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CLIENT'S COPY

OPERATION FOOD SEARCH, INC.

Enclosed is the organization's 2023 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-TE to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-TE to us by February 18, 2025.

Form 88	379-TE		IRS E-file Signature for a Tax Exen	e Authorization npt Entity		OMB No. 1545-0047
		For calendar year	2023, or fiscal year beginning OCT 1	, 2023, and ending SEP 30	, 20 2 4	2022
Department	of the Treasury		Do not send to the IRS. Ke			2023
	enue Service		Go to www.irs.gov/Form8879TE	for the latest information.		
Name of f	iler				EIN or SS	
	OPERAT	ION FOOD	SEARCH, INC.		43-1	.241854
Name and	title of officer or pe	rson subject to tax				
			PRESIDENT & CEO			
Part I	Type of	Return and F	Return Information			
Form 533 or 10a b whicheve	30 filers may ente elow, and the amo	r dollars and cen ount on that line	are using this Form 8879-TE and ente ts. For all other forms, enter whole do for the return being filed with this form r -0-). But, if you entered -0- on the retu	llars only. If you check the box on was blank, then leave line 1b ,	on line 1a, 2 a , 2b, 3b, 4b, 5	a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, b, 6b, 7b, 8b, 9b, or 10b,
	Form 990 check h	nere X	b Total revenue, if any (Form 99	90. Part VIII. column (A). line 12)	1b38,755,325.
	Form 990-EZ che		b Total revenue, if any (Form 99			
	Form 1120-POL		b Total tax (Form 1120-POL, lin			
	Form 990-PF che		b Tax based on investment inc			
	Form 8868 check		b Balance due (Form 8868, line			
6a I	Form 990-T chec	k here	b Total tax (Form 990-T, Part III			
	orm 4720 check		b Total tax (Form 4720, Part III,			
	Form 5227 check		b FMV of assets at end of tax			
	Form 5330 check		b Tax due (Form 5330, Part II, I			
	Form 8038-CP ch		b Amount of credit payment re			
Part I			ature Authorization of Office	r or Person Subject to 1	Tax 🛛	
complete intermed acknowle of any re entry to f financial later than payment personal	ctronic return and a. I further declare iate service provid edgement of recei- fund. If applicable the financial institu- institution to debi- 2 business days of taxes to receiv- identification num- ck one box only I authorize <u>SF</u> as my signature with a state age on the return's c As an officer or	that the amounder, transmitter, ipt or reason for a, I authorize the ution account indition account indition account indition account indition the entry to this prior to the payse confidential in inber (PIN) as my W PARTNE on the tax year ancy(ies) regulating tisclosure conselections of the prior to the payse of the tax year ancy (is a conselection of the tax year ancy (is a conselection) regulation account the tax year ancy (is a conselection) regulation account the tax year ancy (is a conselection) regulation account the tax year ancy (is a conselection) regulation account the tax year ancy (is a conselection) regulation account the tax year and the tax year ancy (is a conselection) regulation account the tax year and tax an	schedules and statements, and, to the t in Part I above is the amount shown of or electronic return originator (ERO) to rejection of the transmission, (b) the r U.S. Treasury and its designated Final dicated in the tax preparation software s account. To revoke a payment, I mus ment (settlement) date. I also authorize formation necessary to answer inquirie signature for the electronic return and RS, LLC ERO firm name 2023 electronically filed return. If I have in screen. b tax with respect to the entity, I will en	on the copy of the electronic re send the return to the IRS and reason for any delay in processi ncial Agent to initiate an electro of or payment of the federal taxe st contact the U.S. Treasury Fin e the financial institutions involv es and resolve issues related to d, if applicable, the consent to e e indicated within this return that the program, I also authorize the nter my PIN as my signature on	ief, they are tr turn. I consen to receive fro ng the return onic funds with so owed on th hancial Agent a red in the proc the payment. lectronic fund to enter my at a copy of th aforemention the tax year 2	ue, correct, and t to allow my m the IRS (a) an or refund, and (c) the date ndrawal (direct debit) is return, and the at 1-888-353-4537 no sessing of the electronic I have selected a is withdrawal. PIN <u>63131</u> Enter five numbers, but do not enter all zeros ne return is being filed ed ERO to enter my PIN 2023 electronically filed
			this return that a copy of the return is I er my PIN on the return's disclosure c			
Signature o	f officer or person subje	ct to tax Ition and Aut	bentication		Da	te
	(EFIN) followed by	-	ronic filing identification elf-selected PIN.	437869742 Do not enter all ze		
submittir			PIN, which is my signature on the 202 he requirements of Pub. 4163, Moder			
ERO's sig	nature SFW	PARTNER	S, LLC	Date 0	2/17/25	1
				.		
		_	ERO Must Retain This Forr			
			Submit This Form to the IRS	Unless Requested To D	0 50	
For Priva	acy Act and Pape	erwork Reduction	on Act Notice, see instructions.			Form 8879-TE (2023)

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 クበクス

	•	•••	Do not enter social security numbers on this form as it ma		liono,			
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						Open to Publ Inspection		
			ar year, or tax year beginning $OCT \ 1, \ 2023$ and ending	SEP 30, 202	24	•		
	Check if	C Name of	organization	D Employer ider	ntificatio	on number		
8	pplicab		-					
	Addre	ge OPER.	ATION FOOD SEARCH, INC.					
	Name Chang	ge Doing bu	isiness as	43-1243	1854			
	Initial	Number	and street (or P.O. box if mail is not delivered to street address) Room/s	suite E Telephone nun	nber			
	Final return		LOTSIE BLVD	(314) '	726-	5355		
	termi ated	City or to	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$		<u>47,538,31</u>	10.	
	Amer	1 51 •	LOUIS, MO 63132	H(a) Is this a grou			_	
	Appli tion	F Name ar	nd address of principal officer: KRISTEN WILD	for subordina	ates?	🗌 Yes 🛛 🗶	No	
	pend	SAME	AS C ABOVE	H(b) Are all subordina	tes include	ed? X Yes	No	
<u> </u>	Fax-ex	empt status: 🗌		527 If "No," attac	h a list.	See instructions		
	Nebs		OPERATIONFOODSEARCH.ORG	H(c) Group exem				
	_	f organization:	Corporation Trust Association X Other NON-P L	Year of formation: 198	L M Sta	ate of legal domicile	e: MO	
Pa	art I	Summary						
Ð	1		e the organization's mission or most significant activities: TO HEAL					
Governance			LABORATIVE SOLUTIONS THAT PROVIDE FOOD					
ernä	2	Check this box		nore than 25% of its net	1		10	
Ň	3		ing members of the governing body (Part VI, line 1a) ependent voting members of the governing body (Part VI, line 1b)		3		18	
	1 .		4		18			
es	5		of individuals employed in calendar year 2023 (Part V, line 2a)		5		71	
Activities &	6		of volunteers (estimate if necessary)		6			
Act			business revenue from Part VIII, column (C), line 12		7a		0.	
	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	Prior Year	<u>7b</u>	Current Year	0.	
		O and the diama		34,309,314	1	37,699,00	0.3	
en	8		and grants (Part VIII, line 1h)	411,425		431,30		
Revenue	9	•	ce revenue (Part VIII, line 2g)	353,169		599,60		
Be	10		ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	34,610		25,41		
	11			35,108,524		38,755,32		
	13		add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,013,756		<u>29,951,96</u>		
	14		nilar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4)			<u> </u>	0.	
	15	-	o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10)	3,576,780		4,028,64		
ses	160		Indraising fees (Part IX, column (A), line 11e)	254,593		403,52		
xpenses			ng expenses (Part IX, column (D), line 25) 1,293,130.			100,01		
Ĕ	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	3,504,452	2.	4,202,22	22.	
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,349,582		38,586,35		
	19		expenses. Subtract line 18 from line 12	-241,05		168,97		
L				Beginning of Current Ye		End of Year		
Net Assets or	20	Total assets (F	art X, line 16)	21,302,322		33,779,43	39.	
Assi	21		(Part X, line 26)	403,889		11,489,05		
Net	22		und balances. Subtract line 21 from line 20	20,898,432		22,290,38		
	art II			,,,,,,,,,,,,		,,_,00		
Und	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is							

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer			Date					
Here	<u>KRISTEN WILD, PRESIDENT &</u>								
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature		Date	Check	PTIN			
Paid	ROBB A. ROHLFING, CPA			02/17/	25 self-employed	P01050751			
Preparer	Firm's name SFW PARTNERS, LLC				Firm's EIN 43 -	1764273			
Use Only	Firm's address 1610 DES PERES RD	, SUITE 300							
	SAINT LOUIS, MO 6	3131-1891			Phone no. 314 -	569-3333			
May the II	May the IRS discuss this return with the preparer shown above? See instructions								
LHA For	LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)								

