUITE 940

Pa	art III Statement of Program Service Accomplishr	nents	
	Check if Schedule O contains a response or note to any li	ine in this Part III	<u></u>
1	Briefly describe the organization's mission:		
	OUR MISSION IS TO PROVIDE NUTRIT		
	RESPECTFUL MANNER WHILE ENGAGING	OUR COMMUNITY IN THE FIGHT AGAINS	ST
	HUNGER.		
2	Did the organization undertake any significant program services	during the year which were not listed on the	
	prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on Schedule O.		
3	•	nges in how it conducts, any program services?	Yes X No
•	If "Yes," describe these changes on Schedule O.	igos ir now it contactes, any program convictor.	, 100 (==110
4		or each of its three largest program services, as measured by expe	nege
•		or the amount of grants and allocations to others, the total expens	
	revenue, if any, for each program service reported.	of the amount of grants and anocations to others, the total expens	ies, and
4a	a (Code:) (Expenses \$ 16,902,660 • include	ing grants of \$) (Revenue \$ 5	81,714.)
48	a (Code:) (Expenses \$	WE DISTRIBUTED 6,447,303 POUNDS (
		HOUSEHOLD PRODUCTS TO OUR COMMUNICATION	
		DUAL VISITS TO OUR PROGRAMS DURING	
	FISCAL YEAR.	DUAL VISITS TO OUR PROGRAMS DURING	3 11112
	FISCAL YEAR.		
4b	(Code:) (Expenses \$ include	ing grants of \$) (Revenue \$)
4c	C (Code:) (Expenses \$ include	ing grants of \$) (Revenue \$)
4d	d Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$	
4e	e Total program service expenses 16,902,66		
		F	orm 990 (2023)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
0	Schedule D, Part III	├°		
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?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> X</u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	. <u> </u>		_ _ _
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''		
10		10		х
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		v
00-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_		v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

Part IV Checklist of Required Schedules (continued)

	· (GOTATIAGA)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		100	110
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
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? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		<u> X</u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			3.7
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		v
L	"Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	28c		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25	21	
00	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	 		
-	Schedule N, Part II	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? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			igspace
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		7.7	
	(gambling) winnings to prize winners?	1c	X OOO	(0000)
332004	¥ 12-21-23	Form	330	(2023)

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DBA OPEN CUPBOARD

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

a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from embers or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 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. 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 c Enter the amount of reserves on hand 13c 13b 13c 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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 the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17				ı		Yes	No
b if at least one is reported on line 2a, clid the organization file all required federal amployment tax returns? 2b X b if Yes, has if field a Form 990 T for this year? "No' to line 3b, provide an explanation on Schedule O 3b A A lary time during the calendar year, did the organization have an interest in, or a signiture or other authority, over, a financial account is cruinform or a country (see in the schedule of the special provides an explanation on Schedule O 4a A lary time during the calendar year, did the organization have an interest in, or a signiture or other authority, over, a financial account is cruin or country (see his as bank account, securities account, or enter financial accounts) 5b if Yes, "enter the name of the foreign country (see his as bank account, securities account, or other financial accounts (FBAR). 5c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization aparty to a prohibited tax shelter transaction any contributions or gitts any contributions that twe not tax deductible as charitable contributions? 5c Was the Yes," did the organization include with every solicitation an express statement that such contributions or gitts were not tax deductible? 6c Was the Yes," did the organization microsaction at any time during the year and the organization shelt organization related a propert in exasts of \$5 made party is a contribution and party for profits and services provided to the payor. 7c Was if Yes, "did the organization will we will be exampled to the prome state or the contributions of a contribution of a was property for which it was required to the form 8882? 6c Was a contribution of the washe of the goods or services provided? 7d Was the organization shelt washe and the property of the orga	2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 4b If Yes's Fish titled a Form 1907 for this year? If Yor's fine 3b, provide an explanation on Schedule O 4c 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 toreign country (such as a bank account, securities account, or other financial account)? See instructions for filing requirements for FinCRIN Form 114, Report of Foreign Bank and Financial Accounts (FBAF). 5c Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization party to a prohibited tax shelter transaction? 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles a charable contributions? 6c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles a charable contributions? 6c Was the organization than the annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that the production of the same statement that such contributions or gifts were not tax deductibles a charable contributions? 7c Organizations that may receive deductible contributions under section \$700,0. 8c Was the organization receive a general necessed \$875 make party as contribution or general to the gross and services provided? 7d Uniform than the organization receive a contribution of the value of the goods or services provided? 7d Uniform than the production of the value of the goods or services provided? 7d Uniform than the organization received a contribution of carb. boats, arighted provided than the good of the organization file fro		filed for the calendar year ending with or within the year covered by this return	2 a	19			
b if Yes, "fast if field a Form 990-T for this year? if 'No' to line 3b, provide an explanation on Schedule O			ns?		2b	Х	
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 accounts (FBAR). 5b If "Yes," infer the name of the foreign country. 5ce instructions for Illing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5c If "Yes" to line 5a or 5b, did the organization that it was or is a parry to a prohibited tax shelter transaction? 5c If "Yes" to line 5a or 5b, did the organization that it was or is a parry to a prohibited tax shelter transaction? 5c If "Yes" to line 5a or 5b, did the organization from 8886*7. 6d Dose the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax eductables as charlable contributions? 6d A X 5d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductables a charlable contribution and party for goods and services provided to the payor? 6d If "Yes," did the organization notify the donor of the value of the goods or services provided? 7d Did the organization receive a payment in excess of \$75 made party as a centribution and party for goods and services provided to the payor? 7d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization receive any flunds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization received any flunds, directly or indirectly, to a personal benefit contract? 7e Did the organization received and contribution of cars, boats, sirplanes, or other vehicles, did the organization file a Form 1098-07 8 Sponsoring organization small and distribution of cars, boats, sirplanes, or other vehicles, did the organization file a Form 1098-07 9 Sponsoring organizations maintaining dornar advised funds. Did a dornar advised							<u> </u>
financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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? 5a X 5b Did any taxoble party notify the organization file Form 888617? 6b Des the organization has organization file Form 888617? 6c If "Yes" to line 5a or 5b, did the organization file Form 888617? 6c If "Yes" to line 5a or 5b, did the organization file Form 888617? 6c If "Yes" to line 5a or 5b, did the organization file Form 888617? 6c If "Yes" to line 5a or 5b, did the organization file Form 888617? 6c If "Yes" to line 5a or 5b, did the organization file Form 888617? 6c If "Yes" the file organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7c Did the organization selle, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 8d If "Yes," did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098 C? 8 Sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Section 501(k)(7) organizations. Enter: 1 In the organization lines of the such and the organization make and the surface of the properties of th					3b		
b If "Yes," enter the name of the foreign country see instructions for illing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 58 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 59 Was the organization to a prohibited tax shelter transaction? 50 Was the organization file or prohibited tax shelter transaction? 50 Was the organization that organization that it was or is a party to a prohibited tax shelter transaction? 50 Was the organization that organization the form 8868-17 61 Was to file 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 a charitable contributions? 62 Was the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions which were the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions and partly for goods and services provided to the payor? 65 Was the organization strip the donor of the value of the goods or services provided? 76 Did the organization receive a general in excess of \$37 made party as a contribution and partly for goods and services provided to the payor? 77 Did of the organization received and the organization feel was premiums on a personal benefit contract? 78 Did the organization received and that such that goods or services provided? 79 Did the organization received and that such that goods or services provided? 70 Did the organization received and that such that goods or services provided? 71 Did the organization received and that such that goods or services provided? 72 Did the organization received and that such that goods or services provided? 73 Did the organization received and that such that goods or services provided? 74 Did the organization received and contrib	4a			•			
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that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		tivition	•			
	• •				17		
		If "Yes," complete Form 6069.					

