PUBLIC DISCLOSURE COPY Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

ΑI	For the	pprox 2022 calendar year, or tax year beginning $$ JUL $1,$ 2022 $$ and e	ending J	UN 30, 2023				
	Check if applicable	C Name of organization		D Employer identifie	cation number			
	Addres							
	Name change	Doing business as		64-0676325				
	Initial return Final return/	Number and street (or P.O. box if mail is not delivered to street address) POST OFFICE BOX 411	E Telephone number 601-353-7286					
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	62,337,849.			
	Ameno	JACKSON, MS 39203-0411		H(a) Is this a group return				
	Applic tion pendir	F Name and address of principal officer: Dr. Charles h. bead.	Y, JR	for subordinates H(b) Are all subordinates in				
T -	Гах-ехе	empt status: $X = 501(c)(3) = 501(c)(0)$ (insert no.) 4947(a)(1) or	r 527	1	list. See instructions			
	Websit			H(c) Group exemptio				
	orm of	organization: X Corporation Trust Association Other Summary	L Year	of formation: 1983 N	1 State of legal domicile: MS			
_	1	Briefly describe the organization's mission or most significant activities: TO RE	LIEVE	POVERTY-REI	LATED			
Governance		HUNGER BY DISTRIBUTING DONATED AND PURCHAS						
rna	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass				
Š	3			3	28			
න න	1	Number of independent voting members of the governing body (Part VI, line 1b)			28			
Activities &		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			46			
ΞĔ		Total number of volunteers (estimate if necessary)			1003			
Ą		Total unrelated business revenue from Part VIII, column (C), line 12			0.			
	l D	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>	7b	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		63,551,280.	42,242,085.			
Jue	9	. (5.1) (11.1)		150,956.	183,358.			
Revenue	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-11,267.	109,190.			
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		23,798.	7,864.			
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		63,714,767.	42,542,497.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		60,754,409.	36,074,941.			
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
ý	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,631,137.	2,371,611.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		524,261.	0.			
x De	. b	Total fundraising expenses (Part IX, column (D), line 25) 1,278,82	6.					
Ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,514,764.	3,906,601.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		67,424,571.	42,353,153.			
	19	Revenue less expenses. Subtract line 18 from line 12		-3,709,804.	189,344.			
Net Assets or				ginning of Current Year	End of Year			
Sset	20	Total assets (Part X, line 16)		19,534,718. 659,729.	20,016,214. 382,438.			
let A	21 22	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		18,874,989.	19,633,776.			
Pa	art II	Signature Block		10,074,000	15,055,170			
		Ities of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	nts, and to the best of my	knowledge and belief, it is			
		t, and complete. Declaration of preparer (other than officer) is based on all information of whic			,			
	,							
Sig	n	Signature of officer		Date				
Her		DR. CHARLES H. BEADY, JR., CEO						
Type or print name and title								
Paid	i	Print/Type preparer's name CHARLES R LINDSAY CPA Preparer's signature		Oate Check Check 5/06/24 Self-employ	PTIN P00294610			
	parer	Firm's name MATTHEWS CUTRER & LINDSAY, PA	<u> </u>		4-0897081			
-	Only	Firm's address 1020 HIGHLAND COLONY PKWY, 500						
	. 41 25	RIDGELAND, MS 39157		Phone no. 6 U	1-898-8875			
May	y the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No			

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$

Fig. 1. Total program service expenses 39,813,517.

Form 990 (2022) MISSISSIPPI FOOD NETWORK 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	X	_
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		3,7
	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	_		3,7
_	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	_		, v
_	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			x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
_	Schedule D, Part III	8		_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		X
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44.	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	21	
D		11b		x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
ч	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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		X
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 (2022) MISSISSIPPI FOOD NETWORK 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			1
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			1
	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		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
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		
	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		х
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			1
	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%			1
	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,			1
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			1
	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
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	00-		x
20	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29	Х	
29 30	Did the organization receive more trial \$25,000 in non-cash contributions? If "yes," complete schedule in	29	21	<u> </u>
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
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		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			77
	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?		Х	
Pai	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	1
	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .		
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 33			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	l .

Form 990 (2022) MISSISSIPPI FOOD NETWORK INC

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

			Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 46	_	37	
_	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	37
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
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)?	4a		
D	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
52		5a		х
		5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	00		
	any contributions that were not tax deductible as charitable contributions?	6a		х
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 payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a b	Did the approximation makes a distribution to a decay decay decay as yelloted access?	9b		
10	Section 501(c)(7) organizations. Enter:	35		
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 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	-		
	Enter the amount of reserves on hand	44-		Х
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.	13		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.	10		
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.			

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Form 990 (2022) MISSISSIPPI FOOD NETWORK INC 64-0676325 Page Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
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			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer director tructon or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3		3		Х
4		4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			X
6	Did the organization have members or stockholders?	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_		37
	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	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be 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	Х	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	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	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a	Х	
		15b	X	
b	• • • • • • • • • • • • • • • • • • • •	130	21	
46-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
Ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		Х
	taxable entity during the year?	16a		Λ
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			
<u></u>	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 MS			
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)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 601-353-7286			
	POST OFFICE BOX 411, JACKSON, MS 39205-0411			

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

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

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

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

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

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

(A) Name and title	(B) Average hours per	(do box		Posi heck i	ition	than o	one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) CHARLES H. BEADY, JR. CHIEF EXECUTIVE OFFICER	40.00			х				116,745.	0.	14,698.
(2) ANDREW WILSON	1.00							22077231		
BOARD MEMBER	1,00	х						0.	0.	0.
(3) BILAL QIZILBASH	1.00									
BOARD MEMBER		Х						0.	0.	0.
(4) CAROLINE WRIGHT	1.00									
SECRETARY		Х		Х				0.	0.	0.
(5) CINDY BARRON	1.00									
MEMBER AT LARGE		Х		Х				0.	0.	0.
(6) DONNELL LEWIS	1.00									
TREASURER		Х		Х				0.	0.	0.
(7) FAITH HADLEY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) GARY KEELER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) HOLLY LANGE	1.00	1								_
BOARD MEMBER		Х						0.	0.	0.
(10) JOSIE H. BIDWELL	1.00	l								
BOARD MEMBER	1 00	Х						0.	0.	0.
(11) KEITH YOUNG	1.00	ļ								
BOARD MEMBER	1 00	Х						0.	0.	0.
(12) KENT M BLOODWORTH	1.00	ļ								
BOARD MEMBER	1 00	Х						0.	0.	0.
(13) KRISTINA PHILLIPS	1.00	.,								•
BOARD MEMBER	1 00	Х						0.	0.	0.
(14) LARRY HOUCHINS	1.00	. ,							0	•
BOARD MEMBER	1 00	X						0.	0.	0.
(15) LAUREN ENGLE	1.00	Х						0.	0	0
BOARD MEMBER	1 00	Λ				_		0.	0.	0.
(16) LEANNA RANGE-NORWOOD BOARD MEMBER	1.00	Х						0.	0.	0.
(17) MATT WILLIAMSON	1.00	Δ	\vdash					0.	0.	U •
BOARD MEMBER	1.00	Х						0.	0.	0.
DOING MINDIN	<u> </u>	Λ		l			l	0.	U •	Form 990 (2022)

232007 12-13-22 Form **990** (2022)

Part VII Section A. Officers, Directors, Trus	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)			(0	C)			(D)	(E)	(F)	
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other				
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations	
(18) MICHAEL KINARD	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(19) MICHAEL WALKER	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(20) MOLLY M. MACWADE	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(21) PHILLIP H LUCAS	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(22) PIETER TEEUWISSEN	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(23) RON TAYLOR	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(24) RUSSELL MORRISON	1.00										
IMMEDIATE PAST CHAIRMAN		Х		Х				0.	0.	0.	
(25) RYAN UPSHAW	1.00										
BOARD MEMBER		Х						0.	0.	0.	
(26) TED KENDALL IV	1.00										
VICE CHAIRMAN		Х		Х				0.	0.	0.	
1b Subtotal								116,745.	0.	14,698.	
c Total from continuation sheets to Part VI	l, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)								116,745.	0.	14,698.	

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation	
, ,	DIRECT MAIL SOLICITATIONS 572		

Total number of independent contractors (including but not limited to those listed above) who received more than

1

Form 990 MISSISSII	SET ROOF) N	ΕT	WO	KK	. т	NC		64-067	6325
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) Name and title	(B) Average hours			(C Pos	C) ition			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) TRISHA RICHARDSON CHAIRMAN	1.00	Х		Х				0.	0.	0.
(28) VAUGHN GRESHAM	1.00	х						0.	0.	
BOARD MEMBER	1 00	Λ						0.	0.	0.
(29) WORTH THOMAS BOARD MEMBER	1.00	х						0.	0.	0.
	l	<u> </u>			<u> </u>	<u> </u>				
Total to Part VII, Section A, line 1c										

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		Check if Schedule O contains a resp	onse or note to any I	ine in this Part VIII			
		errore a roop		(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
- W 10	1 2	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	h	Pederated campaigns 1a Membership dues 1b					
جَ جَ		Fundraising events 1c	10,680				
Ę,Ę	٥		20,000	'			
يَّةِ يَّق	0	•	3,852,699				
Sir	4	Government grants (contributions) All other contributions, gifts, grants, and	3,032,033	4			
ē Ę	ı		38,378,706				
ĕ₽	_	similar amounts not included above 1f					
<u> </u>	9	Noncash contributions included in lines 1a-1f	\$ 33,000,303	42,242,085.			
<u>O</u> 8	n	Total. Add lines 1a-1f	Business Code				
	•	FOOD PURCHASES REVENUE	900999	139,978.	139,978.		
<u>i</u> ë	2 a		900999				
e er	b			43,380.	43,380.		
n S	С						
Program Service Revenue	d						
or_	е						
<u>п</u>		All other program service revenue		102 250			
		Total. Add lines 2a-2f		183,358.			
	3	Investment income (including dividends,		207 691			207 601
	_	other similar amounts)		307,681.			307,681.
	4	Income from investment of tax-exempt b	•				
	5	Royalties(i) Re					
			al (ii) Personal	_			
		Gross rents 6a		_			
		Less: rental expenses 6b					
		Rental income or (loss)					
		Net rental income or (loss)	(:) (1)				
	7 a	Gross amount from sales of (i) Secur	` ` `				
		assets other than inventory 7a 19,596,	861.				
	b	Less: cost or other basis					
her Revenue		and sales expenses					
š		Gain or (loss)		100 101			100 101
æ		Net gain or (loss)		-198,491.			-198,491.
	8 a	Gross income from fundraising events (not					
δ		including \$ of					
		contributions reported on line 1c). See					
	_	Part IV, line 18		-			
		Less: direct expenses					
		Net income or (loss) from fundraising eve		0.			
	9 a	Gross income from gaming activities. Se					
	_	Part IV, line 19					
		Less: direct expenses					
		Net income or (loss) from gaming activition	es				
	10 a	Gross sales of inventory, less returns	10a				
		and allowances					
		Less: cost of goods sold	•				
	С	Net income or (loss) from sales of inventor					
2		MIGGELL ANEGUS DEVENO	Business Code		E 061		
eor Pe	11 a	MISCELLANEOUS REVENUE	900099	7,864.	7,864.		
Miscellaneous Revenue	b						
3ee	С						
Σ	d	All other revenue		7.064			
	е	Total. Add lines 11a-11d		7,864.	191 222.	0.	109 190.

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Part IX | Statement of Functional Expenses

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

Secti	ion 501(c)(3) and 501(c)(4) organizations must comp			прієте соіитп (А).	
	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	26 674 544			
	and domestic governments. See Part IV, line 21	36,074,941.	36,074,941.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	118,895.	86,603.	13,923.	18,369.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,662,062.	1,210,646.	194,627.	256,789.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	458,624.	334,062.	53,705.	70,857.
10	Payroll taxes	132,030.	96,171.	15,461.	20,398.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
	Lobbying				
е	Professional fundraising services. See Part IV, line 17	_			
f	Investment management fees	68,057.		68,057.	
g	Other. (If line 11g amount exceeds 10% of line 25,	ا			
	column (A), amount, list line 11g expenses on Sch O.)	652,843.	61,380.	591,463.	
12	Advertising and promotion	100 = 00			
13	Office expenses	193,726.	50,583.	135,558.	7,585. 12,970.
14	Information technology	83,951.	61,150.	9,831.	12,970.
15	Royalties				
16	Occupancy	126,699.	92,288.	14,836.	19,575.
17	Travel	99,980.	74,985.	24,995.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	444 500	202 554	F0 054	60 655
22	Depreciation, depletion, and amortization	444,500.	323,774.	52,051.	68,675.
23	Insurance	82,293.	59,942.	9,637.	12,714.
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.)	000 :==	054 000	4 =	22 122
а	PROGRAM EXPENSES	892,477.	851,820.	17,529.	23,128.
b	PUBLIC SOLICITATION	767,766.	105 150		767,766.
С	VEHICLE, FREIGHT AND EQ	435,172.	435,172.	F0 105	
d	BAD DEBT EXPENSE	59,137.		59,137.	
е	All other expenses	40 252 452	20 012 515	1 000 010	1 050 000
25	Total functional expenses. Add lines 1 through 24e	42,353,153.	39,813,517.	1,260,810.	1,278,826.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2022)

Form 990 (2022)
Part X Balance Sheet

Pai	τx	Balance Sneet				
		Check if Schedule O contains a response or note to any line in	this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	6,378,021.	1	4,036,239.	
	2	Savings and temporary cash investments	878,769.	2	879,518.	
	3			649,120.	3	631,750.
	4	Accounts receivable, net		166,240.	4	49,152.
	5	Loans and other receivables from any current or former officer				
		trustee, key employee, creator or founder, substantial contribu				
					5	
	6	Loans and other receivables from other disqualified persons (a	s defined			
		under section 4958(f)(1)), and persons described in section 49	58(c)(3)(B)		6	
ø	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		1,261,055.	8	2,710,784.
As	9	Prepaid expenses and deferred charges		62,072.	9	64,297.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a 6	,249,456.			
	b	basis. Complete Part VI of Schedule D 10a CLess: accumulated depreciation 10b 3	3,578,015.	2,918,390.	10c	2,671,441. 8,973,033.
	11	Investments - publicly traded securities		7,215,000.	11	8,973,033.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11	6,051.	15		
	16	Total assets. Add lines 1 through 15 (must equal line 33)		19,534,718.	16	20,016,214.
	17	Accounts payable and accrued expenses	570,845.	17	322,703.	
	18				18	
	19	Deferred revenue		88,884.	19	59,735.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Sche	edule D		21	
Se	22	Loans and other payables to any current or former officer, dire				
Liabilities		trustee, key employee, creator or founder, substantial contribu	itor, or 35%			
iab		controlled entity or family member of any of these persons			22	
_	23	Secured mortgages and notes payable to unrelated third parti	·····		23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to relat				
		parties, and other liabilities not included on lines 17-24). Comp	olete Part X			
		of Schedule D		CEO 720	25	202 420
	26	Total liabilities. Add lines 17 through 25	77	659,729.	26	382,438.
S		,	X			
၁င		and complete lines 27, 28, 32, and 33.		16 057 014		15 262 640
alaı	27	Net assets without donor restrictions		16,057,814. 2,817,175.	27	15,362,640. 4,271,136.
ă	28	Net assets with donor restrictions		2,017,173.	28	4,2/1,130.
Ĕ		Organizations that do not follow FASB ASC 958, check her	e 🗀			
P		and complete lines 29 through 33.				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds			29	
SSE	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
λĄ	31	Retained earnings, endowment, accumulated income, or other		18,874,989.	31	19,633,776.
ž	32	Total lich litting and not assets (fund halances		19,534,718.	32	
	33	Total liabilities and net assets/fund balances		17,334,110.	33	20,016,214.