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2023) OPERATION FOOD SEARCH, INC. 43-1241854 Page
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO HEAL HUNGER WITH INNOVATIVE AND COLLABORATIVE SOLUTIONS THAT
	PROVIDE FOOD TODAY AND HELP CREATE A HUNGER-FREE TOMORROW.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 32,304,323. including grants of \$ 29,951,964.) (Revenue \$
	FOUNDED IN 1981, OPERATION FOOD SEARCH (OFS) IS A HUNGER RELIEF
	ORGANIZATION THAT PROVIDES FREE FOOD, NUTRITION EDUCATION AND
	INNOVATIVE PROGRAMS PROVEN TO REDUCE FOOD INSECURITY. WITH A STRATEGIC
	FOCUS AIMED AT ENDING CHILDHOOD HUNGER, OFS EMPOWERS FAMILIES AND
	INCREASES ACCESS TO HEALTHY AND AFFORDABLE FOOD. THE AGENCY PROVIDES
	FOOD AND SERVICES TO NEARLY 200,000 INDIVIDUALS ON A MONTHLY BASIS -
	ONE-THIRD OF WHOM ARE CHILDREN - THROUGH A NETWORK OF 330 COMMUNITY
	PARTNERS IN 25 MISSOURI AND ILLINOIS COUNTIES.
4b	(Code:) (Expenses \$1,719,299. including grants of \$) (Revenue \$)
	THE OUT OF SCHOOL MEALS PROGRAM ENSURES THAT CHILDREN CONTINUE TO
	RECEIVE NUTRITIOUS MEALS WHEN SCHOOL IS NOT IN SESSION. OUR SUMMER
	MEALS PROGRAM PROVIDES THOUSANDS OF CHILDREN WITH MEALS THROUGH
	STATIONARY AND MOBILE SITES THROUGHOUT THE ST. LOUIS REGION DURING THE
	SUMMER MONTHS. OUR AFTERSCHOOL REFUEL PROVIDES CHILDREN WITH A MEAL
	AFTER THE BELL RINGS, EITHER AT SCHOOL OR AT PARTNER LOCATIONS SUCH AS
	LIBRARIES. THESE MEALS PROVIDE THE FUEL NEEDED FOR CHILDREN TO BE
	SUCCESSFUL FOR THE REMAINDER OF THE DAY. OPERATION BACKPACK PROVIDES
	WEEKLY SACKS OF KID-FRIENDLY FOOD TO HELP STUDENTS GET THROUGH THE
	WEEKEND WHEN SCHOOL MEALS ARE NOT AVAILABLE.
4c	(Code:) (Expenses \$964,619. including grants of \$) (Revenue \$422,489.
	METROMARKET IS A MOBILE GROCERY STORE THAT TRAVELS TO AREAS WITH
	LIMITED ACCESS TO FRESH, HEALTHY FOOD. METROMARKET'S INNOVATIVE
	APPROACH USES A CUSTOMER MODEL TO EMPOWER THE COMMUNITY TO SHOP AT
	SIGNIFICANTLY LOWER PRICES THAN RETAIL GROCERS. FRESH, AFFORDABLE
	PRODUCE HAS BEEN CAREFULLY SELECTED FROM LOCAL FARM PARTNERS AND IS
	BROUGHT DIRECTLY TO PARTNER SITES IN THE COMMUNITY. AS A PART OF THE
	ORGANIZATION'S FAMILY, METROMARKET IS GROWING ITS PROGRAMMING,
	INCLUDING RECIPE TASTINGS, NUTRITION EDUCATION AND OTHER COMMUNITY
	NUTRITION OFFERINGS.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 1,638,010 · including grants of \$) (Revenue \$ 8,820 ·)
40	Total program service expenses 36,626,251.
	Form 990 (20)
33000	•
JJ200	12-21-23

Form	990	(2023)

 Form 990 (2023)
 OPERATION FOOD SEARCH, INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete			
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,	10		
	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	х	
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		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? 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		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? 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			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	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			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	

Form	990	(2023)
	000	

 Form 990 (2023)
 OPERATION FOOD SEARCH, INC.

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? 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			
	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			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	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? If "Yes," complete			
	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		X
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		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? 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	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 25			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

	990 (2023) OPERATION FOOD SEARCH, INC. 43-12	41854	Р	age 5	
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
			Yes	No	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
		71	37		
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		Х		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<u>3b</u>			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	1-		x	
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>			
D	If "Yes," enter the name of the foreign country				
50		5a		x	
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X	
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit				
ou	any contributions that were not tax deductible as charitable contributions?	6a		x	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				
-	were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the pay	or? 7a	Х		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		Х		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required				
	to file Form 8282?			X	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X	
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
	sponsoring organization have excess business holdings at any time during the year?				
9	9 Sponsoring organizations maintaining donor advised funds.				
а	a Did the sponsoring organization make any taxable distributions under section 4966?				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
а	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				
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members 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.)	_			
		12a			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	_			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10			
а	Is the organization licensed to issue qualified health plans in more than one state?	<u>13a</u>			
	Note: See the instructions for additional information the organization must report on Schedule O.				
D	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans 13b	_			
	Enter the amount of reserves on hand	44-		v	
14a	Did the organization receive any payments for indoor tanning services during the tax year?			<u> </u>	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<u>14b</u>		<u> </u>	
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?	15		x	
	excess parachute payment(s) during the year?	. 15		- 23	
16	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?	16		x	
10	If "Yes," complete Form 4720, Schedule O.				
17	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			
	If "Yes." complete Form 6069.	"			

Form 990 (2023)

OPERATION FOOD SEARCH, INC.

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

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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. Χ

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 18			
	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 18	i i		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	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 appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
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 by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	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 arrangement with 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 its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, and 990 T (section 501(c)(3)	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.	.,		
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	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 books and records			
	KRISTEN WILD - 314-726-5355			

Form 990 (
Part VII	Coi

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 and the organization of content have completely and the content have been and the organization of the surface of the su

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A)	(B)		(C)		(D)	(E)	(F)			
Name and title	Average	(do		Pos	itior	i than c		Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	s both	nan	compensation	compensation	amount of
	week		cer an I	id a d	irecto	r/trust	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		96	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		nploy	st con yee	L	1099-NEC)		organizations
	line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) KRISTEN WILD	60.00				-		4			
PRESIDENT & CEO		1		x				207,100.	0.	15,000.
(2) CARLTON ADAMS	40.00									
C00		1				X		124,984.	Ο.	12,000.
(3) JULIE MANN	40.00									
CFO						X		129,481.	0.	6,500.
(4) ELLEN REED-FOX	40.00									
CDO						X		115,113.	0.	12,000.
(5) ERIN BROOKS	2.00									
CHAIR		Х		Х				0.	0.	0.
(6) LAURA BRYANT	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(7) AMY ALTHOLZ	2.00									
TREASURER		Х		Х				0.	0.	0.
(8) DARA WEBB	2.00									
SECRETARY		Х		Х				0.	0.	0.
(9) ALTHEA ALBERT-SANTIAGO	1.00									
DIRECTOR		Х						0.	0.	0.
(10) STACY BRANDT	1.00									
DIRECTOR		Х						0.	0.	0.
(11) NIK BRYM	1.00									
DIRECTOR		Х						0.	0.	0.
(12) MAXINE CLARK	1.00									
DIRECTOR		Х						0.	0.	0.
(13) PEPE FINN	1.00									
DIRECTOR		Х						0.	0.	0.
(14) HILARY HARRIS	1.00									
DIRECTOR		Х						0.	0.	0.
(15) JULIE HOFF	1.00									
DIRECTOR		Х						0.	0.	0.
(16) BRUCE MADISON	1.00								_	
DIRECTOR		х						0.	0.	0.
(17) MARIA O'BRIEN	1.00								-	c.
DIRECTOR		Х						0.	0.	0.

Form 990 (2023) OPERATION									43-124	1854	Page 8	
Part VII Section A. Officers, Directors, Trus (A)	tees, Key Emp (B)	oloye	ees,		l Higl C)	hest	<u>C</u> c	ompensated Employee (D)	s (continued) (E)	(F)	
Name and title	Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)			ge Position (do not check more than one box, unless person is both an			n	Reportable compensation from	Reportable compensation from related	Estima amour oth	ated nt of
	(list any hours for related organizations below line)	In dividual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compen from organiz and re organiz	nsation the zation lated	
(18) JOSH REDD	1.00	37						0	0			
DIRECTOR (19) STEVE SPRATT	1.00	х						0.	0	•	0.	
DIRECTOR		х						0.	0		0.	
(20) JESSICA STEPHAN	1.00											
DIRECTOR	1	Х						0.	0	•	0.	
(21) GORDON REEL DIRECTOR	1.00	x						0.	0		0.	
(22) LUCAS SIGNORELLI	1.00	Δ						0.	0	•	<u> </u>	
DIRECTOR		х						0.	0	•	0.	
1b Subtotal								576,678.	0		500.	
c Total from continuation sheets to Part VI								0.	0		0.	
d Total (add lines 1b and 1c)								576,678.	0	• 45,	500.	
2 Total number of individuals (including but n compensation from the organization		ose	iiste	u ac	ove)	wno	rec	ceived more than \$100,	ooo or reportable		4	
										Ye		
3 Did the organization list any former officer,					-		-					
line 1a? If "Yes," complete Schedule J for si										3	X	
4 For any individual listed on line 1a, is the su and related organizations greater than \$150										4 X		
5 Did any person listed on line 1a receive or a										-		
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or su	ich i	oerso	n				5	X	
Section B. Independent Contractors							416		100 000 of company			
 Complete this table for your five highest con the organization. Report compensation for the 										ation from		
(A)				0				(B)		(C)		
Name and business	address	NC	ONE	2				Description of s	ervices	Compensa	tion	
							+					
• Total number of independent contractors (J #	there	- liet -			are then			
2 Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	στ IIN	ntec	1 (0)	those 0	e iiste	da	above) who received mo	bre than			