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

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		any other			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the					
				3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 99			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asso			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto					
-	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			1.5		
а	The governing body?	-	•	8a	х	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
•	organization's mailing address? <i>If</i> "Yes," <i>provide the names and addresses on Schedule O</i>			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	/enue	Code)	, •	-	
	(This Section B requests information about policies not required by the internal net	renue	Code./		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such characteristics.			100		
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	р.т.	, aaroo,	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		- ······g ···- ·-····			
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b				12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y					
	on Schedule O how this was done	,		12c	х	
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approval					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,				
а	The organization's CEO, Executive Director, or top management official			15a	Х	
	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	nent w	ith a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi	-	•			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed MN					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	d 990	T (section 501(c)(3)	only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.		. , ,			
	X Own website Another's website X Upon request Other (explain	on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, coi		,	d financ	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	l records			
	JESSICA FRANCIS - 651-233-1296					
	8264 4TH ST N, OAKDALE, MN 55128					

Form **990** (2023)

Form 990 (2023)

DBA OPEN CUPBOARD

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<u> Page</u> **7**

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average		not c		ition _{more}	than o		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	offic				s both r/trus		compensation from	compensation from related	amount of other
	(list any hours for related organizations below	ndividual trustee or director	n stit utio nal tru ste e	JE.	Key employee	Highest compensated employee	er	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
	line)	Indiv	Instit	Officer	Key e	Highe empl	Former			
(1) JESSICA FRANCIS EXECUTIVE DIRECTOR	40.00			Х				144,008.	0.	3,948.
(2) AMY BROWN	5.00									
CHAIR		Х		Х				0.	0.	0.
(3) BILL BURNS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(4) BRIAN WHITEMARSH	2.00									
TREASURER		Х		Х				0.	0.	0.
(5) CHERYL JOGGER	2.00								_	_
SECRETARY		Х		Х				0.	0.	0.
(6) CLAUDIA WILSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) JASON POSEL	2.00									
VICE CHAIR	1 00	Х		Х				0.	0.	0.
(8) MARY WESTBERG	1.00								•	•
BOARD MEMBER	1 00	Х						0.	0.	0.
(9) ROBERT EHREN	1.00	3,7							0	0
BOARD MEMBER	1.00	Х				_		0.	0.	0.
(10) TOM RASMUSSEN BOARD MEMBER	1.00	v						0.	0.	0.
(11) WINNIE WILLIAMS	1.00	Х						0.	0.	U •
BOARD MEMBER	1.00	Х						0.	0.	0.
(12) BILL SCHULTZ	1.00	Λ						0.	0.	0.
BOARD MEMBER	1.00	Х						0.	0.	0.
(13) DENNY FARRELL	1.00							•	•	
BOARD MEMBER	1,00	х						0.	0.	0.
(14) LAURA NICOSIA	1.00									
BOARD MEMBER		Х						0.	0.	0.
(15) RICHARD SITZ	1.00								-	
BOARD MEMBER		Х						0.	0.	0.
(16) EMILY GILBOE	1.00									
BOARD MEMBER		Х						0.	0.	0.

Form 990 (2023)

	Section A. Officers, Directors, Tr (A)	(B)			(C	C)			(D)	(E)		(F)	
	Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable			
		hours per	box	, unles	ss per	son i	s both	an	compensation	compensation	ו ו	amount	of
		week	_	cer an	id a di	recto	r/trus	ee)	from	from related		othe	
		(list any	Individual trustee or director						the	organizations		ompens	
		hours for	or dir	a.			ted		organization	(W-2/1099-MIS	C/	from th	ıe
		related	ste c	ruste			eusa		(W-2/1099-MISC/	1099-NEC)		organiza	
		organizations	altru	nal t		loyee	comp		1099-NEC)			and rela	
		below line)	lividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			'	organizat	ions
		ili le)	n n	l s	#0	Ke	iž, E	혼			+		
	Subtotal								144,008.		0.	3,9	
	Total from continuation sheets to Part								0.		0.	2 0	0
	Total (add lines 1b and 1c)								144,008.		0.	3,9	48
	Total number of individuals (including bur compensation from the organization	t not limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable			
	sompendation from the organization											Yes	No
3	Did the organization list any former offic	er, director, trust	ee, k	кеу е	empl	oye	e, or	hig	hest compensated empl	oyee on			
	line 1a? If "Yes," complete Schedule J fo										🗀	3	X
	For any individual listed on line 1a, is the												
	and related organizations greater than \$1											1	X
5	Did any person listed on line 1a receive of	or accrue comper	ısati	on fr	om a	any	unre	late	ed organization or individ	lual for services			l
	rendered to the organization? <i>If</i> "Yes," co ion B. Independent Contractors	omplete Schedule	e J fo	or su	ıch r	oers	on .					5	X
	Complete this table for your five highest	•	•							•	ensation	from	
	the organization. Report compensation for	or the calendar ye	ear e	endir	ng w	ith c	or wi	:hin		ear.		(0)	
	(A) Name and busine	see addrese							(B) Description of s	ervices	Com	(C) pensation	n
D 12			αш	ם ח				\dashv			COII	iperisatio	
	INER CONSTRUCTION, 12			KE.	E.I.	,		- 1	CONSTRUCTION	RENOVAT	_	110 E	1 0
OT.	TE 1200, MINNEAPOLIS	, MIN 3340							ION			218,5	19
								\dashv					
2	Total number of independent contractors	s (including but n	ot lin	nited	d to t	thos	se lis	ted	above) who received mo	ore than			

Form 990 (2023) DBA OPE
Part VIII Statement of Revenue

			Check if Schedule O cont	ains a r	esponse (or note to any lin	e in this Part VIII			
							(A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
								function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts					1b					
S S			Fundraising events		1c					
fts,			Related organizations		1d					
ij gi						524,506.				
ons,			Government grants (contributions gifts grant		1e	324,300.				
utic		T	All other contributions, gifts, gran			17 044 394				
ĕ			similar amounts not included above		1f	17,044,394.				
ont		•	Noncash contributions included in lines	•	1g \$	15,416,002.	17 560 000			
O g		n	Total. Add lines 1a-1f				17,568,900.			
						Business Code	F. 000	F. 000		
ce	2	а	PROGRAM SERVICE FEES			561000	57,209.	57,209.		
ervi		b								
S		С								
ran Sev		d								
Program Service Revenue		е								
<u>-</u>		f	All other program service reve	nue						
		g	Total. Add lines 2a-2f				57,209.			
	3		Investment income (including	dividen	ıds, intere	st, and				
			other similar amounts)				21,151.			21,151.
	4		Income from investment of tax							
	5		Royalties							
				(i)	Real	(ii) Personal				
	6	а	Gross rents 6a							
			Less: rental expenses 6b							
			Rental income or (loss) 6c							
			Net rental income or (loss)							
			Gross amount from sales of	T	curities	(ii) Other				
		_	assets other than inventory 7a			. ,				
		h	Less: cost or other basis							
ø		~	and sales expenses 7b							
nue		_	Gain or (loss) 7c							
eve			Net gain or (loss)							
her Revenue			Gross income from fundraising ev							
	0	а		-						
Ò										
			contributions reported on line	•	I					
		L_	Part IV, line 18							
			Less: direct expenses							
			Net income or (loss) from fund							
	9	а	Gross income from gaming ac		I					
			Part IV, line 19							
			Less: direct expenses							
			Net income or (loss) from gam							
	10	а	Gross sales of inventory, less		I					
			and allowances							
			Less: cost of goods sold			•				
\rightarrow		С	Net income or (loss) from sale	s of inv	entory					
တ						Business Code				
e e	11	а								
ang		b								
Miscellaneous Revenue		С								
Ais		d	All other revenue							
		е	Total. Add lines 11a-11d							
	12		Total revenue. See instructions				17,647,260.	57,209.	0.	21,151.