Form **990** (2022)

Par	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		2,54		
2	4.0					
3	Revenue less expenses. Subtract line 2 from line 1	3			9,3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	18	8,87	4,9	89.
5	Net unrealized gains (losses) on investments	5		56	9,4	43.
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	19	9,63	3,7	76.
Par	t 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	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	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					
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho					
За	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 required		dit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	Х	

Form **990** (2022)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Name of the organization

MISSISSIPPI FOOD NETWORK INC

Employer identification number

OMB No. 1545-0047

64-0676325 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	25293239.	48904282.	77252459.	63565933.	42242085.	257257998
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	25293239.	48904282.	77252459.	63565933.	42242085.	257257998
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						257257998
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	25293239.	48904282.	77252459.	63565933.	42242085.	<u> 257257998</u>
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	16,095.	11,625.	11,525.	40,903.	307,681.	387,829.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						<u> 257645827</u>
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	490,878.
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax y	year as a section 5	01(c)(3)	
	organization, check this box and stop						<u></u>
	tion C. Computation of Publi					т т	
	Public support percentage for 2022 (I					14	99.85 %
	Public support percentage from 2021					15	99.96 %
16a	33 1/3% support test - 2022. If the				14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies		•				
b	33 1/3% support test - 2021. If the						
	and stop here. The organization qual						
1/a	10% -facts-and-circumstances test						
	and if the organization meets the fact			=	· ·		
	meets the facts-and-circumstances to	-		*		170 and line 15 in	
O	10% -facts-and-circumstances test						10% Or
	more, and if the organization meets the						
10	organization meets the facts-and-circ		-		•		
10	Private foundation. If the organization	ni did fiot check a l	DUX UITIIITE TO, TO	a, 100, 17a, 01 17b	o, check this box a	na see mstructions	>

Schedule A (Form 990) 2022 MISSISSIPPI FOOD NETWORK INC Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sed	ction A. Public Support	slow, picase comp	oicte i art ii.j				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	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						
	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.)						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(a) 2010	(6) 2019	(6) 2020	(4) 2021	(6) 2022	(i) iotai
	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						
	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	J		,	•	() ()	· —
	check this box and stop here						
	ction C. Computation of Publi					 	
	Public support percentage for 2022 (li	, ,,,	•	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves			. 10 1 (0)		14-1	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	% 7 in
198	33 1/3% support tests - 2022. If the						
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

Schedule A (Form 990) 2022 MISS Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
За		
3b		
- CE		
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4-		
4a		
4b		
4c		
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Par	rt IV Supporting Organizations (continued)			
			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		
	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			
202	<u>detail in</u> Part VI. Etion B. Type I Supporting Organizations	11c		
Sec	Lion 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 more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office			
	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 support			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	1		
2				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	supervised, or controlled the supporting organizations			<u> </u>
	7 11 3 3		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		100	110
•	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		
Sec	tion 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		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc	ctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see instruction		Γ
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а				
	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.	2a		
b	, ,			
	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	Oh		
2	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а		3a		
h	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	Sa		
	= 1.5 5. gaEastor oxorolog a gasetarista degree or allogitor over the policies, programs, and activities of facili			

of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

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

Schedule A (Form 990) 2022

instructions).

Par	't V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	ınizations _{(contint}	ued)	
Secti	ion D - Distributions		·		Current Year
1	Amounts paid to supported organizations to accomplish exe		1		
2	Amounts paid to perform activity that directly furthers exem				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizations	S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - prior IRS approval - prior IRS approval required - prior IRS approval - prior -	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	,	(i)	(ii)		(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	าร	Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
<u>a</u>	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i_	Carryover from 2017 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				

Schedule A (Form 990) 2022

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

MISSISSIPPI FOOD NETWORK INC

Employer identification number 64-0676325

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin.		imilar Funds o	or Accoun	ts. Complete if the
	organization answered Tee Sitt offit 600, Fart IV, IIII	(a) Donor advise	d funds	(b) Fun	ds and other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in v		ld in donor advise	d funds	
	are the organization's property, subject to the organization's	exclusive legal control?			Yes No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any	y other purpose c	onferring	
	impermissible private benefit?				
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes	s" on Form 990, P	art IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	_		
	Preservation of land for public use (for example, recreated	tion or education)	Preservation of	a historically	important land area
	Protection of natural habitat		Preservation of	a certified his	storic structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribu	ition in the form o	of a conserva	
	day of the tax year.				Held at the End of the Tax Year
а	Total number of conservation easements			2a	
b					
С	Number of conservation easements on a certified historic stru			2c	
d	Number of conservation easements included in (c) acquired a				
	historic structure listed in the National Register			2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or to	erminated by the	organization	during the tax
	year				
4	Number of states where property subject to conservation eas				
5	Does the organization have a written policy regarding the per		ion, handling of		
	violations, and enforcement of the conservation easements it				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, an	a enforcing conse	ervation ease	ments during the year
7	Amount of avances incurred in manitaring increasing hand	lling of violations, and ant	iavaina aanaamiati		to duving the year
7	Amount of expenses incurred in monitoring, inspecting, hand	illing of violations, and em	ording conservati	on easemen	is during the year
8	Does each conservation easement reported on line 2(d) above	a satisfy the requirement	s of soction 170/h	\(A\(D\(i\	
0					Yes No
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation				
9	balance sheet, and include, if applicable, the text of the footn				
	organization's accounting for conservation easements.	lote to the organization's	ililailciai stateillei	ilis tilat desc	indes trie
Par	t III Organizations Maintaining Collections of	Art, Historical Trea	asures, or Oth	ner Simila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its reve	enue statement an	nd balance sh	neet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education,	or research in fur	therance of p	oublic
	service, provide in Part XIII the text of the footnote to its finan	ncial statements that desc	cribes these items	S	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue	statement and ba	alance sheet	works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furthe	erance of put	olic service,
	provide the following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1				\$
					\$
2	If the organization received or held works of art, historical trea			gain, provide)
	the following amounts required to be reported under FASB A			- • •	
а	Revenue included on Form 990, Part VIII, line 1				\$
b	Assets included in Form 990, Part X				\$

Par	rt III Organizations Maintaining C	Collections of Art, History	orical Treasures, o	r Other S	imilar Ass	ets (contin	ued)	
3								
	collection items (check all that apply):							
а	Public exhibition	d \square	Loan or exchange progra	am				
b	Scholarly research		Other					
С	Preservation for future generations							
4	Provide a description of the organization's c	ollections and explain how th	ev further the organization	n's exempt	purpose in P	art XIII.		
5	During the year, did the organization solicit	· ·	•	-				
	to be sold to raise funds rather than to be m	· ·	•			Yes	☐ No	
Par	rt IV Escrow and Custodial Arran							
	reported an amount on Form 990, Pa		3		,	,		
1a	Is the organization an agent, trustee, custod	ian or other intermediary for o	contributions or other ass	sets not incl	uded			
	on Form 990, Part X?					Yes	☐ No	
b	If "Yes," explain the arrangement in Part XIII							
	, ,	J				Amount		
С	Beginning balance				1c			
d	Additions during the year				1d			
e	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on F					Yes	No	
	If "Yes," explain the arrangement in Part XIII			-				
	rt V Endowment Funds. Complete							
	·		Prior year (c) Two year		Three years ba	ack (e) Four	years back	
1a	Beginning of year balance	, , , , ,	, , , ,	.,		1		
b	Contributions							
c	Net investment earnings, gains, and losses							
ď	Grants or scholarships							
٠ _	Other expenditures for facilities							
Ŭ								
f	Administrative expenses							
g								
2	Provide the estimated percentage of the cur		r column (a)) held as:					
a			g, column (a)) nolu as.					
b								
C								
C	The percentages on lines 2a, 2b, and 2c sho	-						
32	Are there endowment funds not in the posse		t are held and administer	ed for the				
Ja	organization by:	sssion of the organization tha	t are rield and administer	ed for the		Г	Yes No	
	(i) Unrelated organizations					3a(i)		
	(ii) Related organizations							
h	If "Yes" on line 3a(ii), are the related organizations							
4	Describe in Part XIII the intended uses of the					[30]	I	
	rt VI Land, Buildings, and Equipm		unus.					
	Complete if the organization answere		/ line 11a See Form 990	Part X line	10			
	Description of property	(a) Cost or other	(b) Cost or other	(c) Accu	I	(d) Book	· valuo	
	Description of property	basis (investment)	basis (other)	depre		(u) 600r	value .	
1-	Land	` ` `	147,898.	аорго		11/	7,898.	
	Land		1,435,479.	8.4	1,779.		3,700.	
	Buildings Leasehold improvements		1,220,665.		5,810.		1,855.	
			2,449,073.		6,161.		2,912.	
	Equipment		996,341.		4,265.		2,076.	
	Other		•	50	±,40J•		441.	

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 MISSISSIPPI	FOOD NETWORK	INC 6	4-0676325 Page
Part VII Investments - Other Securities.	Section Co. Deat IV lines		
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-vear market value
(1) Financial derivatives	(b) Book value	(e) metrica er variation: eest er e	ma or your marries value
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	F 000 B+ IV II	11d Oct Farm 000 Part V Page 15	
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	(h) Daala value
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
<u>(5)</u>			
<u>(6)</u> (7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	o 15)		
Part X Other Liabilities. Complete if the organization answered "Yes"			25
1. (a) Description of liability	on Form 990, Part IV, life	THE OF THE GET FORM 990, PARTA, IIITE 2	(b) Book value
(1) Federal income taxes			(-) - 2011 1010
(2)			
(3)			
(4)			
(5)			
(6)			1

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

(7) (8) (9)

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

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

entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

MISSISS	SIPPI FOOD NETWORK	INC			64-0676	325		
Part I Fundraising Activities required to complete this par	Complete if the organization answ t.	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not		
 1 Indicate whether the organization rais a X Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the 	e Solicita f Solicita g Specia or oral agreement with any individua cart VII) or entity in connection with position or entities (fundraisers) pursu	ation of ation of al fundra I (includ professi	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	X Yes			
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		have custody		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
RKD INC - 7130 SOUTH 29TH		Yes	No					
STREET, LINCOLN, NE 68516	DIRECT MAIL SOLICITATION	1.55	Х	1,205,543.	696,620.	508,923.		
Total				1,205,543.	696,620.	508,923.		
List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	utions	or has been notified	it is exempt from req	gistration		

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (event type) (event type) (total number) 1 Gross receipts 2 Less: Contributions **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses % Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Sch	nedule G (Form 990) 2022 MISSISSIPPI FOOD NETWORK INC 64-0	676	325	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	No
	Indicate the percentage of gaming activity conducted in:	1	1	
	The organization's facility	13a		<u>%</u>
	o An outside facility	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
k	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
D -	organization's own exempt activities during the tax year \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	t III, Iir	ies 9, 9	9b, 10b,
~ ~				
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS	:		
(I) NAME OF FUNDRAISER: RKD INC			
<u>(I</u>) ADDRESS OF FUNDRAISER: 7130 SOUTH 29TH STREET, LINCOLN, NE 6	851	6	

232083 10-27-22 Schedule G (Form 990) 2022

Schedule G	(Form 990)	MISSISSIPPI	FOOD	NETWORK	INC	64-0676325	Page 4
Part IV	(Form 990) Supplemental Infor	mation (continued)					

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

MISSISSIPPI FOOD NETWORK INC

Part I General Information on Grants and Assistance

Employer identification number
64-0676325

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
NATCHEZ COMMUNITY STEWPOT					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 298					THE BASIS OF		ELDERLY, HANDICAPPED,
NATCHEZ, MS 39121	64-0705915		0.	5,064.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
FIRST ASSEMBLY OF GOD CARE CT					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
2201 MILITARY ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBUS, MS 39705	64-0429438		0.	5,084.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WYNNDALE BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
11287 SPRINGRIDGE ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
TERRY, MS 39170	64-0687388		0.	5,086.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
BLESSING FOR ALL EMPOWERED BY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FAITH- GRENADA - 42 CHURCH STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
- GRENADA, MS 38901-9440	81-2603164		0.	5,096.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
BRINKLEY MIDDLE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3535 ALBERMARLE ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39213	64-6000505		0.	5,147.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
DURANT MISSIONARY BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 29					THE BASIS OF		ELDERLY, HANDICAPPED,
DURANT, MS 39063-0000	31-1698632		0.	5,187.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

•	Enter total number of section	501(c)(3) and government	organizations lie	sted in the line :	1 table

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

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
WE CARE COMMUNITY SERVICES					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
909 WALNUT STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
VICKSBURG, MS 39181	51-0188737		0.	5,219.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
PINELAKE CARE CTRCLINTON					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
201 CLINTON CENTER DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,		
CLINTON, MS 39056	64-0538192		0.	5,258.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
WORD OF CHRIST MINISTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
3051 J.R. LYNCH STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39209	30-0195335		0.	5,332.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
HELPING HANDS OF HUMPHREYS CO.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
16343 US HWY 49, SUITE E					THE BASIS OF		ELDERLY, HANDICAPPED,		
BELZONI, MS 39038-0000	64-0792268		0.	5,340.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
CHINA LEE CHRIST MINISTRY FP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
2726 RIVER ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,		
SILVER CREEK, MS 39663	64-0699817		0.	5,350.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
·				·	FOOD INVENTORY		TO PROVIDE, WITHOUT		
POWELL MIDDLE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
3655 LIVINGSTON ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39213	64-6000505		0.	5,356.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
NETTLETON FOOD PANTRY (FAITH)					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
PO BOX 314					THE BASIS OF		ELDERLY, HANDICAPPED,		
NETTLETON, MS 38858	64-0914186		0.	5.422.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
ST. JOSEPH'S FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
102 DOGWOOD DR.					THE BASIS OF		ELDERLY, HANDICAPPED,		
STARKVILLE, MS 39759	86-1152276		0.	5 440.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
			-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
LAUDERDALE BAPTIST CRISIS CENT					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 549					THE BASIS OF		ELDERLY, HANDICAPPED,		
MARION, MS 39342	64-0372439		0.	5 446	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
	1 32 33,2133		<u> </u>	5,110.		Γ	,,,		