Pa	rt VII	Statement of Re	venue						
		Check if Schedule O	contains a	a response	or note to any line				
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns		1a					
ran	b								
Amo Amo	с	Fundraising events		1c	217,372.				
àifts ar /	d	Related organizations		1d					
is, (е	Government grants (contr	ributions)	1e	543,488.				
tion sr S	f	All other contributions, gifts,	grants, and	d					
ibu		similar amounts not included	above	1f	36,938,143.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in	lines 1a-1f	1g \$	30,091,656.				
<u>a Č</u>	h	Total. Add lines 1a-1f	<u></u>			37,699,003.			
	_			a	Business Code	422,480	422,480		
Program Service Revenue	2 a				624210 624210	422,489. 6,820.	422,489.		
ierv ue	b		CLASSE		624210	2,000.	6,820. 2,000.		
m S ven	C L				024210	2,000.	2,000.		
grai Re	d								
Proj	e f		rovonuo						
_	u a					431,309.			
	3	Investment income (includ				1			
	-		•			485,753.			485,753.
	4	Income from investment of				· · · · ·			
	5	Royalties	<u></u>	· · · · · · · · · · · · · · · · · · ·					
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a						
	b	Less: rental expenses	6b						
	С	Rental income or (loss)	6c						
	d	(
	7 a	Gross amount from sales of		Securities	(ii) Other				
		assets other than inventory	7a ⁸ ,	,766,540	·				
	b	Less: cost or other basis		650 601					
Revenue		and sales expenses		,652,691 113,849					
eve		Gain or (loss)		-		113,849.			113,849.
жR		Net gain or (loss)			·····	113,049.			113,049.
Othe	0 4		217,372						
0		contributions reported on		- 1					
		Part IV, line 18	-		144,914.				
	b	Less: direct expenses			130,294.				
		Net income or (loss) from				14,620.			14,620.
	9 a	Gross income from gamir	ng activitie	es. See					
		Part IV, line 19		98	a				
	b	Less: direct expenses		91					
	С	Net income or (loss) from	gaming a	ctivities					
	10 a	Gross sales of inventory,							
		and allowances							
		Less: cost of goods sold							
	С	Net income or (loss) from	sales of in	nventory .	Business Code				
sn	11 ~	OTHER			812900	10,791.			10,791.
Miscellaneous Revenue	n a b								
əllaı ven	с С								
isce Re	с Ь	All other revenue							
Σ	e	Total. Add lines 11a-11d				10,791.			
		Total revenue See instruction				38,755,325.	431,309.	0.	625,013.

OPERATION FOOD SEARCH, INC.

Form 990 (2023)

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Form 990 (2023)	OPERATION		SEARCH,	INC.	
Part IX Statement	of Functional Expe	nses			

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

	Check if Schedule O contains a response or note to any line in this Part IX									
Do i	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising					
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21	29,951,964.	29,951,964.							
2	Grants and other assistance to domestic									
	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,	205,000.	61,500.	61,500.	82 000					
•	trustees, and key employees	205,000.	01,500.	01,500.	82,000.					
6	Compensation not included above to disqualified									
	persons (as defined under section $4958(f)(1)$) and									
7	persons described in section 4958(c)(3)(B)	3,191,478.	2,282,070.	346,077.	563,331.					
8	Other salaries and wages Pension plan accruals and contributions (include	5,151,470.	2,202,070.	510,0770	505,551.					
0	section 401(k) and 403(b) employer contributions									
9	Other employee benefits	387,012.	276,714.	42,571.	67,727.					
10	Payroll taxes	245,150.	174,056.	26,967.	44,127.					
11	Fees for services (nonemployees):									
а	Management	249,075.	191,978.	25,134.	31,963.					
	Legal									
	Accounting	32,400.		32,400.						
	Lobbying									
	Professional fundraising services. See Part IV, line 17	403,529.			403,529.					
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.)									
12	Advertising and promotion	224 661	054 240	42 505	26 012					
13	Office expenses	334,661.	254,342.	43,506.	36,813.					
14	Information technology									
15	Royalties									
16		28,319.	23,788.	1,416.	3,115.					
17	Travel	20,319.	23,700.	1,410•	5,115.					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest									
20	Payments to affiliates									
22	Depreciation, depletion, and amortization	272,591.	256,235.	8,178.	8,178.					
23	Insurance	145,664.	134,739.	5,098.	5,827.					
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.)									
а	FOOD PURCHASES	2,378,096.	2,378,096.							
b	PROGRAM EXPENSES	142,315.	142,315.	0 500						
С	COMMUNICATION	136,850.	88,952.	9,580.	38,318.					
d	VEHICLES	122,873.	122,873.	64,547.	0 000					
	All other expenses	359,378. 38,586,355.	286,629. 36,626,251.	666,974.	<u>8,202.</u> 1,293,130.					
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e	50,500,555.	50,020,251.	000,3/4.	1,493,130.					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here \mathbf{X} if following SOP 98-2 (ASC 958-720)	0.	0.	0.	0.					
					5 990 (2000)					

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OPERATION	FOOD	SEARCH,	INC.

Pa	τΧ	Balance Sheet					
		Check if Schedule O contains a response or note	e to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			41,031.	1	32,355.
	2	Savings and temporary cash investments			3,520,992.	2	5,081,193.
	3	Pledges and grants receivable, net			347,912.	3	520,308.
	4	Accounts receivable, net			68,888.	4	94,666.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these	e perso	ons		5	
	6	Loans and other receivables from other disqualifi	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sect	ion 4958(c)(3)(B)		6	
ŝ	7	Notes and loans receivable, net				7	7,995,900.
Assets	8	Inventories for sale or use			1,539,153.	8	1,275,743.
Ä	9				288,314.	9	318,343.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		14,673,118.			
	b	Less: accumulated depreciation		2,284,084.	5,620,848.	10c	<u>12,389,034.</u> 5,947,492.
	11	Investments - publicly traded securities			9,875,183.	11	5,947,492.
	12	Investments - other securities. See Part IV, line 1	1			12	
	13	Investments - program-related. See Part IV, line 1				13	104 405
	14	Intangible assets				14	124,405.
	15	Other assets. See Part IV, line 11			01 200 201	15	22 660 420
	16	Total assets. Add lines 1 through 15 (must equa			21,302,321.	16	33,779,439.
	17	Accounts payable and accrued expenses			403,889.	17	779,849.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
ies	22	Loans and other payables to any current or forme					
oilit		trustee, key employee, creator or founder, substa					
Liabilities	00	controlled entity or family member of any of these		F		22 23	10,709,208.
	23 24	Secured mortgages and notes payable to unrelat Unsecured notes and loans payable to unrelated		E E E E E E E E E E E E E E E E E E E		23 24	10,705,200.
	24 25	Other liabilities (including federal income tax, pay	•			24	
	25	parties, and other liabilities not included on lines					
		of Schodulo D	,			25	
	26				403,889.	26	11,489,057.
		Organizations that follow FASB ASC 958, chec					
es		and complete lines 27, 28, 32, and 33.					
anc	27	• • • • • •			17,465,518.	27	18,779,859.
Bala	28	Net assets with donor restrictions			3,432,914.	28	<u>18,779,859</u> . 3,510,523.
lpu		Organizations that do not follow FASB ASC 95					
Ъ		and complete lines 29 through 33.					
٦ د	29	Capital stock or trust principal, or current funds				29	
sets	30	Paid-in or capital surplus, or land, building, or equ				30	
Ast	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32				20,898,432.	32	22,290,382.
	33	Total liabilities and net assets/fund balances			21,302,321.	33	33,779,439.
							Farm 990 (0000)

Form **990** (2023)

Part X Balance Sheet

Form	990	(2023
FUIII	330	12020

Form	990 (2023) OPERATION FOOD SEARCH, INC.	43-1	241854	Pa	_{ge} 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	38,75	5,3	25.					
2	Total expenses (must equal Part IX, column (A), line 25)	2	38,58							
3										
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,89	8,4	32.					
5	Net unrealized gains (losses) on investments	5	1,22	2,9	80.					
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	22,29	0,3	82.					
Pa	rt XII Financial Statements and Reporting									
	Check if Schedule O contains a response or note to any line in this Part XII				X					
				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	О.								
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		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?		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:									
	Separate basis X 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									
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>					
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.								
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the									
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	Х	 					
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi									
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	X	L					

Form **990** (2023)

SCHEDULE A	١
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Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2023
Open to Public Inspection