Part IX | Statement of Functional Expenses

19,985. 17,731. 751. 1,503.	Pa	rt IX Statement of Functional Expense	es			
Do not include amounts reported on lines 60, 78, 89, 96, and 100 of Part VIII. 1 Grants and other assistance to denestic organizations and other assistance to denestic organizations. It is a series and denestic programments. See Part IV, line 12 (Caratis and other assistance to denestic organizations, foreign governments, and tories assistance to foreign organizations, foreign governments, and tories organizations, foreign governments, and tories organizations, foreign governments, and tories individuals. See Part IV, line 13 fam 16 (Caratis and other assistance to denestic individuals. See Part IV, line 13 (Caratis and other assistance to foreign organizations, foreign governments, and tories individuals. See Part IV, line 15 and 16 (Caratis and tories and the seasons described individuals. See Part IV, line 15 and 16 (Caratis and the seasons described individuals. See Part IV, line 15 and 16 (Caratis and the seasons described individuals. See Part IV, line 17 (Caratis and the seasons described individuals. See Part IV, line 17 (Caratis and the seasons described individuals. See Part IV, line 17 (Caratis and the seasons described individuals. See Part IV, line 17 (Caratis and the seasons described individuals. See Part IV, line 17 (Caratis and the seasons described individuals. See Part IV, line 17 (Caratis and IV) (Caratis a	Secti	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must con	nplete column (A).	
Total expenses		Check if Schedule O contains a respon	se or note to any line in			
and domestic governments. See Part IV, line 21 contracts and other assistance to foreign individuals. See Part IV, line 22 contracts and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16 compensation of current officers, directors, trustees, and to or for members. 5 Compensation of current officers, directors, trustees, and key employees persons (as defined under section 4868(r)1) and persons described in section 498(c)(3)(8) depensors (as defined under section 488(c)(3)(8) depensors (as defined under section 498(c)(3)(8) depensors (as defined under section 498(c)(4)(4) depensors (as defined under section 498(c)(4)(4) depensors (as defined under section 498(c)(4)(4)(4) depensors (as defined under section 498(c)(4)(4) depensors (as defined under section 498(c)(4)(4) depensors (as defined unde			(A) Total expenses	Program service	Management and	Fundraising
2 Grants and other assistance to domestic individuals. See Part IV, line 12 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 13 and 16	1	Grants and other assistance to domestic organizations				
Individuals See Part N, line 12 Grants and other assistance to foreign organizations, foreign governments, and toreign individuals. See Part N, lines 15 and 16 Benefits paid to or for members		and domestic governments. See Part IV, line 21				
3 Grants and other assistance to foreign organizations, foreign programations, 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 147,956. 131,267. 5,563. 11,126. 6 Compensation of current officers, directors, trustees, and key employees control included above to disqualified persons (as defined under section 4958)(1)) and persons described in section 4958(1)(1) and persons described in section 4958(1) and 4958(1)	2	Grants and other assistance to domestic				
organizations, foreign governments, and foreign inclividuals. See Part IV, lines 15 and 16		individuals. See Part IV, line 22				
Individuals See Part N, lines 15 and 16 See Part N, lines 17 See	3	Grants and other assistance to foreign				
4 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as Ediffed under section 4986(f)(1) and persons described in section 4986(f)(1) and 4980(f) employer contributions (include section 401(f)) employer (include 401(f)) and 4980(f) employer contributions (include section 401(f)) employer (include 401(f)) employer						
5 Compensation of current officers, directors, trustees, and key employees (Compensation not included above to disqualified persons (as defined under section 4550(1)) and persons described in section 4950(1)) and across and across and contributions (include section 401(k) and 403(b) employer contributions) and across and contributions (include section 401(k) and 403(b) employer contributions) and across across and across across and across across and across across and across and across across across and across and across across across and across and across across across across across a						
trustees, and key employees						
6 Compensation not included above to disqualified persons (as defined under section 4958(pt(s)(8)) approximately a persons (as defined under section 4958(pt(s)(8)) approximately an acruals and contributions (include section 401(k) and 403(b) employer contributions) and provided section 401(k) and 403(b) employer contributions) and state and stat	5		147 056	121 267	F FC2	11 100
persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(8) 7 Other salaries and wages 8 Pension plan accrusis and contributions (include section 4016) and 40(b) employer contributions) 9 Other employee benefits 10 Payoril taxes 11 Fees for services (nonemployees): 12 Advantagement 13 Legal 14 Accounting 15 Accounting 16 Accounting 17 For services (nonemployees): 18 Amangement 19 Legal 20 Accounting 31 Accounting 32 Accounting 33 Accounting 34 Accounting 35 Accounting 40 Professional fundraising services. See Part IV, line 17 If Investment management fees 9 Other, (I lin In 1 ga mount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 10 Accounting 11 Acquarting and promotion 12 Advertising and promotion 13 Acquarting and promotion 14 Information technology 15 Accounting 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any foderal, state, or local public officials or any foderal, state, or local public officials in line 24e (in line 24e and mount, list line 24e and mount, list line 24e expenses on School.) 16 Conferences, conventions, and meetings 17 Invel 18 Payments to affiliates 19 Payments to affiliates 20 Depreciation, depletion, and amortization 10 Travel 10 Programs and promotion 10 Travel 11 Acquarting and promotion 10 Travel 12 Payments to affiliates 22 Depreciation, depletion, and amortization 10 Travel 24 Other expenses in Imize expenses on Schedule O.) 25 Programs and the programs on line 24e. If line 24e and mount, list line 24e expenses on Schedule O.) 26 FOOD 27 FOOD 28 FROGRAM SUPPLIES AND DE CREATING AND MAINTENANCE 4 All other expenses 4 Interest 17, 092, 413. 16, 902, 660. 72, 926. 116, 827. 28 Joint cests. Complete this line only if the organization reported in column (8) joint costs from a combined educational expenses. Add lines 1 through 24e 28 Joint cests. Complete this line only if the organization reported in column (8) joint costs from a combined e			147,956.	131,26/.	5,563.	11,126.
Persion described in section 4958(c)(3)(8) 509,453. 409,195. 41,737. 58,521.	6					
To Other salaries and wages 509,453. 409,195. 41,737. 58,521.						
8 Pension plan accruals and contributions (include section 401(k) and 403(t) employer contributions) 9 Other employee benefits	_		E00 4E3	400 105	11 727	E0 E01
section 401(k) and 403(b) employer contributions) 10 Payroll taxes 10 Payroll taxes 11 Fees for services (nonemployees): a Management b Legal C Accounting Professional fundraising services. See Part IV, line 17 fin investment management fees Q Other, (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 22 Advertising and promotion 23 Office expenses 24 Ongaties 25 Payments of travel or entertainment expenses for any federal, state, or local public officials 26 Conferences, conventions, and meetings Interest 27 Payments to affiliates 28 Depreciation, depletion, and amortization 28 Insurance 29 Depreciation, depletion, and amortization 26 Insurance 27 Payments to affiliates 28 Office expenses 29 Other expenses 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 26 Insurance 27 Payments to affiliates 28 Office receives. Itemize expenses not schedule 0.) 28 PROGRAM SUPPLIES AND DE 29 CREPAIRS AND MAINTENANCE 29 All other expenses 20 Total fundraising solicitation. 20 Total fundraising solicitation. 20 Total fundraising solicitation. 20 Total fundraising solicitation. 21 Total fundraising solicitation. 22 Total fundraising solicitation. 23 Total fundraising solicitation. 24 Other expenses 25 Total fundraising solicitation. 26 Total fundraising solicitation.			JUJ,433•	4U3,133•	41,/3/•	20,341.