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
BLESSINGS FOR ALL EMPOWERED BY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
FAITH - 305 LEXINGTON STREET -					THE BASIS OF		ELDERLY, HANDICAPPED,		
CARROLLTON, MS 38917	81-2603164		0.	5,492.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
CHOCTAW COUNTY FOOD MINISTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 854					THE BASIS OF		ELDERLY, HANDICAPPED,		
ACKERMAN, MS 39735-0000	64-0917300		0.	5,534.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
SAM QUINN C.O.G.I.C.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
804 MCCOMB STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
MCCOMB, MS 39648	71-0883839		0.	5,551.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
LANIER HS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
833 MAPLE STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39203	64-6000505		0.	5,569.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
				·	FOOD INVENTORY		TO PROVIDE, WITHOUT		
ST. GABRIEL MERCY CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 824					THE BASIS OF		ELDERLY, HANDICAPPED,		
MOUND BAYOU, MS 38762-0824	64-0926061		0.	5,587.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
·				·	FOOD INVENTORY		TO PROVIDE, WITHOUT		
ROLLING FORK METHODIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
400 WALNUT STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
ROLLING FORK, MS 39159	64-0655228		0.	5,616.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
,				,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
SOS CRYSTAL SPRINGS FP, INC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O.BOX 995					THE BASIS OF		ELDERLY, HANDICAPPED,		
CRYSTAL SPRINGS, MS 39059	64-0823130		0.	5 635.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
,				, , , , , ,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
MAGNOLIA MEDICAL FOUNDATION HINDS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
258 FORTIFICATION STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39202	90-0504363		0.	5 684	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		, ·	5,331.	FOOD INVENTORY		TO PROVIDE, WITHOUT		
CHRISTIAN LIBERTY MB CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
507 TIPTON ST.					THE BASIS OF		ELDERLY, HANDICAPPED,		
KOSCIUSKO, MS 39090	20-5781062		0.	5 726	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
modelobito, mb 33030	20 3/01002		<u> </u>	J, 720.	TITIONITATIONS	F 00D	PILITITUT THE, DATTERED,		

(a) Name and address of organization or government (b) EN (c) IFC section of applicable (c) Amount of code (grant and or operation or government (c) Amount of code (grant and or operation	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
STAILUED ON	` ,	(b) EIN	` '	` '	noncash	valuation (book, FMV,				
THE BASIS OF ELDERLY, HANDICAPPED JACKSON, MS 19203 64-0655566 0. 5,728. PFROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVESTORY TO PROVIDE, WITHOUT SOUTH LAKE FOOD FANTEY TO PROVIDE, WITHOUT TO						FOOD INVENTORY		TO PROVIDE, WITHOUT		
ACKSON, MS 39203 64-0655566 0. 5,728_APPROXIMATIONS POOD MENTALLY LLL, BATTERED, SOUTH LAKE FOOD PANTRY TO PROVIDE, WITHOUT TO PROVIDE, WITHOU	STEWPOT					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
SOUTH LAKE FOOD PANTRY 7444 MUDLING RD LAKE, MS 39092 54-2117127 0. 5,751. APPROXIMATIONS FOOD MINTALLY ILL, BATTERED, LAKE, MS 39092 54-2117127 0. 5,751. APPROXIMATIONS FOOD MINTALLY ILL, BATTERED, LAKE, MS 39092 54-2117127 0. 5,751. APPROXIMATIONS FOOD MINTALLY ILL, BATTERED, LAKE, MS 39092 54-2117127 0. 5,751. APPROXIMATIONS FOOD MINTALLY ILL, BATTERED, LAKE, MS 39092 54-2117127 0. 5,751. APPROXIMATIONS FOOD MINTALLY ILL, BATTERED, LORGILY, HANDICAPPED, MINTALLY IL	1100 W CAPITOL ST.					THE BASIS OF		ELDERLY, HANDICAPPED,		
SOUTH LAKE POOD PANTRY 7444 WUDLING RD LAKE, MS 39192 54-2117127 0. 5,751. APPROXIMATIONS FOOD INVENTORY SEEDS OF CHANGE 421 NORTH RANKIN STREET NATCHEZ, MS 39121 81-2472543 0. 5,772. APPROXIMATIONS FOOD INVENTORY IS VALUED ON HER BASIS OF HAVE DEATH, HANDICAPPED, HARDE, FOOD TO HOMELESS, HAVE DEATH, HANDICAPPED, HARDE, FOOD TO HOMELESS, HAVE DEATH OF HER BASIS OF HE	JACKSON, MS 39203	64-0655566		0.	5,728.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
THE BASIS OF SLORLY, HANDICAPPED, LAKE, MS 39092 54-2117127 0. 5,751, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, THE BASIS OF SLORLY, HANDICAPPED, THE BASIS OF THE						FOOD INVENTORY		TO PROVIDE, WITHOUT		
LAKE, MS 39092 54-2117127 0. 5,751, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	SOUTH LAKE FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
SEEDS OF CHANGE 421 NORTH RANKIN STREET NATCHEZ, MS 39121 81-2472543 0. 5,772, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY CARDOZO MIDDLE S18 VALUED ON CHARGE, FOOD TO HOMELESS, S180 W. MCDOWELL ROAD EXT JACKSON, MS 39204 64-6000505 0. 5,785, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY CROSSATES BAPTIST CHURCH CSFP 8 CROSS WOODS ROAD BERNIDON, MS 39042 64-0636492 0. 5,786, APPROXIMATIONS BEG OF CENTRAL MISSISSIPPI 15 VALUED ON BERNIDON, MS 39202 64-033635 0. 5,835, APPROXIMATIONS FOOD INVENTORY BEG OF CENTRAL MISSISSIPPI 16 WASTE CAPITOL STREET JACKSON, MS 39202 64-033635 0. 5,835, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY BEG OF CENTRAL MISSISSIPPI TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT FOOD INVENTORY BEG OF CENTRAL MISSISSIPPI THE BASIS OF BEDERLY, HANDICAPPED, TO PROVIDE, WITHOUT THE BASIS OF BEDERLY HADDICAPPED, TO PROVIDE, WITHOUT THE B	7444 MUDLINE RD					THE BASIS OF		ELDERLY, HANDICAPPED,		
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MALLORY COMM. HEALTH/ LEFLORE 201 E. WASHINGTON STREET IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	·				,	FOOD INVENTORY		· · · · · · · · · · · · · · · · · · ·		
201 E. WASHINGTON STREET THE BASIS OF ELDERLY, HANDICAPPED,	MALLORY COMM. HEALTH/ LEFLORE					IS VALUED ON		· '		
								· '		
	GREENWOOD, MS 38930	64-0829371		0.	6,000.	APPROXIMATIONS	FOOD	l '		

Page 1

Part II Continuation of Grants and Other	r Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
POTTER'S HOUSE FAM/SER/CTR.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P. O. BOX 656					THE BASIS OF		ELDERLY, HANDICAPPED,
HOUSTON, MS 38851	64-0864601		0.	6,100.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
PROVIDENCE MB CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
12011 RD. 101					THE BASIS OF		ELDERLY, HANDICAPPED,
PHILADELPHIA, MS 39350-0000	64-0782736		0.	6,133.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
BETHESDA UNITED METHODIST CH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1085 THOMAS RD.					THE BASIS OF		ELDERLY, HANDICAPPED,
CRYSTAL SPRINGS, MS 39059	64-0812460		0.	6,151.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·					FOOD INVENTORY		TO PROVIDE, WITHOUT
KEMPER SPRINGS COMM. CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
2397 KEMPER SPRINGS RD.					THE BASIS OF		ELDERLY, HANDICAPPED,
DEKALB, MS 39328-0000	64-0700991		0.	6,184.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
COMMUNITY FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
2509 BROWNING ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
GREENWOOD, MS 38930-0000	64-0729036		0.	6,268.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
SILOAM MB CHURCH FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3013 BLUEBIRD TRAIL NW					THE BASIS OF		ELDERLY, HANDICAPPED,
BROOKHAVEN, MS 39601	64-0689107		0.	6,297.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
			-	, -	FOOD INVENTORY		TO PROVIDE, WITHOUT
SHILOH SDA COMM. SERVICE CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O.BOX 1407					THE BASIS OF		ELDERLY, HANDICAPPED,
GREENWOOD, MS 38930	64-0609776		0.	6 315.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FOOD INVENTORY		TO PROVIDE, WITHOUT
EVER REACHING COMM. OUTREACH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 981					THE BASIS OF		ELDERLY, HANDICAPPED,
PELAHATCHIE, MS 39145	36-4756928		0.	6 346	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
TERMITORIE, NO 07140	30 4730320			0,540.	FOOD INVENTORY	1 002	TO PROVIDE, WITHOUT
TIPPAH CO. GOOD SAMARITAN CTR.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P. O. BOX 76					THE BASIS OF		ELDERLY, HANDICAPPED,
RIPLEY MS 38663	64-0886879		0.	6 357	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
WILDET WE SOODS	04-00000/9		1 0.	0,35/.	WELKOVIMMITONS	F OOD	MENIADDI IDD, DATTERED,

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
MILESTON COMMUNITY DEVELOPMENT					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
ASSOCIATION - MCDA - 201 HEAD					THE BASIS OF		ELDERLY, HANDICAPPED,		
START ROAD - TCHULA, MS 39169	82-3314046		0.	6,370.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
PLANTING SEEDS MINISTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 31772					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39206	64-0842983		0.	6,396.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
HINDS COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
130 CHAMPION HILL ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,		
BOLTON, MS 39041	64-0676325		0.	6,411.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
CHRISTIAN FELLOWSHIP CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P. O. BOX 411					THE BASIS OF		ELDERLY, HANDICAPPED,		
HOUSTON, MS 38851	64-0727774		0.	6,421.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
DELIVER ME SENIOR SUPPORT					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
1405 S. GALLATIN ST					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39201	64-0644351		0.	6,422.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
HEARTY HELPING FP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
749 MAIN STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
GREENVILLE, MS 38701	26-3170356		0.	6,432.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
BREAD OF LIFE FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 2041					THE BASIS OF		ELDERLY, HANDICAPPED,		
MONTICELLO, MS 39654	84-2425887		0.	6,455.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
·					FOOD INVENTORY		TO PROVIDE, WITHOUT		
MIDTOWN CHARTER SCHOOL					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
301 ADELLE ST.					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39202	64-0862113		0.	6,525.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
·				,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
HARMONY M.B. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 137					THE BASIS OF		ELDERLY, HANDICAPPED,		
LENA, MS 39094	33-1215831		0.	6,552.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
SPRINGBOARD TO OPPORTUNITIES HINDS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
CO 286 RAYMOND RD JACKSON,					THE BASIS OF		ELDERLY, HANDICAPPED,		
MS 39204	46-1917760		0.	6,552.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
PLEASANT GROVE UMC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
1098 PLEASANT GROVE DR.					THE BASIS OF		ELDERLY, HANDICAPPED,		
MONTICELLO, MS 39654	64-0724347		0.	6,563.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
ST. ANDREWS MISSION, INC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 1407					THE BASIS OF		ELDERLY, HANDICAPPED,		
MCCOMB, MS 39649-0000	64-0880295		0.	6,590.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
SOUTH JACKSON SDA					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
5125 ROBINSON ROAD SUITE A					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39204	20-4825011		0.	6,595.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
BETHEL A.M.E. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
712 SOUTH FIRST STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
BROOKHAVEN, MS 39601	64-0688185		0.	6,662.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
·					FOOD INVENTORY		TO PROVIDE, WITHOUT		
ST. JAMES BETHEL M.B. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
2517 HARRIOTTE AVE					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39209	58-1944916		0.	6,669.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
ANDERSON UNITED METHODIST CHUR					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
6205 HANGING MOSS RD					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39206	83-0385896		0.	6,698.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
				,,,,,,,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
CLARKE CO. ASSOC. FOR NEEDY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
102 DABBS AVENUE					THE BASIS OF		ELDERLY, HANDICAPPED,		
QUITMAN, MS 39355-0000	64-0644684		0.	6 733.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
<u></u>			•	- ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
BETHEL BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
546 BETHEL ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,		
BRANDON, MS 39042	64-0647236		0.	6 792	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
211112011, 110 05012	51 001,250		· · ·	0,752.		<u> </u>	, <i>, , ,</i>		