Name of the organization

Nam	e of t	he organization						Employer	identification number
				SEARCH, INC					3-1241854
Par	tl	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	s.	
The c	rgani	zation is not a private found	lation because it is: (For lines 1 through 12, c	heck only	one box.)			
1 [A church, convention of chu	urches, or associatio	on of churches described	l in sectio	n 170(b)(1	l)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii).	(Attach Schedule E (Forn	า 990).)				
3		A hospital or a cooperative	hospital service org	anization described in se	ection 170	(b)(1)(A)(ii	i).		
4 [A medical research organization	ation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:							
5 [An organization operated for	or the benefit of a co	llege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governr	nental unit described in	section 17	70(b)(1)(A)	(v).		
7 [Х	An organization that norma	Illy receives a substa	ntial part of its support fi	rom a gove	ernmental	unit or from th	ne general p	oublic described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9 [An agricultural research org				ed in conju	inction with a	land-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of	the college	or
		university:				-		-	
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
		activities related to its exem	npt functions, subjec	ct to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support fi	rom gross investment
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)						
11		An organization organized a	and operated exclus	ively to test for public sa	fety. See	section 50)9(a)(4).		
12		An organization organized a						rry out the	purposes of one or
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3). (Check the box on
		lines 12a through 12d that	describes the type of	of supporting organization	n and com	plete lines	12e, 12f, and	12g.	
а] Type I. A supporting orga	anization operated, s	supervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
		the supported organization	on(s) the power to re	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	upporting
		organization. You must c	complete Part IV, Se	ections A and B.					
b] Type II. A supporting org	anization supervised	d or controlled in connect	tion with it:	s supporte	d organizatio	n(s), by hav	ving
		control or management o	of the supporting org	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.					
с		Type III functionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functional	ly integrate	ed with,
		its supported organization	n(s) (see instructions	s). You must complete l	Part IV, Se	ctions A,	D, and E.		
d		Type III non-functionally	, integrated. A supp	porting organization oper	ated in co	nnection w	ith its suppor	ted organiz	zation(s)
		that is not functionally int	egrated. The organized	zation generally must sat	isfy a distr	ibution rec	uirement and	an attentiv	/eness
		requirement (see instructi	ions). You must coi	mplete Part IV, Sections	A and D,	and Part	V.		
е		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Туре I, Туре	II, Type III	
		functionally integrated, or	r Type III non-functio	nally integrated supporti	ng organiz	ation.			
f	Ente	r the number of supported o	organizations						
g		ide the following information							
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	anization listed ng document?	(v) Amount of	,	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see ir	istructions)	support (see instructions)
Total									

Part II

(Form 990) 2023 OPERATION FOOD SEARCH, INC. 43-1241 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.)

260	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.")	40758657.	42411045.	34981376.	34114850.	37699003.	189964931
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	<u>40758657.</u>	<u>42411045.</u>	34981376.	34114850.	37699003.	189964931
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						80538883.
	Public support. Subtract line 5 from line 4.						109426048
Sec	ction B. Total Support	1	1	1	1	1	
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	40758657.	42411045.	34981376.	34114850.	37699003.	189964931
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	134,940.	102,542.	212,661.	404,821.	485,753.	1340717.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on \dots						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	91,868.	80,275.	98,706.	34,616.		330,876.
11	Total support. Add lines 7 through 10						191636524
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)	
_	organization, check this box and sto						
Sec	ction C. Computation of Publ	ic Support Per	centage				
	Public support percentage for 2023 (-			14	57.10 %
	Public support percentage from 2022					15	56.15 %
16a	33 1/3% support test - 2023. If the				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						
	and stop here. The organization qua						
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the fact			-	-	VI how the organiz	zation
	meets the facts-and-circumstances te	-			•		
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets the						
	organization meets the facts-and-circ				•		
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a		
						Schedule A	(Form 990) 2023

20	Private foundation.	If the organization	did not	t check	a box o	on line	14,	19a, (or 19b,	check th	s box and	see	instructior	າຣ
														_

Schedule A (Form 990) 2023 OP Part III Support Schedule for Or	ERATION ganizations	FOOD SEAR Described in S	CH, INC. Section 509(a)	(2)	43-124	1854
(Complete only if you checked th	-				art II. If the organiza	ation fails
qualify under the tests listed be			gamzanon ranoa	10 quanty and 1		
Section A. Public Support				1		
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) ⊺c
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per- formed, 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 bus-						
iness 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						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						(1) -
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) To
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on						
securities loans, rents, royalties,						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b,						
whether or not the business is						
regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	-					
check this box and stop here	Output and D					
Section C. Computation of Public		•			1 1	
15 Public support percentage for 2023 (lin			column (f))		15	
16 Public support percentage from 2022 S	Schedule A Part	III line 15			16	

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))

18 Investment income percentage from 2022 Schedule A, Part III, line 17

more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

(f) Total

(f) Total

% %

%

%

Schedule A (Form 990) 2023

_....L

17

18

1

Yes

No

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.)

2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A	(Form 990)) 2023	OPERATION	FOOD	SEARCH,	INC.
Part IV	Suppor	ting Organ	nizations (continued	()		

1

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	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.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			

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

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

			g organization.
Section C. Ty	pe II Supp	orting Org	anizations

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

	Section D. All Type III Supporting Organizations	
--	--	--

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

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b

c 🗌		The organization supported a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instructions).
-----	--	---	-------------------------	-----------------	---------------------	---------------------

- Activities Test. Answer lines 2a and 2b below. 2
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

2a

2b

3a

No

Yes

chedu Part	· · · · · · · · · · · · · · · · · · ·	g Orgar	nizations	43-1241854 _{Pag}
1 [Check here if the organization satisfied the Integral Part Test as a qualifying		•	Part VI). See instruction
	All other Type III non-functionally integrated supporting organizations must	: complete	Sections A through E.	(B) Current Year
ectior	n A - Adjusted Net Income		(A) Prior Year	(optional)
1 N	let short-term capital gain	1		
2 R	ecoveries of prior-year distributions	2		
3 O	ther gross income (see instructions)	3		
4 A	dd lines 1 through 3.	4		
5 D	Pepreciation and depletion	5		
6 P	ortion of operating expenses paid or incurred for production or			
C	ollection of gross income or for management, conservation, or			
m	naintenance of property held for production of income (see instructions)	6		
7 0	Other expenses (see instructions)	7		
8 A	djusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ectior	n B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 A	ggregate fair market value of all non-exempt-use assets (see			
in	nstructions for short tax year or assets held for part of year):			
аA	verage monthly value of securities	1a		
bΑ	verage monthly cash balances	1b		
c Fa	air market value of other non-exempt-use assets	1c		
d T	o tal (add lines 1a, 1b, and 1c)	1d		
еD	Discount claimed for blockage or other factors			
(e	explain in detail in Part VI):			
2 A	cquisition indebtedness applicable to non-exempt-use assets	2		
3 S	ubtract line 2 from line 1d.	3		
4 C	ash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
S	ee instructions).	4		
5 N	let value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Ⅳ	fultiply line 5 by 0.035.	6		
7 R	ecoveries of prior-year distributions	7		
8 N	finimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

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	7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see				

instructions).

Schedule A (Form 990) 2023

Current Year

_		D SEARCH, INC.	nizotiono	4.	3-1241854 Pag
		(a)(3) Supporting Orga	(continu	ued)	• • • •
	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer			1	
2	Amounts paid to perform activity that directly furthers exemp organizations, in excess of income from activity	pi purposes of supported			
3	Administrative expenses paid to accomplish exempt purpos	os of supported organization	6	2	
4	Amounts paid to acquire exempt-use assets	es of supported organization	5	4	
5	Qualified set-aside amounts (prior IRS approval required - pr	rovido dotoilo in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive	9		
-	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C. line 6			9	
0	Line 8 amount divided by line 9 amount			10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	ns	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				

and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2024. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

Schedule A (Form 990) 2023

OPERATION FOOD SEARCH, INC.

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

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

SPECIAL EVENTS	
2019 AMOUNT: \$	31,040.
2020 AMOUNT: \$	31,699.
2021 AMOUNT: \$	59,147.
2022 AMOUNT: \$	29,177.
2023 AMOUNT: \$	14,620.
OTHER	
2019 AMOUNT: \$	60,828.
2020 AMOUNT: \$	48,576.
2021 AMOUNT: \$	39,559.
2022 AMOUNT: \$	5,439.
2023 AMOUNT: \$	10,791.

Schedule A

323171 04-01-23

Identification of Excess Contributions Included on Part II, Line 5

43-1241854

2023

** Do Not File **
*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions		
SCHNUCK MARKETS	68,447,550.	64,614,820		
SIRL SCOUT COUNCIL	8,827,688.	4,994,958		
DIERBERGS MARKETS	9,887,439.	6,054,709		
HOPE AND ENCOURAGEMENT FOR HUMANITY	8,707,126.	4,874,396		
otal Excess Contributions to Schedule A, Part II, Line 5		80,538,883		

SCHEDULE C	Political Campaign and Lobbying Activities				
(Form 990)	For Organizations Exempt From Income Tax Under Section 501(c) and Section 527				
	Complete if the organization is described below. Attach to Form 990 or Form 990-FZ				

Department of the Treasury Internal Revenue Service

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

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

Section 527 organizations: Complete Part I-A only.