99 Other employee benefits 53,388. 43,611. 3,989. 5,788. 49,300. 40,511. 3,557. 5,232. 11 Fees for services (nonemployees): a Management b Legal	ŏ	•				
Payroll taxes	۵		53 388	43 K11	3 989	5 788
Fees for services (nonemployees): a Management b Legal		*	-	-		5 232
a Management b Legal			43,300.	40,311.	3,337.	3,232.
b Legal						
C Accounting						
d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) Advertising and promotion 78,158. 69,342. 2,939. 5,877. 10 Advertising and promotion 78,158. 69,342. 2,939. 5,877. 110 Advertising and promotion 78,158. 69,342. 2,939. 5,877. 111 Travel 112 Advertising and promotion 113 Office expenses 119,985. 17,731. 751. 1,503. 114 Information technology 115 Royalties 116 Occupancy 117 Travel 118 Payments of travel or entertainment expenses for any federal, state, or local public officials 119 Conferences, conventions, and meetings 110 Insurance 110 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. it line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 115,729,699. 15,729,699. 115,729,699. 15,729,699. 115,729,699. 15,729,699. 115,729,699. 115,729,699. 115,729,699. 115,729,699. 115,718. 113,945. 591. 1,182. 117,092,413. 16,902,660. 72,926. 116,827. 116,827.			57.275.	50.815.	2,153.	4.307.
e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 24 Advertising and promotion 34, 404. 30,523. 1,294. 2,587. 34,158. 69,342. 2,939. 5,877. 19,985. 17,731. 751. 1,503. 19,985. 17,731. 751. 1,503. 19,985. 17,731. 751. 1,503. 49,238. 38,608. 3,543. 7,087. 19,985. 17,731. 751. 1,503. 19,985. 17,731. 751. 1,503. 19,985. 17,731. 751. 1,503. 10,0000000000000000000000000000000000	_		,	, , ,	,	,
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.) Advertising and promotion 78,158. 69,342. 2,939. 5,877. Office expenses 19,985. 17,731. 751. 1,503. Information technology Royalties Occupancy 49,238. 38,608. 3,543. 7,087. Travel Rayments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Conferences, conventions, and amortization Insurance Depreciation, depletion, and amortization Insurance Depreciation, depletion, and amortization Insurance Depreciation, depletion, and mine 24e, If line 24e amount exceeds 10% of line 25c, column (A), amount, list line 24e expenses on Schedule 0.) FOOD PROGRAM SUPPLIES AND DE All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campalign and fundraisings solicitation.		,				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 2 Advertising and promotion 34, 404. 30, 523. 1,294. 2,587. 78,158. 69,342. 2,939. 5,877. 13 Office expenses 19,985. 17,731. 751. 1,503. 11,503. 14 Information technology Royalties Cocupancy 49,238. 38,608. 3,543. 7,087. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest 107,602. 95,464. 4,046. 8,092. 21 Payments to affiliates 22 Depreciation, depletion, and amortization Insurance 107,602. 95,464. 4,046. 8,092. 26,001. 23,068. 978. 1,955. 27 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 47,473. 42,118. 1,785. 3,570. 4 MISCELLANEOUS All other expenses 5 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (8) joint costs from a combined educational campaign and fundraising solicitation.						
Advertising and promotion 78,158. 69,342. 2,939. 5,877. Office expenses 19,985. 17,731. 751. 1,503. Information technology 49,238. 38,608. 3,543. 7,087. Travel 89 Payments of travel or entertainment expenses for any federal, state, or local public officials 10 Conferences, conventions, and meetings 10 Interest 10 Payments to affiliates 10 Experication, depletion, and amortization 107,602. 95,464. 4,046. 8,092. 10 Interest 10 Experication, depletion, and amortization 107,602. 95,464. 4,046. 8,092. 11 Insurance 10 Expenses Itemize expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0. 15,729,699. 15,729,6	g					
19,985. 17,731. 751. 1,503.		· ·	34,404.	30,523.		2,587.
Information technology Royalties A	12	Advertising and promotion				5,877.
Information technology Royalties Cocupancy Travel Repayments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Perceitation, depletion, and amortization Interest Conferences, conventions, and meetings Insurance Conferences, conventions, and setting Insurance Conferences, conventions Insurance Conferences, conventions Ins	13	Office expenses	19,985.	17,731.	751.	1,503.
16 Occupancy 19 238 38 608 3 543 7 7087 17 Travel	14					
Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses, Itemize expenses on time 24e, If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) FOOD FOOD FOORMA SUPPLIES AND DE REPAIRS AND MAINTENANCE MISCELLANEOUS All other expenses. Add lines 1 through 24e Joint costs, Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	15	Royalties				
Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Payments to affi	16	Occupancy	49,238.	38,608.	3,543.	7,087.
for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Office expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) a FOOD b PROGRAM SUPPLIES AND DE c REPAIRS AND MAINTENANCE d MISCELLANEOUS e All other expenses Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	17					
Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) FOOD PROGRAM SUPPLIES AND DE C REPAIRS AND MAINTENANCE d MISCELLANEOUS All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	18	Payments of travel or entertainment expenses				
Payments to affiliates 22 Depreciation, depletion, and amortization 107,602. 95,464. 4,046. 8,092. 23 Insurance 26,001. 23,068. 978. 1,955. 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 15,729,699. 15,729,699.						
Payments to affiliates Depreciation, depletion, and amortization Insurance Depreciation 23,068. Insurance Depreciation 24,001. Insurance Depreciation 25,001. Insur	19					
Depreciation, depletion, and amortization Insurance Insu	20					
23 Insurance 26,001. 23,068. 978. 1,955.	21		107 602	05 464	1 016	0 000
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) a FOOD b PROGRAM SUPPLIES AND DE c REPAIRS AND MAINTENANCE d MISCELLANEOUS e All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	22					
above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) a FOOD b PROGRAM SUPPLIES AND DE c REPAIRS AND MAINTENANCE d MISCELLANEOUS e All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	23		20,001.	43,000.	310.	1,300.
amount, list line 24e expenses on Schedule 0.) b PROGRAM SUPPLIES AND DE c REPAIRS AND MAINTENANCE d MISCELLANEOUS e All other expenses Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	24	above. (List miscellaneous expenses on line 24e. If				
Total functional expenses Add lines 1 through 24e		line 24e amount exceeds 10% of line 25, column (A),				
PROGRAM SUPPLIES AND DE 166,763. 166,763.	9	, , ,	15.729.699.	15.729.699.		
REPAIRS AND MAINTENANCE d MISCELLANEOUS e All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						
MISCELLANEOUS e All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.					1,785.	3,570.
All other expenses Total functional expenses. Add lines 1 through 24e 17,092,413. 16,902,660. 72,926. 116,827. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						1,182.
Total functional expenses. Add lines 1 through 24e 17,092,413. 16,902,660. 72,926. 116,827. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.			,	,		,
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	25		17,092,413.	16,902,660.	72,926.	116,827.
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	26					
educational campaign and fundraising solicitation.						
		educational campaign and fundraising solicitation.				
		Check here if following SOP 98-2 (ASC 958-720)				Farma 990 (0000)