(a) Name and address of organization or government (b) EIN (c) IRC section (csh gram cost and address of organization or government (csh gram cost and address of organization or government (csh gram cost and address of applicable (csh gram cost and applicable (csh gram cos	Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	rt II.)	
## TRAINEL MINISTRIES 189 ACDORADO ROAD 189 ACDORADOR ROA	• • • • • • • • • • • • • • • • • • • •	(b) EIN	` .f	1 ' ' .	noncash	valuation (book, FMV,		
190 ECDORADO CADD CADDRADO						FOOD INVENTORY		TO PROVIDE, WITHOUT
REARL, MS 39208	MT CARMEL MINISTRIES					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
GOODLOG ELEMENTARY SCHOOL STAILURE ON CHARGE, FOOD TO HOMELESS, 551 FINNEY ROAD CANTON, MS 39046 64-6000199 0. 6,878, APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 551 FINNEY ROAD CANTON, MS 39046 64-6000199 0. 6,878, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO FROVIDE, WITHOUT MT. ZION FOOD PANTRY MY. ZION FOOD PANTRY BENCHAVILLE, MS 39739 27-4709425 0. 6,880, APPROXIMATIONS FOOD INVENTORY SYALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 55 RALEIGH, MS 39133 64-0698653 0. 7,010, APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 55 RALEIGH, MS 39133 64-0698653 0. 7,010, APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 55 RALEIGH, MS 39130 64-0698653 0. 7,010, APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 55 RALEIGH, MS 39130 64-0698653 0. 7,037, APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 55 RALEIGH AND CHARGE, FOOD TO HOMELESS, P.O. BOX 55 R	190 ECDORADO ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
SOUDLOE ELEMENTARY SCHOOL STATUSED NOT CHARGE, FOOD TO HOMELESS, 515 FINNEY ROAD STATUS FOOD SOUTH AND CAPPED, CANTON, MS 39046 64-6000199 0. 6,878, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, CANTON, MS 39046 64-6000199 0. 6,878, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, CANTON, MS 39046 0. 6,980, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, CONTROL IS VALUED ON CHARGE, FOOD TO HOMELESS, THE COUNTY BAPTIST ASSOC. FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE COUNTY BAPTIST ASSOC. FOOD TO HOMELESS, THE COUNTY BAPTIST ASSOC. FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF COUNTY, HANDICAPPED, CANTON CHARGE, FOOD TO HOMELESS, THE BASIS OF COUNTY, HANDICAPPED, CANTON CHARGE, FOOD TO HOMELESS, THE BASIS OF COUNTY, HANDICAPPED, CANTON CHARGE, FOOD TO HOMELESS, THE BASIS OF COUNTY, HANDICAPPED, CANTON CHARGE, FOOD TO HOMELESS, THE BASIS OF COUNTY, HANDICAPPED, CANTON CHARGE, FOOD TO HOMELESS, THE FOOD TO HOMELESS, THE FOOD THE BASIS OF COUNTY, HANDICAPPED, CANTON CHARGE, FOOD TO HOMELESS, THE FOOD	PEARL, MS 39208	26-2833676		0.	6,864.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
The Basis of Elderly Handicapped, Candon, ms 39046 64-6000199 0. 6,878 approximations Food Menvally Ill., Battreed, Candon, ms 39046 04-6000199 0. 6,878 approximations Food inventory To Provide, Without Charge, Food To Homeless, 1357 MT. ZION FOOD FANTRY IS VALUED ON ELDERLY, HANDICAPPED, BASIS OF						FOOD INVENTORY		TO PROVIDE, WITHOUT
CANTON, MS 39046 64-6000199 0. 6,878. RPROXIMATIONS POOD MENTALLY ILL, BATTERED,	GOODLOE ELEMENTARY SCHOOL					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
MT. ZION FOOD PANTRY MT. ZION FOOD PANTRY IS VALUED ON THE BASIS OF FOOD INVENTORY SITTH COUNTY BAPTIST ASSOC. F.O. BOX 55 RALEIGH, MS 39153 64-0698653 O. 7,010. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO FROVIDE, WITHOUT SWITH COUNTY BAPTIST ASSOC. F.O. BOX 55 RALEIGH, MS 39153 C4-0698653 O. 7,010. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO FROVIDE, WITHOUT NEW BEGINNING CHURCH IN CHRIST 100 FISHER FERRY ROAD OAK FOREST BC FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, FOOD INVENTORY TO FROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF THE BASIS OF ELDERLY, HANDICAPPED, TO FROVIDE, WITHOUT THE BASIS OF TO FROVIDE, WITHOUT TO FROVIDE, WITHOUT TO FROVIDE, WITHOUT TO FROVIDE, WITHOUT TO FROVIDE, WIT	551 FINNEY ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
MT. ZION FOOD PANTRY 1357 MT. ZION ROAD REMOXEVILLE, MS 39739 27-4709425 0. 6,980. PEPROXIMATIONS POOD MENTALLY ILL, BATTERED, POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, RALEIGH, MS 39153 64-0698653 0. 7,010. PEPROXIMATIONS POOD MENTALLY ILL, BATTERED, NEW BEGINNING CHURCH IN CHRIST IS VALUED ON CHARGE, FOOD TO HOMELESS, 100 FISHER PERRY ROAD VICKSBURG, MS 39180 56-255205 0. 7,037. PEPROXIMATIONS POOD MENTALLY ILL, BATTERED, POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, THE BASIS OF FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT OAK FOREST BC FOOD PANTRY OAK FOREST BC FOOD PANTRY AND	CANTON, MS 39046	64-6000199		0.	6,878.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED,						FOOD INVENTORY		TO PROVIDE, WITHOUT
BROOKSVILLE, MS 39739 27-4709425 0. 6,980. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOWELESS, THE BASIS OF ELDERLY, HANDICAPPED, NEW BEGINNING CHURCH IN CHRIST IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, NEW BEGINNING CHURCH IN CHRIST IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, NEW BEGINNING CHURCH IN CHRIST IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, ELDERLY, HANDICAPPED, ON THE BASIS OF ELDERLY, HANDICAPPED, ELDERLY, HANDIC	MT. ZION FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY SMITH COUNTY BAPTIST ASSOC. P.O. BOX 55 RALEIGH, MS 39153 64-0698653 0. 7,010. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, POOD INVENTORY IS VALUED ON THE BASIS OF RALEIGH, MS 39153 64-0698653 0. 7,010. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, POOD INVENTORY IS VALUED ON THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF THE BASIS	1357 MT. ZION ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
SMITH COUNTY BAPTIST ASSOC. F.O. BOX 55 RALEIGH, MS 39153 64-0698653 0. 7,010. APPROXIMATIONS FOOD INVENTORY ITO PROVIDE, WITHOUT NEW BEGINNING CHURCH IN CHRIST 100 FISHER FERRY ROAD VICKSBURG, MS 39180 56-2552205 0. 7,037. APPROXIMATIONS FOOD INVENTORY VICKSBURG, MS 39180 56-2552205 0. 7,037. APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, WITHOUT OAK FOREST BC FOOD PANTRY 2875 OAK FOREST DR. JACKSON, MS 39212 64-0395540 0. 7,039. APPROXIMATIONS FOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT OX FOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT THE BASIS OF CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, THE BASIS OF CLARKSDALE, WIS 38614-0000 CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF CLARKSDALE, WIS 38614-0000 CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS O	BROOKSVILLE, MS 39739	27-4709425		0.	6,980.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
P.O. BOX 55 RALEIGH, MS 39153 64-0698653 0. 7,010. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, POOD INVENTORY FOOD TO HOMELESS, 100 FISHER PERRY ROAD VICKSBURG, MS 39180 56-2552205 0. 7,037. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, OAK FOREST BC FOOD PANTRY OAK FOREST DC FOOD PANTRY 1S VALUED ON CHARGE, FOOD TO HOMELESS, 2875 OAK FOREST DR. JACKSON, MS 39212 64-0395540 0. 7,039. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, EMMANUEL M.B. CHURCH 1S VALUED ON CHARGE, FOOD TO HOMELESS, 1109 COOPER ROAD JACKSON, MS 39212 64-0606071 0. 7,232. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS DELTA COUNCIL/FWOI MS DELTA COUNCIL/FWOI MS DELTA COUNCIL/FWOI MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT HE BASIS OF CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT HE BASIS OF CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT HE BASIS OF CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE TO THE BASIS OF TO PROVIDE TO THE BASIS OF TO PROVIDE TO THE BASIS OF TO PROVIDE						FOOD INVENTORY		TO PROVIDE, WITHOUT
RALEIGH, MS 39153 64-0698653 0. 7,010. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, ACKSON, MS 39212 64-0395540 0. 7,037. APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT TO	SMITH COUNTY BAPTIST ASSOC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 100 FISHER FERRY ROAD THE BASIS OF VICKSBURG, MS 39180 56-2552205 0. 7,373, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, TO PROVIDE, WITHOUT OAK FOREST BC FOOD PANTRY IS VALUED ON THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT TO PROVIDE, W	P.O. BOX 55					THE BASIS OF		ELDERLY, HANDICAPPED,
NEW BEGINNING CHURCH IN CHRIST 100 FISHER FERRY ROAD VICKSBURG, MS 39180 56-2552205 0. 7,037, APPROXIMATIONS FOOD INVENTORY CARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, FOOD INVENTORY CARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF THE BASIS OF ELDERLY, HANDICAPPED, JACKSON, MS 39212 64-0606071 0. 7,232, APPROXIMATIONS FOOD INVENTORY TO PROVIDE, WITHOUT	RALEIGH, MS 39153	64-0698653		0.	7,010.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, VICKSBURG, MS 39180 56-2552205 0. 7,037. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD THOMELESS, 2875 OAK FOREST DR. JACKSON, MS 39212 64-0395540 0. 7,039. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, 1109 COOPER ROAD JACKSON, MS 39212 64-0606071 0. 7,232. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, 1005 NORTH STATE STREET CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, PINELARE CARE CENTER IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED,						FOOD INVENTORY		TO PROVIDE, WITHOUT
VICKSBURG, MS 39180 56-2552205 0. 7,037. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 2875 OAK FOREST BC FOOD PANTRY 2875 OAK FOREST DR. JACKSON, MS 39212 64-0395540 0. 7,039. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY EMMANUEL M.B.CHURCH IS VALUED ON CHARGE, FOOD TO HOMELESS, 1109 COOPER ROAD JACKSON, MS 39212 64-0606071 0. 7,232. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 1005 NORTH STATE STREET CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 1005 NORTH STATE STREET CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 223 OLD JACKSON RD. ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED,	NEW BEGINNING CHURCH IN CHRIST					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY OAK FOREST BC FOOD PANTRY OAK FOREST DR. 2875 OAK FOREST DR. JACKSON, MS 39212 64-0395540 0. 7,039. APPROXIMATIONS FOOD INVENTORY IS VALUED ON FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF THE BASIS OF THE BASIS OF THE BASIS OF TO PROVIDE, WITHOUT TO	100 FISHER FERRY ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
OAK FOREST BC FOOD PANTRY 2875 OAK FOREST DR. JACKSON, MS 39212 64-0395540 0. 7,039. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY EMMANUEL M.B.CHURCH 15 VALUED ON THE BASIS OF FOOD TO HOMELESS, FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT THE BASIS OF CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD INVENTORY PINELAKE CARE CENTER 15 VALUED ON THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED,	VICKSBURG, MS 39180	56-2552205		0.	7,037.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
2875 OAK FOREST DR. JACKSON, MS 39212 64-0395540 0. 7,039. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 1109 COOPER ROAD JACKSON, MS 39212 64-0606071 0. 7,232. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, 24 APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF TO PROVIDE, WITHOUT TO PROVIDE APPROVIMENT TO PR						FOOD INVENTORY		TO PROVIDE, WITHOUT
JACKSON, MS 39212 64-0395540 0. 7,039. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY EMMANUEL M.B.CHURCH IS VALUED ON THE BASIS OF JACKSON, MS 39212 64-0606071 0. 7,232. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT FINELAKE CARE CENTER IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	OAK FOREST BC FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY EMMANUEL M.B.CHURCH IS VALUED ON THE BASIS OF JACKSON, MS 39212 64-0606071 0. 7,232. APPROXIMATIONS FOOD INVENTORY TO PROVIDE, WITHOUT ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE AND TO	2875 OAK FOREST DR.					THE BASIS OF		ELDERLY, HANDICAPPED,
EMMANUEL M.B.CHURCH 1109 COOPER ROAD JACKSON, MS 39212 64-0606071 0. 7,232. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT PINELAKE CARE CENTER 23 OLD JACKSON RD. THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED,	JACKSON, MS 39212	64-0395540		0.	7,039.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, JACKSON, MS 39212 64-0606071 0. 7,232. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT FOOD INVENTORY FOOD INVENTORY IS VALUED ON FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,						FOOD INVENTORY		TO PROVIDE, WITHOUT
JACKSON, MS 39212 64-0606071 0. 7,232. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY MS DELTA COUNCIL/FWOI 1005 NORTH STATE STREET CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,	EMMANUEL M.B.CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
MS DELTA COUNCIL/FWOI 1005 NORTH STATE STREET CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT TO	1109 COOPER ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
MS DELTA COUNCIL/FWOI 1005 NORTH STATE STREET CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PINELAKE CARE CENTER 223 OLD JACKSON RD. TIS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	JACKSON, MS 39212	64-0606071		0.	7,232.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
1005 NORTH STATE STREET CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PINELAKE CARE CENTER 223 OLD JACKSON RD. THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,					·	FOOD INVENTORY		TO PROVIDE, WITHOUT
CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PINELAKE CARE CENTER 223 OLD JACKSON RD. THE BASIS OF ELDERLY, HANDICAPPED,	MS DELTA COUNCIL/FWOI					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
CLARKSDALE, MS 38614-0000 64-0507946 0. 7,267. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PINELAKE CARE CENTER 1S VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	1005 NORTH STATE STREET					THE BASIS OF		, ,
FOOD INVENTORY PINELAKE CARE CENTER IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	CLARKSDALE, MS 38614-0000	64-0507946		0.	7,267.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
PINELAKE CARE CENTER 223 OLD JACKSON RD. IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	•				,			, , ,
223 OLD JACKSON RD. THE BASIS OF ELDERLY, HANDICAPPED,	PINELAKE CARE CENTER					IS VALUED ON		· ·
	223 OLD JACKSON RD.					THE BASIS OF		,
	MADISON, MS 39110	64-0538192		0.	7,397.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Othe	r Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WEBSTER CO BAPTIST ASSOCIATION					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
2313 VETERAN'S MEMORIAL BLVD.					THE BASIS OF		ELDERLY, HANDICAPPED,
EUPORA, MS 39744	43-2058266		0.	7,398.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
OAK GROVE MB CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
15 OAK GROVE CHURCH ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
TAYLORSVILLE, MS 39168	64-0659655		0.	7,428.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SAMARITAN'S CLOSET FP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 408					THE BASIS OF		ELDERLY, HANDICAPPED,
WAYNESBORO, MS 39367	47-4025298		0.	7,431.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
FREEDOM WORSHIP CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
960 HWY 589					THE BASIS OF		ELDERLY, HANDICAPPED,
PURVIS, MS 39475	72-1344899		0.	7,476.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				·	FOOD INVENTORY		TO PROVIDE, WITHOUT
GRACE EPISCOPAL CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 252					THE BASIS OF		ELDERLY, HANDICAPPED,
CANTON, MS 39046	64-0303076		0.	7,556.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
JERUSALEM TEMPLE COGIC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
12 ELIZABETH ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
LELAND, MS 38756	64-0717718		0.	7.728.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
NEW DIMENSIONS DEV. FOUNDATION					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
111 W. MONUMENT STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39202	64-0800603		0.	7 733.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				.,	FOOD INVENTORY		TO PROVIDE, WITHOUT
LIFE CHURCH GTR					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
4888 N. FRONTAGE ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBUS, MS 39701	26-3170356		0.	7 836	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
	25 3170330		· ·	7,030.	FOOD INVENTORY	1 2 2 2	TO PROVIDE, WITHOUT
TOWN OF BOLTON DEV. CORP.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 300					THE BASIS OF		ELDERLY, HANDICAPPED,
BOLTON, MS 39041-0000	64-0548173		0.	7 8/10	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
	04-05401/3		<u> </u>	/,040.	MELKOVIMMITONS	F 00D	MENIADDI IDD, DATTERED,