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

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

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

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

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

Nan	ame of organization Employer identification number								
						43-124	1854	Ĺ	
Pa	art I-A	Complete if the org	anization is exempt under	section 501(c) or	r is a section 52	27 org	anization.		
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV.								
2	Political	campaign activity expendit	ures			\$			
3	Voluntee	er hours for political campai	gn activities						
Pa	art I-B	Complete if the org	anization is exempt under	section 501(c)(3)					
1	Enter the	e amount of any excise tax	incurred by the organization under	section 4955		\$			
2		•	incurred by organization managers						
3			n 4955 tax, did it file Form 4720 fo						No
									No
		describe in Part IV.							
Pa	art I-C	Complete if the org	anization is exempt under	section 501(c), e	except section 5	501(c)	(3).		
1	Enter the	e amount directly expended	by the filing organization for section	on 527 exempt functio	n activities	\$			
2	Enter the	e amount of the filing organ	ization's funds contributed to othe	r organizations for sec	tion 527				
	exempt	function activities				\$			
3	Total exe	empt function expenditures	. Add lines 1 and 2. Enter here and	on Form 1120-POL,					
	line 17b					\$			
4	Did the f	iling organization file Form	1120-POL for this year?				🔄 Yes		No
5			nployer identification number (EIN)		•				n
	•	, 0	tion listed, enter the amount paid f	0 0					
			omptly and directly delivered to a s		,	eparate	segregated fu	nd or a	i
	political	action committee (PAC). If	additional space is needed, provide	e information in Part IV	'. I				
		(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organizatic funds. If none, ent	on's	(e) Amount contributions promptly a delivered to political or If none, o	receive nd dire a sepa ganizat	ed and ectly arate ion.

23 71 Open to Public Inspection

Schedule C (Form 990) 2023	OPERATION	FOOD SEARCH,	INC.	43-1	1241854 Page 2	
Part II-A Complete if the org	janization is ex	empt under sectior	n 501(c)(3) and file	ed Form 5768 (el	ection under	
Section 501(h)).	ation belongs to an	affiliated group (and list ir	Part IV each affiliated	group member's nan	ne, address, EIN,	
expenses, and sha	re of excess lobbyir	g expenditures).				
B Check if the filing organiza	ation checked box A	and "limited control" pro	ovisions apply.			
	its on Lobbying Ex ditures" means an	oenditures ounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals	
1a Total lobbying expenditures to infl	1a Total lobbying expenditures to influence public opinion (grassroots lobbying)					
b Total lobbying expenditures to infl	uence a legislative l	ody (direct lobbying)				
c Total lobbying expenditures (add l	ines 1a and 1b)					
d Other exempt purpose expenditure	es					
e Total exempt purpose expenditure	es (add lines 1c and	1d)				
f Lobbying nontaxable amount. Ent	er the amount from	the following table in bot	h columns.			
If the amount on line 1e, column (a) of	or (b) is: The	obbying nontaxable am	ount is:			
not over \$500,000,	20%	of the amount on line 1e.				
over \$500,000 but not over \$1,000	0,000, \$100	,000 plus 15% of the exc	ess over \$500,000.			
over \$1,000,000 but not over \$1,5	00,000, \$175	,000 plus 10% of the exc	ess over \$1,000,000.			
over \$1,500,000 but not over \$17,	000,000, \$225	,000 plus 5% of the exce	ss over \$1,500,000.			
over \$17,000,000,	\$1,0	00,000.				
g Grassroots nontaxable amount (er	nter 25% of line 1f)					
h Subtract line 1g from line 1a. If zer	o or less, enter -0-					
i Subtract line 1f from line 1c. If zero	o or less, enter -0-					
j If there is an amount other than ze reporting section 4911 tax for this					Yes No	
		Averaging Period Under				
(Some organizations t	hat made a sectio	501(h) election do not	have to complete all o	of the five columns b	below.	
	•	arate instructions for li				
	Lobbying Ex	penditures During 4-Yea	ar Averaging Period			
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total	
2a Lobbying nontaxable amount	1,000,000	. 1,000,000.	1,000,000.		3,000,000.	
b Lobbying ceiling amount					4 500 000	
(150% of line 2a, column(e))					4,500,000.	
c Total lobbying expenditures	36,000	. 52,500.	31,500.		120,000.	
d Grassroots nontaxable amount	250,000	. 250,000.	250,000.		750,000.	
e Grassroots ceiling amount (150% of line 2d, column (e))					1,125,000.	
	1		1			

f Grassroots lobbying expenditures

Schedule C (Form 990) 2023

Schedule C (Form 990) 2023 OPERATION FOOD SEARCH, INC. 43-12418 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(1	(b)	
	e lobbying activity.	Yes	No	Amo	ount	
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	Media advertisements?					
d	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
-	Other activities?					
	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5),	or sec	tion		
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2			
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		3	_		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."				3, is	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic					
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
	Carryover from last year		2b			
	Total		2c			
3			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po					
	expenditures next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions		5			
	t IV Supplemental Information					
	de the descriptions required for Dest IA. Res 1. Dest ID. Res 4. Dest IO. Res 5. Dest IA. (Sfill-bad errors)					

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

2		ULE D	Supplementa	al Financial St	atements		OMB No. 15	45-0047	
	n 990)			nization answered "Yes			202	72	
•			Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11d, 11e		Open to Public			
		the Treasury ie Service	A Go to www.irs.gov/Form99	ttach to Form 990. 0 for instructions and th	e latest information.		Inspection		
Nam	e of th	ne organizati					r identification	n number	
			OPERATION FOOD SEAD				43-12418		
Par	tl		ations Maintaining Donor Advise		milar Funds or A	ccounts.	Complete if th	e	
		organizatio	on answered "Yes" on Form 990, Part IV, lin	e 6.					
				(a) Donor advised	d funds	(b) Funds ar	nd other accou	nts	
1			nd of year						
2			of contributions to (during year)						
3	Aggre	egate value o	of grants from (during year)						
4		•	t end of year						
5		-	on inform all donors and donor advisors in v	-					
			on's property, subject to the organization's				. Ves	No	
6			on inform all grantees, donors, and donor a						
			poses and not for the benefit of the donor o		, , ,	0			
Par		rmissible priv	rate benefit? Pation Easements. Complete if the org				Yes	No No	
		_	servation easements held by the organization		, on Form 990, Part 1	v, iirie 7.			
1		()	n of land for public use (for example, recrea	· · · · · · · · · · · · · · · · · · ·	Preservation of a his	torically impo	stant land area		
			of natural habitat		Preservation of a ce				
			n of open space				Structure		
2	Com		through 2d if the organization held a qualif	fied conservation contribu	ition in the form of a c	onservation e	easement on th	e last	
-		of the tax yea	o o .				at the End of th		
а	-	-				2a			
b						0			
с		-	vation easements on a certified historic stru						
d	Num	ber of conser	vation easements included on line 2c acqu	ired after July 25, 2006, a					
			ture listed in the National Register			2d			
3			vation easements modified, transferred, rel			nization durin	g the tax		
	year								
4	Num	ber of states	where property subject to conservation eas	sement is located					
5	Does	the organiza	tion have a written policy regarding the per	iodic monitoring, inspecti	on, handling of				
	violat	tions, and ent	forcement of the conservation easements it	holds?			Yes	No	
6	Staff	and voluntee	er hours devoted to monitoring, inspecting,	handling of violations, and	d enforcing conservat	ion easement	ts during the ye	ear	
7	Amou	unt of expens	ses incurred in monitoring, inspecting, hanc	lling of violations, and enf	orcing conservation e	asements du	ring the year		
•									
8			vation easement reported on line 2d above	•					
~		section 170(h					Yes	└── No	
9		-	be how the organization reports conservation		•		the		
			d include, if applicable, the text of the footr	iote to the organization's	innancial statements t	nat describes	s u le		
Par	orgar 't III		counting for conservation easements. ations Maintaining Collections of	Art. Historical Trea	asures, or Other	Similar As	sets.		
			f the organization answered "Yes" on Form	-					
12	lf the		elected, as permitted under FASB ASC 95		nue statement and ba	alance sheet v	vorks		
14		0	easures, or other similar assets held for put	•					
			Part XIII the text of the footnote to its finar				-		
h			elected as permitted under EASB ASC 95			co choot work	rs of		

b	If th	e organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet	t w	orks of
	art,	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of pu	bli	c service,
	pro	ride the following amounts relating to these items.		
	(i)	Revenue included on Form 990, Part VIII, line 1	\$	
	(ii)	Assets included in Form 990, Part X	\$	

	(ii) Assets included in Form 990, Part X	\$_	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	е	
	the following amounts required to be reported under FASB ASC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1	\$_	
b	Assets included in Form 990, Part X	\$	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-28-23