Form **990** (2023)

Form 990 (2023) Part X Balance Sheet

art X	Balance Sneet					
	Check if Schedule O contains a response or note	to any	line in this Part X			
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			45,328.	1	7,016
2	Savings and temporary cash investments			5,865.	2	82,096
3	Pledges and grants receivable, net				3	
4	Accounts receivable, net			22,309.	4	227,159
5	Loans and other receivables from any current or					
	trustee, key employee, creator or founder, subst	antial co	ontributor, or 35%			
	controlled entity or family member of any of thes	e perso	ns		5	
6	Loans and other receivables from other disqualif	ied pers	sons (as defined			
	under section 4958(f)(1)), and persons described	in sect	ion 4958(c)(3)(B)		6	
2 7	Notes and loans receivable, net		7			
8	Inventories for sale or use			55,500.	8	108,958
έ 9				31,520.	9	18,49
10	Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D	10a	2,385,054.			
1	Less: accumulated depreciation		520,371.	1,213,637.	10c	1,864,68
11	Investments - publicly traded securities				11	
12	Investments - other securities. See Part IV, line 1	1		361,503.	12	274,38
13	Investments - program-related. See Part IV, line 1	1			13	
14	Intangible assets		11,250.	14	8,25	
15	Other assets. See Part IV, line 11		60,209.	15	663,68	
16	Total assets. Add lines 1 through 15 (must equa	al line 33	3)	1,807,121.	16	3,254,72
17	Accounts payable and accrued expenses		88,169.	17	377,79	
18	Grants payable		18			
19	Deferred revenue		19			
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete F	Part IV c	of Schedule D		21	
22	Loans and other payables to any current or form	er office	er, director,			
	trustee, key employee, creator or founder, subst	antial co	ontributor, or 35%			
22	controlled entity or family member of any of thes	ns		22		
23	Secured mortgages and notes payable to unrela	ted third	d parties		23	
24	Unsecured notes and loans payable to unrelated	third p	arties		24	
25	Other liabilities (including federal income tax, pay	/ables t	o related third			
	parties, and other liabilities not included on lines	17-24).	Complete Part X			
	of Schedule D			60,209.	25	663,680
26	Total liabilities. Add lines 17 through 25			148,378.	26	1,041,47
.	Organizations that follow FASB ASC 958, che	ck here	X			
	and complete lines 27, 28, 32, and 33.			4 550 050		4 040 50
27			·····	1,553,959.	27	1,813,79
28	Net assets with donor restrictions			104,784.	28	399,45
	Organizations that do not follow FASB ASC 99	58, che	ck here			
	and complete lines 29 through 33.					
29	Capital stock or trust principal, or current funds				29	
30	Paid-in or capital surplus, or land, building, or eq				30	
27 28 29 30 31 32	Retained earnings, endowment, accumulated in			1 (50 540	31	0.010.01
_	Total net assets or fund balances		<u> </u>	1,658,743.	32	2,213,240
33	Total liabilities and net assets/fund balances			1,807,121.	33	3,254,722

Form **990** (2023)

Form 990 (2023)

36-3298764 Page **12**

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	17,			
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,			
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>47.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,	<u>658</u>		<u>43.</u>
5	Net unrealized gains (losses) on investments	5			-34	44.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	2,	213	, 24	46.
Pa	rt 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: Cash X Accrual Other		_ [
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	Х	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				ı
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					ı
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	х	
	`		F	orm §	990 ((2023)

332012 12-21-23

SCHEDULE A

(Form 990)

Total

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

Open to Public Inspection

CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF **Employer identification number** Name of the organization DBA OPEN CUPBOARD 36-3298764 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Schedule A (Form 990) 2023

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

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

Sec	tion A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	1227593.	6189066.	7352502.	13082953.	17568900.	45421014.				
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
	furnished by a governmental unit to										
	the organization without charge										
4	Total. Add lines 1 through 3	1227593.	6189066.	7352502.	13082953.	17568900.	45421014.				
	The portion of total contributions										
Ū	by each person (other than a										
	governmental unit or publicly										
	supported organization) included										
	on line 1 that exceeds 2% of the										
	amount shown on line 11,										
	column (f)										
6	**						45421014.				
	Public support. Subtract line 5 from line 4.						H7421014.				
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(a) 2021	(4) 2022	(a) 2023	(f) Total				
	Amounts from line 4	1227593.	(b) 2020 6189066.	(c) 2021 7352502	(d) 2022 13082953.	(e) 2023 17568900	(f) Total				
	***************************************	122/333	0100000	73323024	13002333.	173003001	13121011.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,	160	61.	205	F 072	01 151	26 750				
	and income from similar sources	160.	01.	305.	5,073.	21,151.	26,750.				
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.)						45445564				
	Total support. Add lines 7 through 10					i i	45447764.				
	Gross receipts from related activities,					12	676,169.				
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	year as a section 5	01(c)(3)					
_	organization, check this box and stor	here									
	tion C. Computation of Publi					Г	00.04				
14	Public support percentage for 2023 (I	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	99.94 %				
	Public support percentage from 2022					15	99.98 %				
16a	33 1/3% support test - 2023. If the o			line 13, and line	14 is 33 1/3% or m	ore, check this bo					
	stop here. The organization qualifies		•								
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box				
	and stop here. The organization qual										
17a	10% -facts-and-circumstances test	- 2023. If the orga	anization did not c	heck a box on line	e 13, 16a, or 16b, a	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 te	st. The organizatio	n qualifies as a pul	blicly supported o	rganization						
b	b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or										
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the										
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	zation					
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	3				

Schedule A (Form 990) 2023

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.)

Se	ction A. Public Support	elow, please comp	Diete Fait II.)				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(1)	(12)	(2) = = 1	(-7	(5) = 5 = 5	χ,
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 organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	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						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(-, : -	(-,	(-)	(-,	(-,	(-,
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975					+	
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>		1	1	<u> </u>
14	First 5 years. If the Form 990 is for the	· ·		•	•	. , . ,	· —
<u>-</u>	check this box and stop here	a Cummant Da					
	ction C. Computation of Publi					T .= T	
	Public support percentage for 2023 (I	, ,,,	•	column (f))		15	<u>%</u>
	Public support percentage from 2022 ction D. Computation of Inves					16	%
	•			ing 10 galuma (f)		17	0/
	Investment income percentage for 20					17	%
	Investment income percentage from						7 is not
198	a 33 1/3% support tests - 2023. If the					- 4.5	
k	more than 33 1/3%, check this box as 33 1/3% support tests - 2022. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	nd
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	1 7

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36-3298764 Page 4

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
•		
2		
3a		
- Gu		
3b		
3c		
4a		
4b		
4c		
5a		
- 5.0		
5b		
5c		
6		
7		
8		
9a		
Oh		
9b		
9с		
10a		
104		
10b		
ule A (Fori	n 990)	2023