	PPI FOOD NE			. (01-			54-0676325 Page
Part II Continuation of Grants and Othe	r Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	irt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
DELTA HANDS FOR HOPE					IS VALUED ON		CHARGE, FOOD TO HOMELESS
124 EAST PEELER STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
SHAW, MS 38773	46-3929294		0.	8,023.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MS CULTURAL CROSSROADS					IS VALUED ON		CHARGE, FOOD TO HOMELESS
507 MARKET ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
PORT GIBSON, MS 39096	64-0638040		0.	8,064.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·				-	FOOD INVENTORY		TO PROVIDE, WITHOUT
M.I.C.A. MCCOMB IN-DOM CARE					IS VALUED ON		CHARGE, FOOD TO HOMELESS
P.O. BOX 7206					THE BASIS OF		ELDERLY, HANDICAPPED,
MCCOMB, MS 39649-0000	64-0739514		0.	8,066.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
ROSE HILL M.B.C. SOUP KITCHEN					IS VALUED ON		CHARGE, FOOD TO HOMELESS
6132 HWY 48 EAST					THE BASIS OF		ELDERLY, HANDICAPPED,
MAGNOLIA, MS 39652-0000	64-0675585		0.	8,171.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
COLLEGE HILL B.C. FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS
5740 KIRKLEY DR					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39206	02-0596703		0.	8,171.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
LOUISE COMMUNITY MB CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS
P.O. BOX 40					THE BASIS OF		ELDERLY, HANDICAPPED,
LOUISE, MS 39097	85-3809236		0.	8,242.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
,				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
PETER'S ROCK C.O.G.I.C.					IS VALUED ON		CHARGE, FOOD TO HOMELESS
223 MARTIN LUTHER KING DR. (P)					THE BASIS OF		ELDERLY, HANDICAPPED,
STARKVILLE, MS 39759	23-7002419		0.	8.254.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
,				, -	FOOD INVENTORY		TO PROVIDE, WITHOUT
HEARTLAND HANDS					IS VALUED ON		CHARGE, FOOD TO HOMELESS
385 STATELINE ROAD WEST					THE BASIS OF		ELDERLY, HANDICAPPED,
SOUTHAVEN, MS 38671-0000	81-0665156		0.	8 266	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
, 000, 2 0000	1 31 3333130		<u> </u>	5,200.	FOOD INVENTORY		TO PROVIDE, WITHOUT
COVENANT PRESBYTERIAN CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS
P.O. BOX 896					THE BASIS OF		ELDERLY, HANDICAPPED,
CLEVELAND, MS 38732	64-0663450		0.	0 227	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
LAMAR COUNTY SCHOOLS					IS VALUED ON		CHARGE, FOOD TO HOMELESS
404 MARTIN LUTHER KING DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,
PURVIS, MS 39475	64-6000567		0.	8,535.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
COPIAH COUNTY HUMAN RESOURCES					IS VALUED ON		CHARGE, FOOD TO HOMELESS
P O BOX 448					THE BASIS OF		ELDERLY, HANDICAPPED,
HAZLEHURST, MS 39083-0000	64-0837421		0.	8,551.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
<u> </u>					FOOD INVENTORY		TO PROVIDE, WITHOUT
BGC OF EAST MS- ATTALA					IS VALUED ON		CHARGE, FOOD TO HOMELESS
500 KNOX ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
KOSICUSKO, MS 39090	64-0728662		0.	8,574.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
,				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
ABERDEEN LOAVES & FISHES					IS VALUED ON		CHARGE, FOOD TO HOMELESS
PO BOX 545					THE BASIS OF		ELDERLY, HANDICAPPED,
ABERDEEN, MS 39730	31-1813333		0.	8,593.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
VOICE OF CALVARY MINISTRIES					IS VALUED ON		CHARGE, FOOD TO HOMELESS
531 W. CAPITOL ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39203	64-0564343		0.	8,612.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				, -	FOOD INVENTORY		TO PROVIDE, WITHOUT
RIVER CITY MISSION SK					IS VALUED ON		CHARGE, FOOD TO HOMELESS
3705 WASHINGTON ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
VICKSBURG, MS 39180	64-0851447		0.	8 620.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
			1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FOOD INVENTORY		TO PROVIDE, WITHOUT
HIGHER DIMENSIONS OF MT. OLIVE					IS VALUED ON		CHARGE, FOOD TO HOMELESS
1540 THORNTON ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
CARTHAGE, MS 39051	90-0518252		0.	8 712	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
CINTIMOL, NO 37031	30 0310232		· · ·	0,712.	FOOD INVENTORY	1 002	TO PROVIDE, WITHOUT
SHEPHERDS TENT FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS
P.O.BOX 223					THE BASIS OF		ELDERLY, HANDICAPPED,
LAUREL, MS 39440	47-3092977		0.	8 7/0	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
	±1 3092911		1	0,749.	FOOD INVENTORY	1 500	, , , , , , , , , , , , , , , , , , ,
SUNFLOWER AREA - CSFP					IS VALUED ON		TO PROVIDE, WITHOUT
							CHARGE, FOOD TO HOMELESS
P.O. BOX 1608			0.		THE BASIS OF APPROXIMATIONS		ELDERLY, HANDICAPPED,

Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WESLEY YOUTH FOUNDATION					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 713					THE BASIS OF		ELDERLY, HANDICAPPED,
TCHULA, MS 39169-0000	64-0859429		0.	8,835.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
AFTERNOON ADVENTURE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
102 CANDACE ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
NEWTON, MS 39345	81-5040483		0.	9,086.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
THE WORD FULL GOSPEL BC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3023 PERCY V. SIMPSON DR.					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39213	64-0907077		0.	9,090.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
LAMPTON STREET CHURCH OF CHRIST					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 358					THE BASIS OF		ELDERLY, HANDICAPPED,
MOUND BAYOU, MS 38762	64-0733595		0.	9,176.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SHEKINAH GLORY BC FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
485 W. NORTHSIDE DR.					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39211	26-3731027		0.	9,222.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MS CENTER P & SH. (HOPE HOME)					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 1201					THE BASIS OF		ELDERLY, HANDICAPPED,
RAYMOND, MS 39154-0000	71-1004096		0.	9,280.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
PLEASANT HOME BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 3					THE BASIS OF		ELDERLY, HANDICAPPED,
BAY SPRINGS, MS 39422	64-0516771		0.	9,444.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·				·	FOOD INVENTORY		TO PROVIDE, WITHOUT
YAZOO CO. BAPTIST BROTHERHOOD					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
625 EAST 12TH STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
YAZOO CITY, MS 39194	26-3170356		0.	9,516.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
UNITY M.B. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 349					THE BASIS OF		ELDERLY, HANDICAPPED,
LOUISVILLE, MS 39339	30-0533145		0.	9,590.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

(a) Name and address of organization of government (b) EIN (c) IRC section of graphicable (c)	Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	rt II.)	
MY SROTHER'S KEEPER 470 ROCKEAD PARK BLDG. 1 RIDGELAND, MS 39157 64-0937314 0. 9,594, APPROXIMATIONS POOD INVENTORY JONES CHAPEL M,B. CHURCH M,B	• • • • • • • • • • • • • • • • • • • •	(b) EIN	` .f		noncash	valuation (book, FMV,		
### BASIS OF ### B						FOOD INVENTORY		TO PROVIDE, WITHOUT
RIDGELAND, MS 39157 64-0937314 0. 9,594. APPROXIMATIONS FOOD MEMPTALLY ILL, BATTERED,	MY BROTHER'S KEEPER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
POOD INVENTORY TO PROVIDE, NITHOUT S VALUED ON CHARGE, FOOD TO HOMELESS, 119 SEVIN DRIVE S VALUED ON HEMBELS, 119 SEVIN DRIVE S VALUED ON HEMBELS, 119 SEVIN DRIVE S VALUED ON HEMBELS, 110 SEEDS MINISTRY S VALUED ON HEMBELS, 11	407 ORCHARD PARK BLDG. 1					THE BASIS OF		ELDERLY, HANDICAPPED,
JONES CHAPEL M.B. CHURCH 15 VALUED ON 16 CHARGE, FOOD TO HOMELESS, 119 ENVIN DRIVE 16 CHARGE, MS 19051 68 0487744 0. 9,632, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	RIDGELAND, MS 39157	64-0937314		0.	9,594.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, CARTHAGE, MS 39051 68-0487744 0. 9,632 EPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO FROVIDE, WITHOUT FAMILY FROM THE BASIS OF ELDERLY, HANDICAPPED, EARIEST OF						FOOD INVENTORY		TO PROVIDE, WITHOUT
CARTHAGE, MS 39051 68-0487744 0. 9,632, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD TO HOWELESS, THE BASIS OF ELDERLY, HANDICAPPED, SHIPBUTA, MS 39286 64-0842983 0. 9,651, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD IN	JONES CHAPEL M.B. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PLANTING SEEDS MINISTRY JACKSON, MS 39286 64-0842983 0. 9,651.APPROXIMATIONS POOD INVENDARY TO FROVIDE, WITHOUT PROVIDE, WITHOUT CHANGING YOUR WORLD MINISTRIES 112 VALUED ON CHARGE, FOOD TO MOMELESS, 1120 S. MAIN STREET ROSEDALE, MS 38769 64-0903119 0. 9,770.APPROXIMATIONS POOD MENTALLY ILL, BATTERED, POOD INVENDARY TO FROVIDE, WITHOUT BOYDE, S.,/CROSSROADS THE BASIS OF SULDERLY, HANDICAPPED, BOYDE, S.,/CROSSROADS C/O CASSANDRA GUESS JACKSON, MS 39205 64-6000505 0. 9,850.APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, POOD INVENDARY TO FROVIDE, WITHOUT THE BASIS OF SULDERLY, HANDICAPPED, HITH BASIS OF SULDERLY, HANDICAPPED, HITH BASIS OF SULDERLY, HANDICAPPED, HITH BASIS OF SULDERLY, HANDICAPPED, THE BASIS OF SULDERLY, HANDICAPPED, TO FROVIDE, WITHOUT THE BASIS OF SULDERLY, HANDICAPPED, TO FROVIDE, WITHOUT THE BASIS OF SULDERLY, HANDICAPPED, THE BASIS OF SULDERLY, HANDICAPPED, TO FROVIDE, WITHOUT TO FRO	119 ERVIN DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,
PLANTING SEEDS MINISTRY	CARTHAGE, MS 39051	68-0487744		0.	9,632.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
P. O. BOX 31772 JACKSON, MS 39266 64-0842983 0. 9,651. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, CHANGING YOUR WORLD MINISTRIES 112 VALUED ON HE BASIS OF ELDERLY, HANDICAPPED, ROSEDALE, MS 38769 64-0903119 0. 9,770. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, ROSEDALE, MS 38769 64-0903119 0. 9,770. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY FOOD INV						FOOD INVENTORY		TO PROVIDE, WITHOUT
DACKSON, MS 39286 64-0842983 0. 9,651. APPROXIMATIONS POOD MENTALLY ILL, BATTERED,	PLANTING SEEDS MINISTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
CHANGING YOUR WORLD MINISTRIES CHARGE, FOOD TO HOMELESS, THE BASIS OF FOOD INVENTORY CHARGE, FOOD TO HOMELESS, THE BASIS OF FOOD INVENTORY CHARGE, FOOD TO HOMELESS, THE BASIS OF FOOD INVENTORY CHARGE, FOOD TO HOMELESS, THE BASIS OF FOOD INVENTORY CHARGE, FOOD TO HOMELESS, THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT	P. O. BOX 31772					THE BASIS OF		ELDERLY, HANDICAPPED,
CHANGING YOUR WORLD MINISTRIES 1120 S. MAIN STREET ROSEDALE, MS 38769 64-0903119 0. 9,770. APPROXIMATIONS FOOD INVENTORY BOYD E.S./CROSSROADS C/O CASSANDRA GUESS JACKSON, MS 39205 64-6000505 0. 9,850. APPROXIMATIONS ETHERASIS OF SLDERLY, HANDICAPPED, TO PROVIDE, WITHOUT BETHLEHEM M.B. CHURCH 1142 SHUBUTA BUCUTTA RD. SHUBUTA, MS 39360 64-0913005 0. 9,947. APPROXIMATIONS FOOD INVENTORY IS VALUED ON THE BASIS OF SLDERLY, HANDICAPPED, TO PROVIDE, WITHOUT THE BASIS OF THE BASIS	JACKSON, MS 39286	64-0842983		0.	9,651.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, POOD INVENTORY FOOD MENTALLY ILL, BATTERED, POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, POOD						FOOD INVENTORY		TO PROVIDE, WITHOUT
ROSEDALE, MS 38769 64-0903119 0. 9,770. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	CHANGING YOUR WORLD MINISTRIES					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, C/O CASSANDRA GUESS JACKSON, MS 39205 64-6000505 0. 9,850. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, TO PROVIDE, WITHOUT FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, II42 SHUBUTA EUCUTTA RD. SHUBUTA, MS 39360 64-0913005 0. 9,947. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, II4000 US 82 ITHE BASIS OF ITHE	1120 S. MAIN STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
BOYD E.S./CROSSROADS C/O CASSANDRA GUESS JACKSON, MS 39205 64-6000505 0. 9,850. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY ETHLEHEM M.B. CHURCH 1142 SHUBUTA EUCUTTA RD. SHUBUTA, MS 39360 64-0913005 0. 9,947. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, THE BASIS OF ELDERLY, HANDICAPPED, SHUBUTA, MS 39360 64-0913005 0. 9,947. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, WYSU 1S VALUED ON CHARGE, FOOD TO HOMELESS, 14000 US 82 1TTA BENA, MS 38941 64-0676325 0. 10,057. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF FOOD INVENTORY FREE MISSION BAPTIST CHURCH 1782 SWAMP ROAD CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT TO PROVIDE	ROSEDALE, MS 38769	64-0903119		0.	9,770.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
C/O CASSANDRA GUESS JACKSON, MS 39205 64-6000505 0. 9,850. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, SHUBUTA, MS 39360 64-0913005 0. 9,947. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, SHUBUTA, MS 39360 64-0913005 0. 9,947. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, 14000 US 82 THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT FREE MISSION BAPTIST CHURCH TIS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF THE BASI						FOOD INVENTORY		TO PROVIDE, WITHOUT
DACKSON, MS 39205 64-6000505 0. 9,850. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	BOYD E.S./CROSSROADS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY BETHLEHEM M.B. CHURCH 1142 SHUBUTA EUCUTTA RD. SHUBUTA, MS 39360 64-0913005 0. 9,947. APPROXIMATIONS FOOD INVENTORY IS VALUED ON FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WI	C/O CASSANDRA GUESS					THE BASIS OF		ELDERLY, HANDICAPPED,
BETHLEHEM M.B. CHURCH 1142 SHUBUTA EUCUTTA RD. SHUBUTA, MS 39360 64-0913005 0. 9,947. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY CHARGE, FOOD TO HOMELESS, 1782 SWAMP ROAD CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT ST. JOHN M.B. CHURCH F. P. 1S VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED,	JACKSON, MS 39205	64-6000505		0.	9,850.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, SHUBUTA, MS 39360 64-0913005 0. 9,947. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 14000 US 82 ITTA BENA, MS 38941 64-0676325 0. 10,057. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FREE MISSION BAPTIST CHURCH IS VALUED ON CHARGE, FOOD TO HOMELESS, 1782 SWAMP ROAD CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, MS 39051 FOOD INVENTORY TO PROVIDE, WITHOUT ST. JOHN M.B. CHURCH F. P. IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,						FOOD INVENTORY		TO PROVIDE, WITHOUT
SHUBUTA, MS 39360 64-0913005 0. 9,947. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 14000 US 82 ITTA BENA, MS 38941 64-0676325 0. 10,057. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FREE MISSION BAPTIST CHURCH IS VALUED ON CHARGE, FOOD TO HOMELESS, 1782 SWAMP ROAD CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT ST. JOHN M.B. CHURCH F. P. IS VALUED ON CHARGE, FOOD TO HOMELESS, 5456 MORRISON RD. THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, 5456 MORRISON RD. ELDERLY, HANDICAPPED,	BETHLEHEM M.B. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT ST. JOHN M.B. CHURCH F. P. TS VALUED ON THE BASIS OF TO PROVIDE, WITHOUT TO PROVIDE AND PROVIDE AND PROVIDE AND PROVIDE AND PROVIDE AND PRO	1142 SHUBUTA EUCUTTA RD.					THE BASIS OF		ELDERLY, HANDICAPPED,
MVSU 14000 US 82 1THE BASIS OF THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT FREE MISSION BAPTIST CHURCH 1782 SWAMP ROAD CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT ST. JOHN M.B. CHURCH F. P. 1S VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT ST. JOHN M.B. CHURCH F. P. 5456 MORRISON RD.	SHUBUTA, MS 39360	64-0913005		0.	9,947.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, ITTA BENA, MS 38941 64-0676325 0. 10,057. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FREE MISSION BAPTIST CHURCH IS VALUED ON THE BASIS OF CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT ST. JOHN M.B. CHURCH F. P. IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT TO PROVIDE						FOOD INVENTORY		TO PROVIDE, WITHOUT
ITTA BENA, MS 38941 64-0676325 0. 10,057. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, CARTHAGE, MS 39051 64-0899848 0. 10,057. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT ST. JOHN M.B. CHURCH F. P. IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT T	MVSU					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY FREE MISSION BAPTIST CHURCH 18 VALUED ON THE BASIS OF CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF	14000 US 82					THE BASIS OF		ELDERLY, HANDICAPPED,
FREE MISSION BAPTIST CHURCH 1782 SWAMP ROAD CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY ST. JOHN M.B. CHURCH F. P. 5456 MORRISON RD. 1S VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	ITTA BENA, MS 38941	64-0676325		0.	10,057.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY ST. JOHN M.B. CHURCH F. P. 5456 MORRISON RD. THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	·				·	FOOD INVENTORY		TO PROVIDE, WITHOUT
CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY ST. JOHN M.B. CHURCH F. P. 5456 MORRISON RD. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	FREE MISSION BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
CARTHAGE, MS 39051 64-0899848 0. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY ST. JOHN M.B. CHURCH F. P. 5456 MORRISON RD. 10,109. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	1782 SWAMP ROAD					THE BASIS OF		l '
FOOD INVENTORY ST. JOHN M.B. CHURCH F. P. ST. JOHN M.B. CHURCH F. P. 1S VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	CARTHAGE, MS 39051	64-0899848		0.	10,109.	APPROXIMATIONS		· '
ST. JOHN M.B. CHURCH F. P. 5456 MORRISON RD. IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	·				,			, , , , , , , , , , , , , , , , , , ,
5456 MORRISON RD. THE BASIS OF ELDERLY, HANDICAPPED,	ST. JOHN M.B. CHURCH F. P.					IS VALUED ON		·
	5456 MORRISON RD.					THE BASIS OF		· ·
	UTICA, MS 39175	64-0930642		0.	10,140.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Other	r Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SMO INC., - WALTHALL CO.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 1667					THE BASIS OF		ELDERLY, HANDICAPPED,
MCCOMB, MS 39649	64-0433629		0.	10,149.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
COUNTRY WOODS BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
6737 SIWELL RD.					THE BASIS OF		ELDERLY, HANDICAPPED,
BYRAM, MS 39272	64-0764805		0.	10,228.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
ST. VINCENT DE PAUL					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 1523					THE BASIS OF		ELDERLY, HANDICAPPED,
GREENVILLE, MS 38701-1523	41-2245261		0.	10,261.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MASJID MUHAMMAD					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
6100 FLORAL DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39206	64-0624134		0.	10,284.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
GOOD SAMARITAN CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
540 ELLISVILLE BLVD.					THE BASIS OF		ELDERLY, HANDICAPPED,
LAUREL, MS 39440	64-0538126		0.	10,329.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WALDEN CHAPEL UNITED METHODIST					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
308 FRANKLIN RD.					THE BASIS OF		ELDERLY, HANDICAPPED,
GOODMAN, MS 39079-0000	64-0872876		0.	10,344.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
ST. LUKE UMC FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1400 CLAYTON AVENUE					THE BASIS OF		ELDERLY, HANDICAPPED,
TUPELO, MS 38804	64-0383876		0.	10,412.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
TRIUMPHANT M.B. CHURCH PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 1643					THE BASIS OF		ELDERLY, HANDICAPPED,
VICKSBURG, MS 39181	31-1693496		0.	10 435.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
			1		FOOD INVENTORY		TO PROVIDE, WITHOUT
OAK GROVE MB CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
935 TAMPA ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
- · ·	36-4539281		0.	10 517	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Other	er Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
GRACE EPISCOPAL CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 252					THE BASIS OF		ELDERLY, HANDICAPPED,
CANTON, MS 39046	64-0303076		0.	10,536.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
FIRST BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
301 N WEST MAIN AVENUE					THE BASIS OF		ELDERLY, HANDICAPPED,
MOUND BAYOU, MS 38762	64-0810429		0.	10,692.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WINSTON BAPTIST ASSOCIATION					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1187 NORTH COLUMBUS AVENUE					THE BASIS OF		ELDERLY, HANDICAPPED,
LOUSIVILLE, MS 39339	64-0656685		0.	10,700.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
-					FOOD INVENTORY		TO PROVIDE, WITHOUT
STEPHEN CHAPEL MB CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
2421 23RD AVE N.					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBUS, MS 39701	64-0771503		0.	10,710.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				·	FOOD INVENTORY		TO PROVIDE, WITHOUT
COVINGTON CO. BP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
200 MAIN ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
SEMINARY, MS 39479	64-6000298		0.	10,729.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
SMO, INC WILKINSON COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1495 US HWY 61 SOUTH					THE BASIS OF		ELDERLY, HANDICAPPED,
WOODVILLE, MS 39669	64-0433629		0.	10 910.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
BETHLEHEM BAPTIST CH/FOOD/PAN.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
138 WASHINGTON CIRCLE					THE BASIS OF		ELDERLY, HANDICAPPED,
NATCHEZ, MS 39120	64-0649774		0.	10 921	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
	01 0015//1		•	10,521.	FOOD INVENTORY		TO PROVIDE, WITHOUT
HICKORY RIDGE BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
319 HICKORY RIDGE ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
FLORENCE, MS 39073	64-6166415		0.	10 9/2	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
I LORDROL, NO 33073	04 0100412		1	10,942.	FOOD INVENTORY	¥ 00 <i>D</i>	TO PROVIDE, WITHOUT
JOSEPH'S FOOD PANTRY					IS VALUED ON		· '
					THE BASIS OF		CHARGE, FOOD TO HOMELESS,
1021 SOUTH MLK BLVD.	60_0056777		_	10 OFF		FOOD	ELDERLY, HANDICAPPED,
GRENADA, MS 38901-0000	69-0856777		0.	10,955.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Other A	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
PILGRIM REST COMMUNITY DEVELOPMENT					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
169 PILGRIM REST CHURCH ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
PINOLA, MS 39149	83-4190885		0.	10,987.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
BOYS & GIRLS CLUB YAZOO					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
OF MS DELTA YAZOO UNIT					THE BASIS OF		ELDERLY, HANDICAPPED,
YAZOO CITY, MS 39194-0000	45-0469376		0.	11,002.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WE ARE ONE UNITED METHODIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1315 WEST MCDOWELL ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39204	47-1181428		0.	11,063.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
EPHESUS BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3535 EPHESUS RD					THE BASIS OF		ELDERLY, HANDICAPPED,
FOREST, MS 39074	64-0654541		0.	11,137.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MT. ZION FOOD MINISTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1247 NEWELL ROAD NW					THE BASIS OF		ELDERLY, HANDICAPPED,
BROOKHAVEN, MS 39601	27-4709425		0.	11,181.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
INVERNESS - CSFP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 465					THE BASIS OF		ELDERLY, HANDICAPPED,
INVERNESS, MS 38753-0000	64-0910480		0.	11,262.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
HUMPHREYS CO. BAPTIST BROTHERHOOD					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
124 WEST JACKSON STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
BELZONI, MS 39038	26-3170356		0.	11,284.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
LOVING KINDNESS OUTREACH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
300 RIVERVIEW DR					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBIA, MS 39667	36-4738196		0.	11,450.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
•				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
MCCSA - JASPER CO. SERV AGENCY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3870 CR 8					THE BASIS OF		ELDERLY, HANDICAPPED,
HEIDELBERG, MS 39439	64-0440512		0.	11,482.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
NEW JERUSALEM CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
168 COLONIAL DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39204	82-0584491		0.	11,494.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
BOYS & GIRLS CLUB OF LEFLORE C					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1740 CARROLLTON AVENUE					THE BASIS OF		ELDERLY, HANDICAPPED,
GREENWOOD, MS 38930-0000	64-0594883		0.	11,580.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
JASPER COUNTY BAPTIST ASSOC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 385					THE BASIS OF		ELDERLY, HANDICAPPED,
BAY SPRINGS, MS 39422	64-0682511		0.	11,660.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
FBC HEIDELBERG					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
612 WALNUT STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
HEIDELBERG, MS 39439	26-3170356		0.	11,736.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
DELIVER ME SR. SUPPORT SVC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1405 S. GALLATIN ST. (PHYSICAL					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39201	64-0644351		0.	11,908.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
B & G CLUB DELTA GRENADA					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
C/O MFN					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39205-0000	45-0469376		0.	11,947.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
•				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
SOUTHSIDE BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
167 CHISOLM ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
LEXINGTON, MS 39095	64-0516771		0.	11,949.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
CHRISTIAN FELLOWSHIP OUTREACH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
460 ST. PAUL ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
TYLERTOWN, MS 39667-0000	64-0864238		0.	12 011.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				==,	FOOD INVENTORY		TO PROVIDE, WITHOUT
JERUSALEM BAPT. CHURCH-P.F.F.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 106					THE BASIS OF		ELDERLY, HANDICAPPED,
LAWRENCE, MS 39336-0000	64-0520467		0.	12 100.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
	1		· · ·	,		<u> </u>	