Sche	dule D (Form 990) 2023 OPERATI	ON FOOD SEA	ARCH,	INC.				43-1	24185	4 Pa	age 2
Par	t III Organizations Maintaining C	ollections of Art	, Histor	rical Tre	asures, o	r Other	r Simila	r Asse	ts _{(contii}	nued)	
3	Using the organization's acquisition, accession	on, and other records	s, check a	ny of the f	ollowing that	make si	gnificant u	use of its	6		
	collection items (check all that apply).										
а	Public exhibition	d	L La	oan or excl	nange progra	am					
b	Scholarly research	е	0 O	ther							
с	Preservation for future generations										
4	Provide a description of the organization's co	ellections and explain	how they	/ further th	e organizatio	n's exen	npt purpo	se in Pa	rt XIII.		
5	During the year, did the organization solicit o	r receive donations o	f art, histo	orical treas	ures, or othe	er similar	assets	_			_
_	to be sold to raise funds rather than to be ma								Yes		No
Par			e if the or	ganization	answered "	Yes" on I	Form 990,	Part IV,	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodi	•						-			-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing tab	ole:					-		
									Amoun	t	
	Beginning balance										
	Additions during the year										
e	Distributions during the year										
t	Ending balance						. 1 f	Г			1
	Did the organization include an amount on Fo						ity?	L	Yes		∣No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds Complete if						<u></u>				
1 41		(a) Current year	(b) Prio		(c) Two year			lears hac	k (e) Fou	r vears	hack
10	Paginning of year balance	6,211,776.	. ,	535,558.		5,106.		75,801		,157,	
1a ⊾	Beginning of year balance	315,042.		39,811.		2,815.		76,748		,002,	
0	Contributions Net investment earnings, gains, and losses	1,114,793.		55,011. 536,407.	-1,182	-		22,557		,002, 116,	
с d	Grants or scholarships	_,,			-,	.,		,,	·	,	• = / •
	Other expenditures for facilities										
C	and programs	2,872,000.									
f	Administrative expenses	_, • • _ , • • • •									
a	End of year balance	4,769,611.	6,2	211,776.	5,535	5,558.	6,6	75,106	. 3	,275,	801.
2	Provide the estimated percentage of the curr		,	,		,	,	,	-	, ,	
a	Board designated or guasi-endowment	37.0000	%								
b	Permanent endowment 63.0000	%	_/*								
с		%									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.									
3a	Are there endowment funds not in the posse	ssion of the organizat	tion that a	are held an	d administer	ed for th	е				
	organization by:									Yes	No
	(i) Unrelated organizations?								. 3a(i)		Х
											Х
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Sch	edule R?					3b		
4	Describe in Part XIII the intended uses of the		vment fur	nds.							
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, I	ine 11a. S	ee Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or ot basis (investm		(b) Cost basis (• • •	ccumulate preciation		(d) Boo	k value	е
1a	Land			68	8,143.				68	8,14	43.
	Buildings			11,62	9,086.	9	992,73	30.	10,63		
	Leasehold improvements										
	Equipment				6,432.	1,0	096,1	90.		0,24	
	Other			47	9,457.	-	195,10			4,29	
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part)	K, line 10c	, column	(<u>B))</u>				12,38	9,0	34.

Schedule D (Form 990) 2023

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
	(-)		
(1) Financial derivatives(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 000 Part IV line	11c Soc Form 990 Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	of voor market value
		(c) Method of Valuation. Cost of end	-OI-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"		11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col Part X Other Liabilities	. <i>(B)</i>)		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. line 25. col	(H))		

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

Part VII Investments - Other Securities

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

Sche	dule D (Form 990) 2023 OPERATION FOOD SEARCH, IN	с.		43-	1241854 Page	4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	nents With I	Revenue per Re			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.				
1	Total revenue, gains, and other support per audited financial statements			1	40,016,461	. •
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	1,222,980.			
b	Donated services and use of facilities	2b	38,156.			
с	Recoveries of prior year grants	2c				
d						
е	Add lines 2a through 2d			2e	1,261,136	
3	Subtract line 2e from line 1			3	38,755,325	; .
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c	0	۱.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	38,755,325	; .
Pa	rt XII Reconciliation of Expenses per Audited Financial Stater	ments With	Expenses per F	Retur	n	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.				
1	Total expenses and losses per audited financial statements			1	38,624,511	. •
1 2				1	38,624,511	- •
-	Total expenses and losses per audited financial statements		38,156.	1	38,624,511	. •
2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a		1	38,624,511	 - •
2 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b		1	38,624,511	. •
2 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c		1		
2 a b c d	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	38,156.	_1	38,156	5.
2 a b c d	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	38,156.	-		5.
2 a b c d e	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	38,156.	 2e	38,156	5.
2 a b c d e 3	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	38,156.	 2e	38,156	5.
2 a b c d e 3 4	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d	38,156.	 2e	38,156	5.
2 a b c d e 3 4 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d 4a 4b	38,156.	 2e	<u>38,156</u> 38,586,355 0	<u>5.</u>
2 a b c d e 3 4 a b c 5	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 2d 4a 4b	38,156.	2e 3	38,156	<u>5.</u>

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

PART V, LINE 4:

THE ORGANIZATION'S BOARD DESIGNATED ENDOWMENT FUNDS ARE INTENDED TO BE

MAINTAINED AND REQUIRE BOARD APPROVAL FOR THE FUNDS TO BE USED. THE

ORGANIZATION'S DONOR ENDOWMENT FUND IS INTENDED TO BE KEPT IN PERPETUITY.

THE ENDOWMENTS HAVE A SPENDING POLICY AND ALLOW FOR USE OF THE EARNINGS AT

THE BOARD OF DIRECTOR'S DISCRETION.

PART X, LINE 2:

THE ORGANIZATION ACCOUNTS FOR ANY UNCERTAIN TAX POSITIONS IN ACCORDANCE

WITH THE INCOME TAXES TOPIC OF THE FASB ASC. THE TOPIC PRESCRIBES A

RECOGNITION THRESHOLD AND MEASUREMENT PROCESS FOR FINANCIAL STATEMENT

RECOGNITION OF UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A

TAX RETURN. IN EVALUATING THE ORGANIZATION'S EXEMPT STATUS,

INTERPRETATIONS AND TAX PLANNING STRATEGIES ARE CONSIDERED. THE

ORGANIZATION BELIEVES IT IS NOT EXPOSED TO ANY MATERIAL CURRENT OR FUTURE

TAX LIABILITY BASED ON ITS CURRENT OPERATIONS.

SCHEDULE G	Suppleme	ntal Informa	ation Regardir	ng Fund	Iraisi	ng or Gaming A	ctivities	OMB No. 1545-0047
(Form 990)						Part IV, line 17, 18, o rm 990-EZ, line 6a.	r 19, or if the	2023
Department of the Treasury			Attach to Form 99					Open to Public Inspection
Internal Revenue Service Name of the organization		o www.irs.gov	/Form990 for inst	ructions	and t	ne latest information		identification number
Name of the organization		ON FOOD	SEARCH, I	NC.				41854
Part I Fundrais					'es" or	n Form 990, Part IV, I		
required to	complete this par	t.	· g					
c X Phone solici d X In-person so 2 a Did the organization	ions email solicitations tations licitations on have a written c ed in Form 990, P	r oral agreeme art VII) or entity	e X Solic f X Solic g X Spec nt with any individu	citation of citation of cial fundra ual (incluc n professi	non-g gover aising ding of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	X	
compensated at le	ast \$5,000 by the	organization.						
(i) Name and addres or entity (func		(ii) Activity	fùndr have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	(v) Amount pa to (or retained fundraiser listed in col.	by) to (or retained by)
DOUGLAS SHAW - 1717	7 PARK			Yes	No			
STREET SUITE 300, M	NAPERVILLE,				X	732,114.	354,6	23. 377,491.
Total		n in veninterer (732,114.	354,6	,
3 List all states in whi or licensing. MO, IL	on the organizatio	n is registered	UT INCERISED TO SOLIC		utions	or has been notified	it is exempt from	II registration
<u></u>								

OPERATION FOOD SEARCH, INC.

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

		(a) Event #1	(b) Event #2	(c) Other events	
		FEAST FOR	GOLF		(d) Total events
				1	(add col. (a) throug
		CHANGE	TOURNAMENT	1	col. (c))
1		(event type)	(event type)	(total number)	
1	Gross receipts	192,263.	99,575.	70,448.	362,286
2	2 Less: Contributions	115,358.	59,745.	42,269.	217,372
	Gross income (line 1 minus line 2)	76,905.	39,830.	28,179.	144,914
4	Cash prizes				
5	5 Noncash prizes				
6	8 Rent/facility costs				
7	7 Food and beverages				
8	B Entertainment				
g			61,718.	3,791.	130,294
10	Direct expense summary. Add lines 4 through				130,294
11					14,620
	\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (ac col. (a) through col.
1	Gross revenue				
2	2 Cash prizes				
	Cash prizes Noncash prizes				
3					
3	3 Noncash prizes				
3 4 5	 Noncash prizes Rent/facility costs Other direct expenses 	Yes%		%	
3 4 5	Noncash prizes Rent/facility costs	Yes% No	└────────────────────────────────────	└────────────────────────────────────	
3 4 5	 Noncash prizes Rent/facility costs Other direct expenses 	No		No	
3 4 5 6 7	 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 5 Volunteer labor 	No 1 5 in column (d)	□ No	No	
3 4 5 6 7 8 Er Is	 Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 Inter the state(s) in which the organization conduct the organization licensed to conduct gaming and 	No 5 in column (d) from line 1, column (d) icts gaming activities: ctivities in each of these	No No	No	Yes I
3 4 5 6 7 8 Er Is	 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses 5 Volunteer labor 7 Direct expense summary. Add lines 2 through 3 Net gaming income summary. Subtract line 7 nter the state(s) in which the organization conduction 	No 5 in column (d) from line 1, column (d) icts gaming activities: ctivities in each of these	No No	No	Yes I
3 4 5 6 7 8 Er Is	 Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 Inter the state(s) in which the organization conduct the organization licensed to conduct gaming and 	No 5 in column (d) from line 1, column (d) icts gaming activities: ctivities in each of these	No No	No	