332024 12-21-23

1 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11b blow, the governing body of a supported organization? b A family member of a person described on line 11a above? c A 35% controlled entity of a person described on line 11a above? c A 35% controlled entity of a person described on line 11b above? b A family member of a person described on line 11a above? c A 35% controlled entity of a person described on line 11a blowe? b A family member of a person described on line 11b above? 1 Did the governing body, members of the governing body, efficiers acting in their official capacity, or membership of one or more supported organization above the power to regulatly appoint or elect at least a majority of the organization is officers, directors, or rustees set all times during the tax apported organization and have the power to appoint and/or remove officers, directors, or trustees were discread among the supported organizations and what confidence or estimations activities, if the organization had once than one supported organizations and what confidence or estimations are described to the supported organization or estimations are described to appropriate organization and the confidence or estimations are supported organizations and that confidence or estimations are supported organizations and the confidence or confidence or estimations are supported organizations and the supported organizations are supported organizations. 1 Were a majority of the organization is directors or trustees during the tax year also a majority of the directors or trustees during the tax year also a majority of the directors or trustees during the properties of the organization and the urganizations and properties organizations. 1 Were a majority of the organization is directors or trustees during the tax year also a majority of the directors or trustees of the directors or trus	Par	t IV Supporting Organizations _(continued)			
a A person who directly or indirectly controls, either abone or together with persons described on lines 11b and 11b below, the governing body of a supported organization? A 35% controlled entity of a person described on line 11a above? A 35% controlled entity of a person described on line 11a above? A 35% controlled entity of a person described on line 11a above? Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations of organization share the power to regularly appoint or elect at least a majority of the organization of organization, describe how the powers to appoint and/or remove officers, directively operated organization, describe how the movems to appoint and/or remove officers, directively operated, supervised, or controlled the supported organization other than the supported organization operated to the benefit of any supported organization other than the supported organization operated to the benefit of any supported organization other than the supported organization operated, supervised, or controlled the supported organization other than the supported organization operated to the benefit of any supported organization other than the supported organization operated organization operated by the supported organization of the supporting organization. Section C. Type II Supporting Organizations Were a majority of the organization's supported organizations, by the last day of the fifth month of the organization provide to appropriate provided programization and pre				Yes	No
1 Lebelow, the governing body of a supported organization? A A family member of a person described on line 11 a above? A 39% controlled entity of a person described on line 11 a or 11 b above? If "Yes" to line 11a, 11b, or 11c, provide Section B: Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or each at least a majority of the organization is understood to provide the organizations and supported organizations and what conditions or restrictions. If the organization had more than the supported organizations of the complex provided organization and what conditions or restrictions. If the organization of the than the supported organization organization and what conditions or restrictions. If the organization of the than the supported organization organiza	11	Has the organization accepted a gift or contribution from any of the following persons?			
b. A a S9% controlled entity of a person described on line 11a above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described by the remains of the powering body, members of the operation of the line	а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
b. A a S9% controlled entity of a person described on line 11a above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described by the remains of the powering body, members of the operation of the line		11c below, the governing body of a supported organization?	11a		
e. A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization sofficers, affectively operated, supported, or controlled the organization. Section B. Type II supported organization organization, applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization organization, and accorditions or resistations, and applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization organization or the year. 2 Did the organization operate for the benefit of any supported organization o			11b		
Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of officers, directors, or trustees at all times during the tax year? If "No," describe in PRT VI Now the supported organizations of escribed and organization of secribed the powers to appoint and/or renove officers, directors, or trustees were all closected among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year and the supported organization operated for the benefit of any supported organization of the supported organization of the powers to appoint and/or renove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2		·			
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization so officers, effectively operated, upenited, or controlled the power to regularly appoint or elect at least a majority of the organization officers, effectively operated, upenited, or controlled the power to regularly appoint or elect at least a majority of the organization officers, effectively operated, upenited, or controlled the power to appoint and/or remove officers, directors, or furches were afficiated among the supported organization (describe how the powers to appoint and/or remove officers, directors, or furches were afficiated among the supported organization (describe how the powers to appoint and/or remove officers, directors, or furches were afficiated among the supported organization (describe how the powers to appoint and/or entirely organization). 2 bid the organization penited for the benefit of any supported organization (progenization). 3 by real Number of the supporting Organizations. 4 Were a majority of the organization's directors or furstees during the tax year also a majority of the directors or furstees of each of the organization is directors or furstees during the tax year also a majority of the directors or furstees of each of the organization was vested in the same persons that controlled or managed for unsubjected organization was vested in the same persons that controlled or managed for supporting Organization was vested in the same persons that controlled or managed for supporting organization was vested in the same persons that controlled or managed for supporting organization subject organizations and 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 organizations is officers, directors, or trustees either (ii) appointed or elected			110		
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Section E. Type III Functionally Integrated Supporting Organizations 1					
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a	Sect	tion E. Type III Functionally Integrated Supporting Organizations			
a	1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions).		
b					
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b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			3a		
		, ,			
of its supported organizations: If yes, describe in Fart vi the role played by the organization in this regard.		of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	nizations							
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in I	Part VI). See instructions.						
	All other Type III non-functionally integrated supporting organizations must	complete	Sections A through E.							
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)						
_1	Net short-term capital gain	1								
2	Recoveries of prior-year distributions	2								
3	Other gross income (see instructions)	3								
_4	Add lines 1 through 3.	4								
_5	Depreciation and depletion	5								
6	Portion of operating expenses paid or incurred for production or									
	collection of gross income or for management, conservation, or									
	maintenance of property held for production of income (see instructions)	6								
_7	Other expenses (see instructions)	7								
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8								
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)						
1	Aggregate fair market value of all non-exempt-use assets (see									
	instructions for short tax year or assets held for part of year):									
a	Average monthly value of securities	1a								
b	Average monthly cash balances	1b								
c	Fair market value of other non-exempt-use assets	1c								
d	Total (add lines 1a, 1b, and 1c)	1d								
е	Discount claimed for blockage or other factors									
	(explain in detail in Part VI):									
_2	Acquisition indebtedness applicable to non-exempt-use assets	2								
3	Subtract line 2 from line 1d.	3								
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,									
	see instructions).	4								
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5								
6	Multiply line 5 by 0.035.	6								
7	Recoveries of prior-year distributions	7								
8	Minimum Asset Amount (add line 7 to line 6)	8								
Sect	ion C - Distributable Amount			Current Year						
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1								
2	Enter 0.85 of line 1.	2								
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3								
4	Enter greater of line 2 or line 3.	4								
_5	Income tax imposed in prior year	5								
6	Distributable Amount. Subtract line 5 from line 4, unless subject to									
	emergency temporary reduction (see instructions).	6								
7	Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see									

Schedule A (Form 990) 2023

instructions).

36-3298764 Page 7 DBA OPEN CUPBOARD Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 6 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2023 from Section C, line 6 10 10 Line 8 amount divided by line 9 amount (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2023 **a** From 2018 **b** From 2019 **c** From 2020 **d** From 2021 e From 2022 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2023 distributable amount

Schedule A (Form 990) 2023

i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.