Part II Continuation of Grants and Other A	ssistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
CHARITY FULL GOSPEL					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1524 6TH AVENUE SOUTH					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBUS, MS 39701	64-0707603		0.	12,113.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
NEW MORNING STAR CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 266					THE BASIS OF		ELDERLY, HANDICAPPED,
BENOIT, MS 38725	82-0676946		0.	12,175.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
FIRST SEVENTH DAY ADVENTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 847					THE BASIS OF		ELDERLY, HANDICAPPED,
BELZONI, MS 39038	84-3347183		0.	12,221.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WINONA COMM. PAVILION					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
902 NORTH UNION					THE BASIS OF		ELDERLY, HANDICAPPED,
WINONA, MS 38967	81-2603164		0.	12,307.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
LEXINGTON FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
20735 HWY 12					THE BASIS OF		ELDERLY, HANDICAPPED,
LEXINGTON, MS 39095	27-0356457		0.	12,319.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
BONANZA BUYING CENTER, INC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 26					THE BASIS OF		ELDERLY, HANDICAPPED,
DUNCAN, MS 38740	64-0923097		0.	12,402.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
,				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
MOOREHEAD AREA - CSFP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
C/O PO BOX 1608					THE BASIS OF		ELDERLY, HANDICAPPED,
INDIANOLA, MS 38751-0000	64-0910480		0.	12.470.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
,				, -	FOOD INVENTORY		TO PROVIDE, WITHOUT
MT. ZION FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1357 MT ZION ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
BROOKSVILLE, MS 39739-0000	27-4709425		0.	12,532.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
,				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
JEFFERSON COMPREH./HEALTH/CTR.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P. O. BOX 98					THE BASIS OF		ELDERLY, HANDICAPPED,
	I						

Part II Continuation of Grants and Other	r Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	ırt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
ST. MARK MBC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
7444 MUDLINE ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
LAKE, MS 39092	26-3170356		0.	12,640.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
FIRST BAPTIST CHURCH FLORA					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 163					THE BASIS OF		ELDERLY, HANDICAPPED,
FLORA, MS 39071	64-0388542		0.	12,666.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
CLARKE CO. ASSOC. FOR NEEDY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P O BOX 195					THE BASIS OF		ELDERLY, HANDICAPPED,
QUITMAN, MS 39355	64-0778155		0.	12,676.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SMO, INC AMITE COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 1667					THE BASIS OF		ELDERLY, HANDICAPPED,
MCCOMB, MS 39648	64-0433629		0.	12,690.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
UNITED COMMUNITY DEV. OUTREACH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
403 HAWPOND CHURCH RD.					THE BASIS OF		ELDERLY, HANDICAPPED,
MENDENHALL, MS 39114	71-0932119		0.	12,786.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
LINTONIA CHAPEL 7TH DAY ADV					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P O BOX 63					THE BASIS OF		ELDERLY, HANDICAPPED,
YAZOO CITY, MS 39194	64-0675816		0.	12,918.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
CENTER HILL BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
10860 RD. 123					THE BASIS OF		ELDERLY, HANDICAPPED,
PHILADELPHIA, MS 39350	64-0784193		0.	12,929.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WARREN COUNTY MOBILE PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
440 W. BEATTY ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
VICKSBURG, MS 39180	64-0676325		0.	12,936.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SCOTT COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
4300 W. 93RD ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
FOREST, MS 39074	64-0676325		0.	12,987.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MULTI-COUNTY CSA - NESHOBA CO.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
C/O MULTI-COUNTY CSA					THE BASIS OF		ELDERLY, HANDICAPPED,
MERIDIAN, MS 39301	64-0440512		0.	12,993.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
CARING HANDS OF SWEET HOME					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 197					THE BASIS OF		ELDERLY, HANDICAPPED,
ITTA BENA, MS 38941	46-1488941		0.	13,037.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MANNA FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 549					THE BASIS OF		ELDERLY, HANDICAPPED,
CRYSTAL SPRINGS, MS 39059	69-0692926		0.	13,502.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·					FOOD INVENTORY		TO PROVIDE, WITHOUT
YALOBUSHA COUNTY ACTION AGENCY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
18025 HWY #7					THE BASIS OF		ELDERLY, HANDICAPPED,
COFFEEVILLE, MS 38922	64-0922354		0.	13,502.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
CHRISTIANS UNITED M.B. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
5394 METHODIST HOME ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39213	64-0832411		0.	13,682.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				, -	FOOD INVENTORY		TO PROVIDE, WITHOUT
CALVARY CHAPEL BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
705 GEORGE P CROSSAR BLVD					THE BASIS OF		ELDERLY, HANDICAPPED,
CHARLESTON, MS 38921	64-0223390		0.	13 817	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MILES MEMORIAL CME CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
207 SIMMONS STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
WATER VALLEY, MS 38965-0000	64-0922254		0.	13 948	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
	01 0722201			20,220.	FOOD INVENTORY	1002	TO PROVIDE, WITHOUT
BMA SDA CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
6428 US HWY 11					THE BASIS OF		ELDERLY, HANDICAPPED,
LUMBERTON, MS 39455	64-6012951		0.	13 976	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
HOMBERTON, NO 37433	04 0012931		0.	13,970.	FOOD INVENTORY	1 000	TO PROVIDE, WITHOUT
ETERNAL LIFE PRAYER CENTER							·
					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
2514 RAYMOND ROAD	26-3170356		0.	14 104	THE BASIS OF	ECOD	ELDERLY, HANDICAPPED,
JACKSON, MS 39212	20-31/0336		<u> </u>	14,104.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
MCCSA - KEMPER COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
7 BELL STREET					THE BASIS OF		ELDERLY, HANDICAPPED,				
DEKALB, MS 39328	64-0440512		0.	14,165.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
FAITH BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
705 GEORGE PAYNE COSSAR BLVD					THE BASIS OF		ELDERLY, HANDICAPPED,				
CHARLESTON, MS 38921	64-0808675		0.	14,414.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
DELTA ADVANTAGE CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
12 MOORHEAD ITTA BENA ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,				
MOORHEAD , MS 38761	84-4293900		0.	14,425.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
OAKLAND CSFP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
121 CHERRY STREET					THE BASIS OF		ELDERLY, HANDICAPPED,				
OAKLAND, MS 38948	64-0922354		0.	14,546.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
KEMPER SPRINGS COMM. CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
2397 KEMPER SPRING ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,				
DEKALB, MS 39328	64-0700991		0.	14,549.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
ALTA WOODS UMC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
109 ALTA WOODS BLVD.					THE BASIS OF		ELDERLY, HANDICAPPED,				
JACKSON, MS 39204	64-0345118		0.	14,677.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT				
HIGHER DIMENSIONS/CARTHAGE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
COLESIUM - 805 E. MAIN STREET -					THE BASIS OF		ELDERLY, HANDICAPPED,				
CARTHAGE MS 39051	90-0518252		0.	14.728.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
-				,	FOOD INVENTORY		TO PROVIDE, WITHOUT				
BEREAN SEVENTH DAY ADVENTIST					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
770 JASMINE COURT					THE BASIS OF		ELDERLY, HANDICAPPED,				
JACKSON, MS 39206	64-0901825		0.	14 763.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
				==,	FOOD INVENTORY		TO PROVIDE, WITHOUT				
OPERATION UPWARD					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
1000 WINTER STREET					THE BASIS OF		ELDERLY, HANDICAPPED,				
JACKSON, MS 39204-0000	36-4593750		0.	15 448.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
	1 22 2000.00		<u> </u>				, , , , , , , , , , , , , , , , , , , ,				