332082 09-13-23

Schedule G (Form 990) 2023

Sch	edule G (Form 990) 2023	OPERATION	FOOD	SEARCH,	INC.	43-1	241854	Page 3
11	Does the organization conduct ga	ming activities with r	onmembe	rs?			Yes	No
12	Is the organization a grantor, bene							
	to administer charitable gaming?	•			•	•	Yes	No
13	Indicate the percentage of gaming							
	The organization's facility						13a	%
	An outside facility						13b	<u> </u>
	Enter the name and address of the							/0
17		e person who prepare	es the orga	anzation 5 gan	ing/special events t			
	Name							
	Address							
15a	Does the organization have a cont	tract with a third part	y from who	om the organiz	ation receives gamir	ig revenue?	Yes	No No
I	If "Yes," enter the amount of gami	ing revenue received	by the org	anization	\$	and the amount		
	of gaming revenue retained by the	third party \$						
(If "Yes," enter name and address	of the third party:						
	Name							
	Address							
16	Gaming manager information:							
	Name							
	Gaming manager compensation \$							
	Description of services provided							
	Director/officer	Employee	Г		nt contractor			
					IL CONTRACTOR			
17	Mandatan, distributions:							
	Mandatory distributions:	etata law ta maka ak	oritable di	atributiona fra	n the coming proces	ada ta		
č	Is the organization required under						Vee	
	retain the state gaming license?							
	 Enter the amount of distributions r organization's own exempt activiti 	-		instributed to d	iner exempt organiz	ations of spent in the		
Pa	rt IV Supplemental Inform			ions required b	ov Part L line 2b. coli	umns (iiii) and (v): and Par	t III lines 9	9b 10b
	15b, 15c, 16, and 17b, as						c iii, iirioo o, i	55, 105,
			ind o unif ut					
SC	HEDULE G, PART I,	LINE 2B, L	IST O	F TEN H	IGHEST PAII) FUNDRAISERS	5:	
	, , ,							
(1) NAME OF FUNDRAIS	SER: DOUGLA	S SHA	W				
(1) ADDRESS OF FUNDE	AISER:						
17	17 PARK STREET SUI	<u>(TE 300, NA</u>	PERVI	LLE, IL	60563			
_		<i>.</i> .						
PA	RT I, LINE 2B, COI	JUMN (V):						
	-							
чĽН	E AMOUNT SHOWN ON	SCHEDULE G	. PAR'	т. LTI	NE ZB. COLT	JMN (V) REPRE	SENTS	

THE GROSS AMOUNT PAID TO THE FUNDRAISER, DOUGLAS SHAW. THE AGREEMENT WITH

Schedule G (Form 990)	OPERATION FOOD SEARCH, INC.	43-1241854 Page 4
Part IV Supplemental Infor	rmation (continued)	
DOUGLAS SHAW PROVID	ES FOR THE PAYMENT OF FEES AND ALSO	O FOR THE PAYMENT OF
FUNDRAISING EXPENSE	S. HOWEVER, THE AGREEMENT DOES NOT	I DISTINGUISH
BETWEEN THE FEES FO	R PROFESSIONAL FUNDRAISING SERVICES	5 AND PAYMENT OF
FUNDRAISING EXPENSE	S, THUS, THE GROSS AMOUNT PAID IS H	REPORTED. FEES ARE
FOR A DIRECT MAIL P	ROGRAM. FEES PAID BY THE ORGANIZAT	FION TO DOUGLAS SHAW
ARE NOT CONTINGENT	UPON REVENUE FROM THE MAILINGS BUT	ARE BASED ON A RATE
PER PIECE MAILED.		

SCHEDULE I		G	ants and Oth	er Assistan	ce to Orgar	nizations.		OMB No. 1545-0047
(Form 990)		Go	vernments, an ete if the organization	d Individual	s in the Ŭn	ited States		2023
Department of the Treasury		Compr		Attach to Form				Open to Public
Internal Revenue Service			Go to www.irs	.gov/Form990 for		ation.		Inspection
Name of the organization	on			-				Employer identification number
-	OPERATION	FOOD SEA	RCH, INC.					43-1241854
Part I General In	formation on Grants a	nd Assistance						
•	ation maintain records t ward the grants or assis		•		• • •		stance, and the selection	
	IV the organization's pro	cedures for monite	oring the use of grant	funds in the United	States.			
	d Other Assistance to I nat received more than \$					ganization answered "Y	′es" on Form 990, Part	IV, line 21, for any
1 (a) Name and ad	Idress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
OVER 170 AGENCIES	- DETAIL					EST RETAIL OR	FOOD AND HOUSEHOLD	
AVAILABLE UPON RE	QUEST		501(C)(3)	0.	29,951,964.	FMV	ITEMS	FOOD DISTRIBUTION PROGRA

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

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

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

Schedule I (Form 990) 2023

43-1241854

Page 2

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

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

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

PART I, LINE 2:

OPERATION FOOD SEARCH REQUIRES ALL AGENCIES TO MAINTAIN A 501(C)(3) STATUS

AND MEET OTHER QUALIFICATION STANDARDS. EACH AGENCY IS MONITORED ON AN

ONGOING BASIS TO ENSURE COMPLIANCE WITH THE PROGRAM REQUIREMENTS. RECORDS

ARE KEPT FOR EACH AGENCY ON AMOUNT OF GRANTED PRODUCT RECEIVED AND

COMPLIANCE WITH PROGRAM REQUIREMENTS.

SC	HEDULE J	Compensation Information	I	OMB No. 1	545-004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	ດງ	,
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20	ZJ)
Depa	tment of the Treasury	Attach to Form 990.		Open to		
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nam	e of the organization		Employer ic			nber
De		OPERATION FOOD SEARCH, INC.	43-1	24185	4	
Ра	rt I Question	s Regarding Compensation				
					Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c					
	Travel for com					
		ation and gross-up payments Health or social club dues or initiation fee				
		pending account Personal services (such as maid, chauffer	ir, chei)			
h	If any of the bayes	on line 1a are checked, did the organization follow a written policy regarding payment or				
b		rovision of all of the expenses described above? If "No," complete Part III to explain		1b		
2		require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
2		rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
	trustees, and onice			2		
3	Indicate which if ar	y, of the following the organization used to establish the compensation of the organization's	2			
Ŭ		ctor. Check all that apply. Do not check any boxes for methods used by a related organization of the organ				
		ation of the CEO/Executive Director, but explain in Part III.	01110			
	X Compensation					
		ompensation consultant X Compensation survey or study				
	X Form 990 of o		ommittee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re					
а	-	e payment or change-of-control payment?		4a		X
b		eive payment from a supplemental nonqualified retirement plan?				X
с	-	eive payment from an equity-based compensation arrangement?				X
		es 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatic	n			
	contingent on the re	evenues of:				
а	The organization?			5a		X
b	Any related organiz	ation?		5b		X
		r 5b, describe in Part III.				
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatic	n			
	contingent on the n	et earnings of:				
а	The organization?			6 a		X
		ation?				X
		r 6b, describe in Part III.				
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
	not described on lir	es 5 and 6? If "Yes," describe in Part III		7		X
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th	ıe			
				8		X
9		d the organization also follow the rebuttable presumption procedure described in				
		53.4958-6(c)?				<u> </u>
For	Paperwork Reducti	on Act Notice, see the Instructions for Form 990.	Schede	ule J (Forn	n 990)	2023

Schedule J (Form 990) 2023

43-1241854

Page 2

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

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

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

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) KRISTEN WILD	(i)	179,100.	28,000.	0.	8,274.	6,726.	222,100.	17.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)					1		

Part III Supplemental Information

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

Schedule J (Form 990) 2023

Department of the Treasury Internal Revenue Service

(Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Inspection

23

20

Employer identification number

43-1241854

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 2	29 or	30
Attach to Form 990.		

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

Name of the organization

SCHEDULE M

OPERATION FOOD SEARCH, INC.

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu			s
1	Art - Works of art							
2	Art - Historical treasures							
2								
	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property	v	10	240 010				
9	Securities - Publicly traded	X	18	549,019.	FAIR VALUE			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory	Х	98	29,690,918.	FAIR VALUE			
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (SOLAR PANELS)	Х	1	11,191.	FAIR VALUE			
26	Other ()							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organiz	ation during	the tax vear for co	ontributions				
	for which the organization completed Form 828		•					
		-,,-	3				Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part L lines 1 throug	h 28_that it			
000	must hold for at least 3 years from the date of t							
	exempt purposes for the entire holding period?			•		30a		x
h	If "Yes," describe the arrangement in Part II.					000		
31	Does the organization have a gift acceptance p	olicy that re	auires the review o	of any nonstandard contribut	ions?	31	x	
	Does the organization have a gift acceptance p							
JZd	•		-			32a		x
۲						520		
	If "Yes," describe in Part II.	alumn (a) fa	rotupo of propert	for which column (a) is the	lead			
33	If the organization didn't report an amount in co	50 (C) 10	a type of property	nor which column (a) is chec	keu,			
	describe in Part II.							

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

Schedule M (Form 990) 2023

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

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

INC.



43-1241854

FORM 990, ITEM K, OTHER FORM OF ORGANIZATION:

OPERATION FOOD SEARCH,

NON-PROFIT

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

A HUNGER-FREE TOMORROW.