4 Distributions for 2023 from Section D,

Part VI. See instructions.

a Applied to underdistributions of prior years **b** Applied to 2023 distributable amount

c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater

than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2024. Add lines 3j

line 7:

and 4c. 8 Breakdown of line 7: a Excess from 2019 **b** Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

Schedule A (Form 990) 2023

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF DBA OPEN CUPBOARD

Employer identification number

36-3298764

Organization type (check one):									
Filers of		Section:							
Form 990	or 990-EZ	X 501(c)(3) (enter number) organization							
		4947(a)(1) nonexempt charitable trust not treated as a private foundation							
		527 political organization							
Form 990)-PF	501(c)(3) exempt private foundation							
		4947(a)(1) nonexempt charitable trust treated as a private foundation							
		501(c)(3) taxable private foundation							
Note: Or	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.							
General	Rule								
	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.							
Special I	Rules								
	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.							
	contributor, during literary, or educatio	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering 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\$									
answer "	No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).							

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

Schedule B (Form 990) (2023)

Name of organization
CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF
DBA OPEN CUPBOARD

Employer identification number

36-3298764

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 11,424,252.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Nume, addition, and En 1 1	\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization
CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF
DBA OPEN CUPBOARD
36-3298764

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I FOOD 2 11,424,252. (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part I (a) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I

Schedule B (Form 990) (2023) Page 4 Name of organization **Employer identification number** CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF 36-3298764 DBA OPEN CUPBOARD 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF DBA OPEN CUPBOARD

Employer identification number 36-3298764

Pa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ar Funds or Ad	Counts. Complete if the
		(a) Donor advised fund	ds	(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 w	riting that the assets held in c	donor advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			Yes No
Pai				
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreat		servation of a histo	orically important land area
	Protection of natural habitat	· —		ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualification	ed conservation contribution i	n the form of a co	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а				2a
b	-			2b
c	Number of conservation easements on a certified historic stru			2c
	Number of conservation easements included on line 2c acquir	•••		
-	on a historic structure listed in the National Register	• • • •		2d
3	Number of conservation easements modified, transferred, rele			
Ü	year	asca, extinguished, or termin	ated by the organi	zation during the tax
4	Number of states where property subject to conservation ease	ament is located		
5	Does the organization have a written policy regarding the peri		andling of	
3	violations, and enforcement of the conservation easements it	• • • • • • • • • • • • • • • • • • • •	•	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
Ū	etan and volunteen neare develous to membering, mepeeting, r	ianamig of violations, and only	oromig comportation	on eacomonic daring the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing	a conservation ea	sements during the year
-	, under the expenses meaned in monitoring, indposting, marian	ing of violations, and officions	g concervation ca	comente dannig the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of se	ction 170(h)(4)(B)(i)
_	and section 170(h)(4)(B)(ii)?			· — —
9	In Part XIII, describe how the organization reports conservatio			
·	balance sheet, and include, if applicable, the text of the footnote		•	
	organization's accounting for conservation easements.	oto to the organization o infant		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasur	es, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form		•	
1a	If the organization elected, as permitted under FASB ASC 958		statement and hala	ance sheet works
	of art, historical treasures, or other similar assets held for public	, .		
	service, provide in Part XIII the text of the footnote to its finance			ice of public
b	If the organization elected, as permitted under FASB ASC 958			sheet works of
-	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items.	exhibition, education, or resea		or public service,
				¢
	(i) Revenue included on Form 990, Part VIII, line 1			
2	If the organization received or held works of art, historical trea	curse or other similar assets		
2				provide
_	the following amounts required to be reported under FASB AS			c
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instructions	IUI FUIIII 99U.		Schedule D (Form 990) 2023

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Schedule D (Form 990) 2023 DBA OPEN CUPBOARD

36-3298764 Page 2

Pai	t III Or	ganizations Maintaining C	ollections of Art	, Historical Tre	asures, or Otl	ner Si	milar Ass	sets (conti	nued)	
3		organization's acquisition, accession								
	collection	items (check all that apply).		•	· ·	Ū				
а	Pub	lic exhibition	d	Loan or excl	nange program					
b	Sch	olarly research	е		.					
С	Pres	servation for future generations								
4		description of the organization's co	ollections and explain	how they further th	e organization's e	xempt	purpose in I	Part XIII.		
5		year, did the organization solicit o	•	•	-	-				
	ū	to raise funds rather than to be ma		•	*			Yes		No
Pai		crow and Custodial Arrang								
		orted an amount on Form 990, Par		3			,	,		
	Is the orga	anization an agent, trustee, custodi	an, or other intermed	iary for contribution	s or other assets	not incl	uded			
	J	90, Part X?	•	•				Yes		No
b		xplain the arrangement in Part XIII								
	,	3	, i	3				Amour	nt	
С	Beginning	balance		1c						
d		during the year				- 1	1d			
е		ns during the year					1e			
f		lance					1f			
		ganization include an amount on Fo						Yes		No
		xplain the arrangement in Part XIII.				-		. —		Ī
_		dowment Funds Complete if								
			(a) Current year	(b) Prior year	(c) Two years bac		Three years b	ack (e) Fou	ır years	back
1a	Beginning	of year balance	8,873.	7,835.	10,35	3.				
b		ons	·				10,0	00.		
c		ment earnings, gains, and losses	2,169.	1,038.	-2,51	8.		53.		
q		scholarships	,	· · · · · · · · · · · · · · · · · · ·	,					
e		enditures for facilities								
·	and progra									
f		ams ative expenses								
g			11,042.	8,873.	7,83	5.	10,3	53.		
2	•	ar balance	· · · · ·	· · · · · · · · · · · · · · · · · · ·	,					
a		ignated or quasi-endowment	•	%	, ricia ao.					
b		t endowment	%							
C	Term endo									
·		ntages on lines 2a, 2b, and 2c sho	, -							
За	•	endowment funds not in the posses	•	tion that are held an	d administered fo	r the				
-	organizatio		oolon or the organizat	non that are note an	a daminiotoroa io				Yes	No
	ū	ated organizations?						3a(i)	Х	
										X
h	. ,	n line 3a(ii), are the related organiza								
4		n Part XIII the intended uses of the								
		nd, Buildings, and Equipm		vinorit idrido.						
		mplete if the organization answered		. Part IV. line 11a. S	ee Form 990. Parl	X. line	10.			
		Description of property	(a) Cost or ot		T T	-	mulated	(d) Boo	nk valu	
		bescription of property	basis (investm		1 '	depred		(4) 500	on valu	C
10	Land		<u> </u>	-, 54510						
b				1 05	3,158.	17	3,888.	87	9,2	70.
C		improvements			5,488.		0,217.		5,2	
d		tt			6,408.		6,266.		0,1	
				- 12	-,	30	<u> </u>		J , _	
		1a through 1e. (Column (d) must o	•	/ line 10e eel::::::	(D))			1.86	4 6	83.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 DBA OPEN CUI	PBOARD	36	-3298764 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) CDS	263,342.	COST	
(B) BOARD DESIGNATED	11,042.	COST	
(C)	·		
(D)			
(E)			
(F)			
(G)			
(H)			
	274,384.		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.	2/4,304•		
Complete if the organization answered "Yes" of	on Form 990 Part IV line 1	1c See Form 990 Part Y line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-vear market value
· · · · · · · · · · · · · · · · · · ·	(b) book value	(c) Method of Valuation. Cost of en	d-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"		1d. See Form 990, Part X, line 15.	T
	Description		(b) Book value
(1) RIGHT OF USE ASSET			663,680.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col	. (B))		663,680.
Part X Other Liabilities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) LEASE LIABILITIES			663,680.
(3)			232,3300
<u>(4)</u>			
<u>(6)</u>			
(7)			
(8)			
(9)			663,680.
Total. (Column (b) must equal Form 990. Part X. line 25. col	. (B))		1 000,000.