Part II Continuation of Grants and Other	er Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SEMINARY BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 81					THE BASIS OF		ELDERLY, HANDICAPPED,
SEMINARY, MS 39479	64-0350864		0.	15,648.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
HEAVENS MANNA					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
39 FIFTH STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
ROXIE, MS 39661	84-3533845		0.	15,798.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
GREATER BEAVER MEADOW BAPTIST					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 907					THE BASIS OF		ELDERLY, HANDICAPPED,
HEIDELBERG, MS 39439	64-0685077		0.	15,837.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
HOUSE OF BLESSINGS OUTREACH FP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
2120 OAK GROVE ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
HATTIESBURG, MS 39402	46-1833365		0.	15,865.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
FRANK PHILLIPS YMCA					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
602 2ND AVENUE NORTH					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBUS, MS 39740	64-6025994		0.	15,884.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WE CARE MISSION					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 267					THE BASIS OF		ELDERLY, HANDICAPPED,
MORTON, MS 39117	64-0876007		0.	15,944.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
FREE PEOPLE MBC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
25052 HWY 51					THE BASIS OF		ELDERLY, HANDICAPPED,
CRYSTAL SPRINGS, MS 39059	26-3170356		0.	16,000.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MOUNT ELAM M B CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
701 OLD WHITFIELD ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
PEARL, MS 39208	64-0825676		0.	16,038.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·					FOOD INVENTORY		TO PROVIDE, WITHOUT
DURANT MISSIONARY BAPTIST CHUR					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
16455 NORTH JACKSON STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
DURANT, MS 39063-0000	31-1698632		0.	16.074.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

(a) Name and address of organization or government (b) EIN (c) IRC section of raspirant (e) Amount of cash grant (e) Amount of non-cash assistance (e) Amount of the non-cash assistance (e) Amount of the non-cash assistance (e) Cond inventions (e) Amount of the non-cash assistance (e) Cond inventions (e) Amount of the non-cash assistance (e) Cond inventions (e) Amount of the non-cash assistance (e) Cond inventions (e)	Part II Continuation of Grants and Othe	r Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	rt II.)	
UNION HILL M.B. CHURCH	` '	(b) EIN	` '		noncash	valuation (book, FMV,		
P.O. BOX 797 FLORA, MS 39071-0000 64-0909922 0. 16,090 APPROXIMATIONS POOD MENTALLY ILL, BATTERED, FLORAL FLORAL						FOOD INVENTORY		TO PROVIDE, WITHOUT
PLORA, MS 39071-0000 64-0909922 0. 16,900. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, POOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, MULTI-COUNTY CSA - CLARKE CO. 16,228. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MULTI-COUNTY CSA - CLARKE CO. 16,277. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT MULTI-COUNTY CSA - CLARKE CO. 16,277. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT MULTI-COUNTY CSA - CLARKE CO. 16,277. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE MULTI-COUNTY TO PROVIDE MULTI-COUNT TO PROVIDE MULTI-COUNTY TO PROVIDE MULTI-COUNT MULTI-COUNT MULTI-COUNT MULTI-COUNT TO PROVIDE MULTI-COUNT MULTI-COUNT MULTI-COUNT TO PROVIDE MULTI-COUNT MULTI-COUNT TO PROVIDE MULTI-COUNT MULTI-COUNT TO PROVIDE MULTI-COUNT MULTI-COUNT TO PROVIDE MULTI-COUNT TO PROVIDE MULTI-COUNT MULTI-COUNT TO PROVIDE MULTI-COUNT TO PROVIDE MULTI-COUNT TO PROVIDE MULTI-COUNT MULTI-COUNT TO PROVIDE MULTI-CO	UNION HILL M.B. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
GREENVILLE GREENVILLE A01 S HINDS ST GREENVILLE, MS 38701 64-0592494 0. 16,228. APPROXIMATIONS FOOD INVENTORY LS VALUED ON MENTALLY ILL, BATTERED, FOOD INVENTORY LS VALUED ON CHARGE, FOOD TO HOMELESS, 106 CHURCH STREET QUITMAN, MS 39355 64-0440512 0. 16,277. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY LS VALUED ON MENTALLY ILL, BATTERED, FOOD INVENTORY LS VALUED ON MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT LIS VALUED ON MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT LIS VALUED ON MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT LIS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF TO PROVIDE, WITHOUT TO PROVID	P.O. BOX 797					THE BASIS OF		ELDERLY, HANDICAPPED,
GREENVILLE GREENVILLE , MS 38701 64-0592494 0. 16,228 APPOXIMATIONS POOD MENTALLY ILL, BATTERED, FOOD TO HOMELESS, ELDRELY, HANDICAPPED, TO FROVIDE, WITHOUT ES VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDRELY, HANDICAPPED, TO FROVIDE, WITHOUT ES VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDRELY, HANDICAPPED, TO FROVIDE, WITHOUT ES VALUED ON CHARGE, FOOD TO HOMELESS, TO ELDRELY, HANDICAPPED, TO FROVIDE, WITHOUT ES VALUED ON CHARGE, FOOD TO HOMELESS, TO ELDRELY, HANDICAPPED, TO FROVIDE, WITHOUT ES VALUED ON CHARGE, FOOD TO HOMELESS, TO ELDRELY, HANDICAPPED, WITHOUT ES VALUED ON CHARGE, FOOD TO HOMELESS, TO ELDRELY, HANDICAPPED, TO FROVIDE, WITHOUT ES VALUED ON CHARGE, FOOD TO HOMELESS, TO ELDRELY, HANDICAPPED, TO FROVIDE, WITHOUT ES VALUED ON CHARGE, FOOD TO HOMELESS, TO ELDRELY, HANDICAPPED, THE BASIS OF ELDRELY, HANDICAPPED, TO FROVIDE, WITHOUT ES AND THE BASIS OF ELDRELY, HANDICAPPED, TO FROVIDE, WITHOUT ES ELDRELY,	FLORA, MS 39071-0000	64-0909922		0.	16,090.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
401 S HINDS ST GREENVILLE, MS 38701 64-0592494 0. 16,228. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MULTI-COUNTY CSA - CLARKE CO. 106 CHURCH STREET QUITMAN, MS 39355 64-0440512 0. 16,277. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, BEREAN SEVEN DAY ADVENTIST 770 JASMINE COURT MYSU UNIT 19 MYSU U						FOOD INVENTORY		TO PROVIDE, WITHOUT
GREENVILLE	GREENVILLE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
MULTI-COUNTY CSA - CLARKE CO. 16 CHURCH STREET QUITMAN, MS 39355 64-0440512 0. 16,277, APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF COUNTYING MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF CLORELY, HANDICAPPED, MENTALLY ILL, BATTERED, THE BASIS OF CLORELY, HANDICAPPED, THE BASIS OF T	401 S HINDS ST					THE BASIS OF		ELDERLY, HANDICAPPED,
MULTI-COUNTY CSA - CLARKE CO. 106 CHURCH STREET QUITMAN, MS 39355 64-0440512 0. 16,277. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, POOD INVENTORY IS VALUED ON MENTALLY ILL, BATTERED, POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF BEREAN SEVEN DAY ADVENTIST TO JASMINE COURT JACKSON, MS 39206 64-0901825 0. 16,320. APPROXIMATIONS POOD INVENTORY MVSU UNIT 19 IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOD INVENTORY TO PROVIDE, WITHOUT GREATER FAIRVIEW MB CHURCH GREATER FAIRVIEW MB CHURCH FOOD INVENTORY THE BASIS OF BELDERLY, HANDICAPPED, THE BASIS OF BELDERLY, HANDICA	GREENVILLE , MS 38701	64-0592494		0.	16,228.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
106 CHURCH STREET QUITMAN, MS 39355 64-0440512 0. 16,277. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 770 JASMINE COURT JACKSON, MS 39206 64-0901825 0. 16,320. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MYSU UNIT 19 MYSU UNIT 19 IS VALUED ON CHARGE, FOOD TO HOMELESS, 1400 HIGHWAY 82 ITTA BENA, MS 38941-0000 45-0469376 0. 16,336. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, GREATER FAIRVIEW MB CHURCH GREATER FAIRVIEW MB CHURCH FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, 60 PEACE STREET FOOD TO HOMELESS, 61 PEACE STREET FOOD TO HOMELESS, FOOD INVENTORY TRUE WORD MINISTRIES IS VALUED ON CHARGE, FOOD TO HOMELESS, 116 CARTER ST. QUITMAN, MS 39355 64-0741598 0. 16,960. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF CHARGE, FOOD TO HOMELESS, 116 CARTER ST. QUITMAN, MS 39355 64-0741598 0. 16,960. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MCCSA - WAYNE COUNTY TO PROVIDE, WITHOUT TO PROVIDE MUTHOUT TO PROVIDE MUTHO						FOOD INVENTORY		TO PROVIDE, WITHOUT
QUITMAN, MS 39355 64-0440512 0. 16,277. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	MULTI-COUNTY CSA - CLARKE CO.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY BEREAN SEVEN DAY ADVENTIST 770 JASMINE COURT JACKSON, MS 39206 64-0901825 0. 16,320. APPROXIMATIONS FOOD INVENTORY MYSU UNIT 19 1S VALUED ON CHARGE, FOOD TO HOMELESS, 1400 HIGHWAY 82 1THE BASIS OF THE BASIS OF T	106 CHURCH STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
BEREAN SEVEN DAY ADVENTIST 770 JASMINE COURT JACKSON, MS 39206 64-0901825 0. 16,320. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, 1400 HIGHWAY 82 1400 HIGHWAY 82 1THE BASIS OF THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT TRUE WORD MINISTRIES TO APPROXIMATIONS TO PROVIDE, WITHOUT TRUE WORD MINISTRIES TO PROVIDE, WITHOUT TRUE WORD MINISTRIES TO PROVIDE, WITHOUT TRUE WORD MINISTRIES TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT TRUE WORD MINISTRIES TO PROVIDE, WITHOUT TO PROVIDE WITHOUT TO PROV	QUITMAN, MS 39355	64-0440512		0.	16,277.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, JACKSON, MS 39206 64-0901825 0. 16,320. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 1400 HIGHWAY 82 ITTA BENA, MS 38941-0000 45-0469376 0. 16,336. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GREATER FAIRVIEW MB CHURCH OPERATE STREET FICKENS, MS 39146-0000 77-0645340 0. 16,548. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF THE BASIS OF CHARGE, FOOD TO HOMELESS,						FOOD INVENTORY		TO PROVIDE, WITHOUT
JACKSON, MS 39206 64-0901825 0. 16,320. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 1400 HIGHWAY 82 ITTA BENA, MS 38941-0000 45-0469376 0. 16,336. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, GREATER FAIRVIEW MB CHURCH GPEACE STREET FICKENS, MS 39146-0000 77-0645340 0. 16,548. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TRUE WORD MINISTRIES THE BASIS OF FOOD INVENTORY TRUE WORD MINISTRIES THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF THE BASIS OF THE BASIS OF CHARGE, FOOD TO HOMELESS, TO PROVIDE, WITHOUT TO P	BEREAN SEVEN DAY ADVENTIST					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY MVSU UNIT 19 IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF THE BASIS OF TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF THE BASIS OF TO PROVIDE, WITHOUT	770 JASMINE COURT					THE BASIS OF		ELDERLY, HANDICAPPED,
MYSU UNIT 19 1400 HIGHWAY 82 14100 HIGHWAY 82 1THE BASIS OF THE BASIS OF FOOD INVENTORY GREATER FAIRVIEW MB CHURCH 60 PEACE STREET PICKENS, MS 39146-0000 77-0645340 TRUE WORD MINISTRIES 116 CARTER ST. QUITMAN, MS 39355 64-0741598 MCCSA - WAYNE COUNTY IS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, HENDRO MENTALLY ILL, BATTERED, CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, HENDRO MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS,	JACKSON, MS 39206	64-0901825		0.	16,320.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, ITTA BENA, MS 38941-0000 45-0469376 0. 16,336. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GREATER FAIRVIEW MB CHURCH 60 PEACE STREET PICKENS, MS 39146-0000 77-0645340 0. 16,548. APPROXIMATIONS FOOD INVENTORY TRUE WORD MINISTRIES 16 CARTER ST. QUITMAN, MS 39355 64-0741598 0. 16,960. APPROXIMATIONS FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT SOUD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS,						FOOD INVENTORY		TO PROVIDE, WITHOUT
TITA BENA, MS 38941-0000 45-0469376 0. 16,336. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, PICKENS, MS 39146-0000 77-0645340 0. 16,548. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT TRUE WORD MINISTRIES 1S VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF QUITMAN, MS 39355 64-0741598 0. 16,960. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MCCSA - WAYNE COUNTY TO PROVIDE, WITHOUT TO PROVIDE AND PROVIDE AN	MVSU UNIT 19					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY GREATER FAIRVIEW MB CHURCH 60 PEACE STREET PICKENS, MS 39146-0000 77-0645340 0. 16,548. APPROXIMATIONS FOOD INVENTORY TO PROVIDE, WITHOUT TRUE WORD MINISTRIES 16 CARTER ST. QUITMAN, MS 39355 64-0741598 TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT 15 VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT	1400 HIGHWAY 82					THE BASIS OF		ELDERLY, HANDICAPPED,
GREATER FAIRVIEW MB CHURCH 60 PEACE STREET PICKENS, MS 39146-0000 77-0645340 0. 16,548. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD MENTALLY ILL, BATTERED, THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF QUITMAN, MS 39355 64-0741598 0. 16,960. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, FOOD TO HOMELESS,	ITTA BENA, MS 38941-0000	45-0469376		0.	16,336.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, PICKENS, MS 39146-0000 77-0645340 0. 16,548. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TRUE WORD MINISTRIES 116 CARTER ST. QUITMAN, MS 39355 64-0741598 0. 16,960. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT ELDERLY, HANDICAPPED, CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, FOOD TO HOMELESS,						FOOD INVENTORY		TO PROVIDE, WITHOUT
PICKENS, MS 39146-0000 77-0645340 0. 16,548. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, QUITMAN, MS 39355 64-0741598 0. 16,960. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MCCSA - WAYNE COUNTY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS,	GREATER FAIRVIEW MB CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
TO PROVIDE, WITHOUT TRUE WORD MINISTRIES 1S VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, QUITMAN, MS 39355 64-0741598 0. 16,960. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS,	60 PEACE STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
TRUE WORD MINISTRIES 116 CARTER ST. QUITMAN, MS 39355 64-0741598 12 VALUED ON THE BASIS OF QUITMAN, MS 39355 64-0741598 13 VALUED ON THE BASIS OF FOOD INVENTORY FOOD INVENTORY IS VALUED ON TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS,	PICKENS, MS 39146-0000	77-0645340		0.	16,548.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, QUITMAN, MS 39355 64-0741598 0. 16,960. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY MCCSA - WAYNE COUNTY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS,						FOOD INVENTORY		TO PROVIDE, WITHOUT
QUITMAN, MS 39355 64-0741598 0. 16,960. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY MCCSA - WAYNE COUNTY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS,	TRUE WORD MINISTRIES					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS,	116 CARTER ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
MCCSA - WAYNE COUNTY IS VALUED ON CHARGE, FOOD TO HOMELESS,	QUITMAN, MS 39355	64-0741598		0.	16,960.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
						FOOD INVENTORY		TO PROVIDE, WITHOUT
1100 BRADLEY DRIVE THE BASIS OF ELDERLY, HANDICAPPED,	MCCSA - WAYNE COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
	1100 BRADLEY DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,
WAYNESBORO, MS 39367 64-0440512 0. 16,968. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	WAYNESBORO, MS 39367	64-0440512		0.	16,968.	APPROXIMATIONS	FOOD	
FOOD INVENTORY TO PROVIDE, WITHOUT						FOOD INVENTORY		
HELPING HANDS, CLEVELAND CSFP IS VALUED ON CHARGE, FOOD TO HOMELESS,	HELPING HANDS, CLEVELAND CSFP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
404 N MLK DRIVE THE BASIS OF ELDERLY, HANDICAPPED,	404 N MLK DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,
CLEVELAND, MS 38732 64-0797349 0. 17,273. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	CLEVELAND, MS 38732	64-0797349		0.	17,273.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Othe	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
EVERS CARE/MS URBAN LEAGUE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
JOHN D BOWER SCHOOL OF POP HEA					THE BASIS OF		ELDERLY, HANDICAPPED,				
JACKSON, MS 39216	27-4272183		0.	17,294.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
PRVO, INC JEFF DAVIS CO.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
PO BOX 773					THE BASIS OF		ELDERLY, HANDICAPPED,				
PRENTISS, MS 39474	64-0433756		0.	17,370.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
COMPASSION FOOD MINISTRIES					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
18 COUNTY ROAD 386					THE BASIS OF		ELDERLY, HANDICAPPED,				
WATER VALLEY, MS 38965-0000	26-1235369		0.	17,410.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
TRIUMPH CHURCH FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
136 HONEYSUCKLE LANE					THE BASIS OF		ELDERLY, HANDICAPPED,				
VICKSBURG, MS 39183	64-0791444		0.	17,539.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
-					FOOD INVENTORY		TO PROVIDE, WITHOUT				
NORTHSIDE/EASTSIDE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
816 E. NORTHSIDE DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,				
CLINTON, MS 39056	27-3281949		0.	17,892.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
ENDLESS CHARITIES					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
PO BOX 955					THE BASIS OF		ELDERLY, HANDICAPPED,				
LELAND, MS 38756	35-2268408		0.	17,896.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
·				,	FOOD INVENTORY		TO PROVIDE, WITHOUT				
SHADY GROVE FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
285 N. SHADY GROVE RD					THE BASIS OF		ELDERLY, HANDICAPPED,				
SILVER CREEK, MS 39663	64-0796917		0.	18,136.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT				
WESLEY YOUTH FOUNDATION, INC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
PO BOX 713					THE BASIS OF		ELDERLY, HANDICAPPED,				
TCHULA, MS 39169	64-0859429		0.	18 149.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
					FOOD INVENTORY		TO PROVIDE, WITHOUT				
NEW COVENANT COMMUNITY FP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,				
P.O. BOX 39					THE BASIS OF		ELDERLY, HANDICAPPED,				
MANTEE, MS 39751	64-0836310		0.	18 177.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,				
	1					'					