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

LINE 11A EXPLANATION - THE PRESIDENT & CEO WILL EMAIL A DRAFT OF THE FORM

990 TO THE MEMBERS OF THE FINANCE COMMITTEE. THESE MEMBERS ARE RESPONSIBLE

FOR REVIEWING THE RETURN AND NOTIFYING THE PRESIDENT & CEO OF THEIR

APPROVAL PRIOR TO THE ORGANIZATION FILING FORM 990. A COPY OF THE FORM 990

IS EMAILED TO THE ENTIRE BOARD PRIOR TO FILING.

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

THE ORGANIZATION'S OFFICERS, DIRECTORS AND EMPLOYEES ARE REQUIRED TO DISCLOSE AT LEAST ONCE ANNUALLY THEIR BUSINESS INTERESTS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST. IN ADDITION, THE ORGANIZATION'S OFFICERS, DIRECTORS AND EMPLOYEES ARE REQUIRED TO DISCLOSE ANNUALLY IF THEY HAVE BENEFITTED FINANCIALLY FROM A DECISION HE OR SHE HAS OR COULD MAKE INCLUDING INDIRECT BENEFITS TO FAMILY MEMBERS. A CONFLICT OF INTEREST DISCLOSURE FORM IS DISTRIBUTED ANNUALLY TO THE ORGANIZATION'S OFFICERS, DIRECTORS AND EMPLOYEES. EACH PERSON IS ASKED TO ACKNOWLEDGE RECEIPT OF THE CONFLICT OF INTEREST POLICY AND DISCLOSURE FORM, ACKNOWLEDGE THAT HE OR SHE UNDERSTANDS THE POLICY AND THAT HE OR SHE AGREES TO COMPLY WITH THE POLICY. IN ADDITION, DIRECTORS, OFFICERS AND EMPLOYEES MUST CERTIFY THAT HE OR SHE HAS NO ACTUAL OR POSSIBLE CONFLICT OF INTEREST OR DESCRIBE ANY

Schedule O (Form 990) 2023	Page 2
Name of the organization OPERATION FOOD SEARCH, INC.	Employer identification number 43-1241854
RELATIONSHIPS, TRANSACTIONS OR OTHER CIRCUMSTANCES THAT CO	ULD RESULT IN A
CONFLICT OF INTEREST. ANY REPORTED CONFLICTS OF INTEREST OF	R POTENTIAL
CONFLICTS ARE REVIEWED BY THE BOARD OF DIRECTORS. THE ORGAN	NIZATION DOES NOT
ALLOW FOR ANY SUBSTANTIVE CONFLICTS OF INTEREST.	
FORM 990, PART VI, SECTION B, LINE 15A:	
THE GOVERNANCE COMMITTEE OF OPERATION FOOD SEARCH ANNUALLY	
COMPENSATION OF THE PRESIDENT & CEO TO DETERMINE SUITABLE (COMPENSATION OF THE PRESIDENT & CEO IS DETERMINED BASED UP(
COMPARABILITY DATA IS USED TO DETERMINE FAIRNESS AND EQUAB	ILITY. THE
PROCESS FOR DETERMINATION OF COMPENSATION INCLUDES A REVIEW	W OF
COMPARABILITY DATA INCLUDING COMPENSATION COMPARATIVES MAD	E WITH SIMILAR
NONPROFIT ORGANIZATIONS SUCH AS FOOD BANKS AND OTHER HUNGE	R RELIEF
ORGANZITIONS, AS WELL AS COMPENSATION SURVEYS AND REVIEW OF	F 990S OF SIMILAR
ORGANIZATIONS. THE SALARY RECOMMENDATIONS OF THE GOVERNANC	E COMMITTEE ARE
SUBMITTED TO THE CHAIRMAN OF THE BOARD OF DIRECTORS FOR AP	PROVAL. THE
GOVERNANCE COMMITTEE WILL RETAIN DOCUMENTATION OF THE DELI	BERATION AND
FINAL DECISION.	

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

AVAILABLE BY MAIL, E-MAIL, OR PHONE.

FORM 990, PART XII, 2C

THE ORGANIZATION HAS NOT CHANGED ITS PROCESSES DURING THE CURRENT YEAR.

SCHEDULE M, PART 1, LINE 19B

THE AMOUNT SHOWN ON LINE 19B REPRESENTS THE APPROXIMATE NUMBER OF

Schedule O (Form 990) 2023	Page 2
Name of the organization OPERATION FOOD SEARCH, INC.	Employer identification number 43-1241854
DONORS RATHER THAN THE NUMBER OF CONTRIBUTIONS. VARIOUS CO	NTRIBUTORS
MAKE REGULAR DONATIONS THROUGHOUT THE YEAR AND ONLY TOTAL	CONTRIBUTION
AMOUNTS BY CONTRIBUTOR ARE TRACKED BY THE ORGANIZATION.	
SCHEDULE G, PART 1, LINE 2B, COLUMN (V)	
THE AMOUNT SHOWN ON LINE 2B, COLUMN (V) REPRESENTS THE GRO	SS AMOUNT
PAID TO THE FUNDRAISER, DOUGLAS SHAW. THE AGREEMENT WITH D	OUGLAS SHAW
PROVIDES FOR THE PAYMENT OF FEES AND ALSO FOR THE PAYMENT	OF
FUNDRAISING EXPENSES. HOWEVER, THE AGREEMENT DOES NOT DIST	INGUISH
BETWEEN THE FEES FOR PROFESSIONAL FUNDRAISING SERVICES AND	PAYMENT OF

FUNDRAISING EXPENSES, THUS, THE GROSS AMOUNT PAID IS REPORTED.

SCHEDULE R

(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

OMB No. 1545-0047

2023 Open to Public Inspection

Employer identification number 43 - 1241854

Department of the Treasury Internal Revenue Service

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

Name of the organization

OPERATION FOOD SEARCH, INC.

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		3) o12(b)(13) olled ity?
				501(c)(3))		Yes	No
OPERATION FOOD SEARCH SUPPORT ORGANIZATION,							
INC 99-0765246, 1644 LOTSIE BLVD, ST.					OPERATION FOOD		
LOUIS, MO 63132	HUNGER RELIEF ORGANIZATION	MISSOURI	501(C)(3)	LINE 12A, I	SEARCH, INC.	Х	
	-						
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	-						

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

Schedule R (Form 990) 2023

Schedule R (Form 990) 2023 OPERATION FOOD SEARCH, INC.

43-1241854 Page 2

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?		Genera manag partne	l or Percentage ^{ing} ownership	
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10	
	1											
	1		1			1	1	1	1			

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(I contr ent	tion b)(13) rolled tity?
		country)		0				Yes	No

Schedule R (Form 990) 2023 OPERATION FOOD SEARCH, INC.

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

lote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s N
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			
b Gift, grant, or capital contribution to related organization(s)		X	
c Gift, grant, or capital contribution from related organization(s)		X	
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		+
h Purchase of assets from related organization(s)			
i Exchange of assets with related organization(s)			
j Lease of facilities, equipment, or other assets to related organization(s)			+
k Lease of facilities, equipment, or other assets from related organization(s)	<u>1k</u>		+
Performance of services or membership or fundraising solicitations for related organization(s)			
m Performance of services or membership or fundraising solicitations by related organization(s)			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
Sharing of paid employees with related organization(s)	_		+
Reimbursement paid to related organization(s) for expenses			
Reimbursement paid by related organization(s) for expenses			
Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)	1s		

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
OPERATION FOOD SEARCH SUPPORT			
(1) ORGANIZATION, INC.	B	7,995,900.	CASH
OPERATION FOOD SEARCH SUPPORT			
(2) ORGANIZATION, INC.	С	31,339.	CASH
<u>(3)</u>			
(4)			
<u>(5)</u>			
<u>(6)</u>			

Schedule R (Form 990) 2023 OPERATION FOOD SEARCH, INC.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(-)	(1-)	(-)	(-1)	10		(4)	()		- \	(1)	(1)	(1.)
(a)	(b)	(c)	(d)	(e) Are a	i ll	(f)	(g)		h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	edominant income partners sec. Share of related, unrelated, 501(c)(3) total		end-of-year	Share of Disproportionate allocations		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin		
of entity		country)	excluded from tax under	orgs.		income			tions?	of Schedule K-1	partner?	
		country)	sections 512-514)	Yes I	No	Income	255615	Yes	No	(Form 1065)	Yes No	<u>'</u>
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Schedule R (Form 990) 2023

OPERATION FOOD SEARCH, INC. 43-1241854 Page 5

Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.

PART V, LINE 2(1)

FUNDS TRANSFERRED TO OPERATION FOOD SEARCH SUPPORT ORGANIZATION, INC.

PART V, LINE 2(2)

INTEREST INCOME TRANSFERRED FROM OPERATION FOOD SEACH SUPPORT

ORGANIZATION, INC.

CARRYOVER DATA TO 2024

Name OPERATION FOOD SEARCH, INC.	Employer Identification	on Number 5 4
Based on the information provided with this return, the following are possible carryover amounts to next year.	ł	
FEDERAL PRE-2018 NET OPERATING LOSS		791.
	·	

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		I POSITIVE ACE			DETAIL C	ARRYOVER SCH	IEDULE				
Section	382 Annual Limitation	1	Section 382 Carryover								
Year Origi- nated	Carryover Amount	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
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