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

		CHR	ISTIAN CUPBOARD	EMERGENCY	FOOL	SHELF			
Sche	edule D	(Form 990) 2023 DBA	OPEN CUPBOARD				36-	3298764	Page 4
Pa	rt XI	Reconciliation of Reve	nue per Audited Financ	ial Statements	With F	Revenue per Re	turn		
		Complete if the organization a	nswered "Yes" on Form 990, F	Part IV, line 12a.					
1	Total	revenue, gains, and other suppo	ort per audited financial statem	nents			1	17,691	<u>,916.</u>
2	Amou	nts included on line 1 but not o	n Form 990, Part VIII, line 12:						
а	Net ur	nrealized gains (losses) on inves	tments		2a	-344.			
b	Donat	ed services and use of facilities			2b	45,000.			
С	Recov	veries of prior year grants			2c				
d	Other	(Describe in Part XIII.)			2d				
е							2e		<u>,656.</u>
3	Subtra	act line 2e from line 1					3	17,647	<u>,260.</u>
4		nts included on Form 990, Part	, ,						
а	Invest	ment expenses not included on	Form 990, Part VIII, line 7b		4a				
b	Other	(Describe in Part XIII.)			4b				
С	Add li	nes 4a and 4b					4c		0.
5	Total	revenue. Add lines 3 and 4c. (T)	his must equal Form 990. Part	I, line 12.)			5	17,647	<u>,260.</u>
Ра	rt XII	Reconciliation of Exper	•		s with	Expenses per F	eturi	n	
		Complete if the organization a						10 100	410
1		expenses and losses per audite					1	17,137	<u>,413.</u>
2		nts included on line 1 but not o	, ,	1	1	45 000			
а		ed services and use of facilities			2a	45,000.			
b		ear adjustments			2b				
С					2c				
d		(Describe in Part XIII.)		L	2d			4 =	000
е		•					2e		,000.
3		act line 2e from line 1					3	17,092	<u>,413.</u>
4		nts included on Form 990, Part	· ·	1	1				
а		ment expenses not included on	Form 990, Part VIII, line 7b		4a				
b	Other	(Describe in Part XIII.)		L	4b				•
С							4c	45 000	0.
5		expenses. Add lines 3 and 4c.		<u>† I, line 18.)</u>			5	17,092	<u>,413.</u>
		Supplemental Informat							
		descriptions required for Part II,					; Part)	الكران الكرا	ΧI,
linge	2d and	Ahr and Part XII lines 2d and A	h Also complete this part to r	rovide any addition	al inform	ation			

PART X, LINE 2:

THE ORGANIZATION HAS A TAX-EXEMPT STATUS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND HAS ADOPTED ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, ASC 740-10. THE ORGANIZATION'S POLICY IS TO EVALUATE UNCERTAIN TAX POSITIONS, AT LEAST ANNUALLY, FOR THE POTENTIAL FOR INCOME TAX EXPOSURE FROM UNRELATED BUSINESS INCOME OR FROM LOSS OF NONPROFIT STATUS. THE ORGANIZATION CONTINUES TO OPERATE CONSISTENT WITH ITS ORIGINAL EXEMPTION APPLICATION AND EACH YEAR TAKES THE NECESSARY ACTIONS TO MAINTAIN ITS EXEMPT STATUS. IT HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER THE INTERNAL REVENUE CODE AND CHARITABLE CONTRIBUTIONS BY DONORS ARE TAX DEDUCTIBLE. IN COMPLIANCE WITH ITS EXEMPT STATUS, THE ORGANIZATION ANNUALLY FILES A RETURN OF ORGANIZATION EXEMPT

Schedule D (Form 990) 2023

CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF

Schedule	D (Form 990)	2023	D:	BA (OPEN	CUPBO	DARD			36-	32987	764	Page 5
Part X	D (Form 990) Supple	menta	l Informa	tion (continuec	d)							
FROM	INCOME	TAX	(FORM	990).								
								 					_
													-

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF Name of the organization DBA OPEN CUPBOARD

Employer identification number 36-3298764

Par	rt I Types of Property						
		(a)	(b)	(c)	(d)		
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of det noncash contribut	•	t o
		арріісаріе		Form 990, Part VIII, line 1g	Horicasii continbu	lion amoun	เอ
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods	X		14,052.			
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			15 404 050	44 50		
19	Food inventory	X		15,401,950.	\$1.79 PER PO	עמטכ_	
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ()						
26 27	Other ()						
28	Other () Other ()						
29	Number of Forms 8283 received by the organiz	ration during	the tay year for co	ontributions	Į.		
	for which the organization completed Form 828	-	•				
	To Whom the organization completed from each	,,, a,, ,, ,	onee menine wie ag	<u></u>		Yes	No
30a	During the year, did the organization receive by	contributio	n anv property rep	orted in Part I. lines 1 throug	h 28. that it	122	
	must hold for at least 3 years from the date of t						
	exempt purposes for the entire holding period?				i i	30a	Х
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	olicy that re	equires the review of	of any nonstandard contribut	ions?	31	Х
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash			
	contributions?					32a	X
b	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of property	for which column (a) is chec	ked,		
	describe in Part II.						

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

Schedule M (Form 990) 2023

CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF

Schedule M	(Form 990) 2023	DBA OPEN	CUPBOARD	36-3298764	Page 2
Part II	Supplementa	I Information	Provide the information required by Part I, lines 30b, 3 number of contributions, the number of items received	32h and 33 and whother the organizar	tion
	is reporting in Par	rt I column (h) the	number of contributions the number of items received	d or a combination of both. Also comm	lloi i
	this part for any a	dditional informati	on	a, or a combination of both. Also comp	nete
	tilis part for arry a	luditional informati	011.		

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

CHRISTIAN CUPBOARD EMERGENCY FOOD SHELF DBA OPEN CUPBOARD

Employer identification number 36-3298764

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE FIGHT AGAINST HUNGER.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 WILL BE PRESENTED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW
PRIOR TO THE BOARD MEETING, WITH A REVIEW AND DISCUSSION PRIOR TO
SUBMITTING THE FORM 990.
FORM 990, PART VI, SECTION B, LINE 12C:
ALL BOARD MEMBERS SIGN AN ANNUAL STATEMENT CONFIRMING THERE ARE NO
CONFLICTS OF INTEREST. IF ANY MATTERS ARISE THROUGHOUT THE YEAR THAT MAY
BRING ABOUT A CONFLICT OF INTEREST IT IS DISCLOSED IN BOARD MINUTES AND THE
INTERESTED PARTY REFRAINS FROM VOTING ON THAT PARTICULAR MATTER.
FORM 990, PART VI, SECTION B, LINE 15A:
THE COMPENSATION FOR THE EXECUTIVE DIRECTOR IS DETERMINED AND EVALUATED
ANNUALLY BASED ON THE COMBINATION OF A PERFORMANCE REVIEW AND A COMPARABLE
DATA ANALYSIS USING THE MN COUNCIL OF NONPROFITS SALARY GUIDE.
FORM 990, PART VI, SECTION C, LINE 19:
THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON
REQUEST. FINANCIALS STATEMENTS ARE POSTED ON THE WEBSITE.

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

Schedule O (Form 990) 2023