Part II Continuation of Grants and Other	er Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
HELPING HANDS OF HUMPHREYS CO.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 511					THE BASIS OF		ELDERLY, HANDICAPPED,
BELZONI, MS 39038	64-0792268		0.	18,192.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WASHINGTON COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1040 S RACEWAY ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
GREENVILLE, MS 38703	64-0676325		0.	18,444.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
PRVO, INC - PERRY COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 348					THE BASIS OF		ELDERLY, HANDICAPPED,
NEW AUGUSTA, MS 39462	64-0433756		0.	18,810.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
TULANE BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
220 EAST THIRD STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
YAZOO CITY, MS 39194	90-0763733		0.	19,023.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
RULEVILLE AREA - CSFP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P. O. BOX 1608					THE BASIS OF		ELDERLY, HANDICAPPED,
INDIANOLA, MS 38751	64-0910480		0.	19,268.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
FAYETTE FIRST NEW LIFE SDA					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
216 MCNAIR ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
FAYETTE, MS 39069	80-0962461		0.	19,508.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
DREW AREA - CSFP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
502 OLIVER STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
DREW, MS 38737	64-0910480		0.	19,938.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
CENTRAL UNITED METHODIST CHURC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
500 N. FARISH STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39202	64-0647770		0.	20,136.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
-					FOOD INVENTORY		TO PROVIDE, WITHOUT
UNCLE JERRY'S FARM					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3179 LANEWOOD ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39213	81-4353145		0.	20,156.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

(g) Name and address of organization of government (g) Amount of cash grant properties of grant organization of government (g) Amount of cash grant properties of grant organization of government (g) Amount of cash grant properties of grant organization of government (g) Amount of cash grant properties of grant organization of government (g) Amount of cash grant properties of grant organization or government (g) Amount of government (g) Amount	Part II Continuation of Grants and Othe	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
S VALUED ON CHARGE, FOOD TO HOMBLESS, CON MINIST CON MINISTORY CON MINIS	• • • • • • • • • • • • • • • • • • • •	(b) EIN	` .f		noncash	valuation (book, FMV,					
COT MESSALIN ST						FOOD INVENTORY		TO PROVIDE, WITHOUT			
NAME	OSEOLA MCCARTY DEV. CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
PRVO_INC - LAMAR COUNTY PO BOX 787 PURVIS, MS 39475-0000 64-0433756 0. 20,712.APPROXIMATIONS POOD MEMPALLY ILL, BATTERED, FOOD INVENTORY JACKSON STREET MB CHURCH JACKSON ST. VICKEBURG, MS 39183 46-1310655 0. 20,752.APPROXIMATIONS POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, AND THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, AND THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ASS MCNAIR RD. FAVETTE, MS 39069 43-2058266 0. 20,901.APPROXIMATIONS POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ASS MCNAIR RD. FAVETTE, MS 39069 43-2058266 0. 20,901.APPROXIMATIONS POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ASS MCNAIR RD. FAVETTE, MS 39069 43-2058266 0. 20,901.APPROXIMATIONS POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ASS MCNAIR RD. FAVETTE, MS 39069 ASS MCNAIR RD. FAVETTE, MS 39069 43-2058266 0. 20,901.APPROXIMATIONS POOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ASS MCNAIR RD. FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY LOVE'S INCORPORATED (KITCHEN) FOOD INVENTORY LOVE'S INCORPORATED (KITCHEN) FOOD INVENTORY LOVE'S INCORPORATED (KITCHEN) FOOD INVENTORY FOR VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD T	607 MCSWAIN ST					THE BASIS OF		ELDERLY, HANDICAPPED,			
PRVO, INC - LAMAR COUNTY IS VALUED ON CHARGE, FOOD TO HOMELESS, PO BOX 787 CHARGE, FOOD TO HOMELESS, PO BOX 788 CHARGE, FOOD TO HOMELESS, PO BOX 788 CHARGE, FOOD TO HOMELESS, PO BOX 788 CHARGE, FOOD TO HOMELESS, PO BOX 789 CHARGE, FOOD TO HOMELESS, PO BOX 780 CHARGE, FOOD	HATTIESBURG, MS 39401	43-2006484		0.	20,420.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
DO BOX 787						FOOD INVENTORY		TO PROVIDE, WITHOUT			
PURVIS, MS 39475-0000 64-0433756 0. 20,712 APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	PRVO, INC - LAMAR COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
JACKSON STREET ME CHURCH JACKSON STREET ME CHURCH 1146 JACKSON ST. VICKSBURG, MS 39183 46-1310655 0. 20,756. APPROXIMATIONS FOOD INVENTORY IS VALUED ON THE BASIS OF FOOD INVENTORY TO FROVIDE, WITHOUT FINE GROVE BAPTIST CHURCH SAGE MCNAIR RD. PAYETTE, MS 39669 43-2058266 0. 20,901. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF FOOD INVENTORY SHARKEY COUNTY ENA 303 PARKWAY AVENUE BELDERLY, HANDICAPPED, THE BASIS OF FOOD INVENTORY TO FROVIDE, WITHOUT LOVE'S INCORPORATED (KITCHEN) P.O. BOX 562 MERIDIAN, MS 39302 64-600161 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO FROVIDE, WITHOUT TO FROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, MERIDIAN, MS 39302 64-670858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO FROVIDE, WITHOUT TO FROVIDE, WIT	PO BOX 787					THE BASIS OF		ELDERLY, HANDICAPPED,			
Jackson Street me Church	PURVIS, MS 39475-0000	64-0433756		0.	20,712.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
1416 JACKSON ST. VICKBURG MS 39183 46-1310655 0. 20,755. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, PINE GROVE BAPTIST CHURCH JIS VALUED ON CHARGE, FOOD TO HOMELESS, 3662 MCNAIR RD. FAVETTE, MS 39069 43-2058266 0. 20,901. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT SHARKEY COUNTY EMA 303 PARKMAY AVENUE ROLLING FORK, MS 39159 64-6001061 0. 20,936. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT LOVE'S INCORPORATED (KITCHEN) P.O. BOX 562 MERIDIAN, MS 39302 64-0570858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT LOVE'S INCORPORATED (KITCHEN) P.O. BOX 562 MERIDIAN, MS 39302 64-0570858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT LOVE'S INCORPORATED (KITCHEN) P.O. BOX 562 MERIDIAN, MS 39302 64-0570858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT LOVE'S INCORPORATED (KITCHEN) P.O. BOX 562 MERIDIAN, MS 39302 64-0570858 0. 21,934. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT LOVE'S INCORPORATED (KITCHEN) P.O. BOX 562 MERIDIAN, MS 39302 64-0570858 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT LOVE'S TROUBLE WITHOUT LOVE'S TROUBLE WITHOUT FOR THE BASIS OF BEDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT LOVE'S TROUBLE WITHOUT LOVE'S TROUBLE WITHOUT LOVE'S TROUBLE WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT LOVE'S TROUBLE WIT						FOOD INVENTORY		TO PROVIDE, WITHOUT			
VICKSBURG, MS 39183	JACKSON STREET MB CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
FOOD INVENTORY PINE GROVE BAPTIST CHURCH 3682 MCNAIR RD. FAYETTE, MS 39069 43-2058266 0. 20,901. APPROXIMATIONS FOOD INVENTORY FOOD INVENT	1416 JACKSON ST.					THE BASIS OF		ELDERLY, HANDICAPPED,			
PINE GROVE BAPTIST CHURCH 3682 MCNAIR RD. PAYETTE, MS 39069 43-2058266 0. 20,91. APPROXIMATIONS FOOD INVENTORY SHARKEY COUNTY EMA 303 PARKWAY AVENUE ROLLING FORK, MS 39159 64-6001061 0. 20,936. APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT LOVE'S INCORPORATED (KITCHEN) P.O. BOX 562 MERIDIAN, MS 39302 64-0670858 0. 20,948. APPROXIMATIONS FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV PO BOX 828 STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF	VICKSBURG, MS 39183	46-1310655		0.	20,756.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
3682 MCNAIR RD. PAYETTE, MS 39069 43-2058266 0. 20,901. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD ME						FOOD INVENTORY		TO PROVIDE, WITHOUT			
FAYETTE, MS 39069 43-2058266 0. 20,901. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON THE BASIS OF ROLLING FORK, MS 39159 64-6001061 0. 20,936. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD THE BASIS OF REIDIAN, MS 39302 64-0670858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV FOOD BOX 828 FOOD TO HOMELESS,	PINE GROVE BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
SHARKEY COUNTY EMA 303 PARKWAY AVENUE SHARKEY COUNTY EMA 303 PARKWAY AVENUE ROLLING FORK, MS 39159 64-6001061 0. 20,936. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD TO HOMELESS, FOOD TO HOMELESS, FOOD TO HOMELESS, FOOD THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD SER STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD TO HOMELESS, FOO	3682 MCNAIR RD.					THE BASIS OF		ELDERLY, HANDICAPPED,			
SHARKEY COUNTY EMA 303 PARKWAY AVENUE ROLLING FORK, MS 39159 64-6001061 0. 20,936 APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY LOVE'S INCORPORATED (KITCHEN) P.O. BOX 562 MERIDIAN, MS 39302 64-0670858 0. 20,948 APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV PO BOX 828 STARKVILLE, MS 39579 64-0508015 0. 21,034 APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF	FAYETTE, MS 39069	43-2058266		0.	20,901.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
303 PARKWAY AVENUE ROLLING FORK, MS 39159 64-6001061 0. 20,936. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 562 MERIDIAN, MS 39302 64-0670858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV PO BOX 828 STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, P.O. BOX 828 STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT PEARL STREET COMM. DEV. CORP. 2519 ROBINSON ST. 2519 ROBINSON ST. 2519 ROBINSON ST. 3510 ROBINSO						FOOD INVENTORY		TO PROVIDE, WITHOUT			
ROLLING FORK, MS 39159 64-6001061 0. 20,936. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY LOVE'S INCORPORATED (KITCHEN) F.O. BOX 562 MERIDIAN, MS 39302 64-0670858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, THE BASIS OF FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FO	SHARKEY COUNTY EMA					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
FOOD INVENTORY LOVE'S INCORPORATED (KITCHEN) P.O. BOX 562 MERIDIAN, MS 39302 64-0670858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT FOOD TO HOMELESS, THE BASIS OF FOOD TO HOMELESS, FOOD THE BASIS OF FLUERLY, HANDICAPPED,	303 PARKWAY AVENUE					THE BASIS OF		ELDERLY, HANDICAPPED,			
LOVE'S INCORPORATED (KITCHEN) P.O. BOX 562 MERIDIAN, MS 39302 64-0670858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV PO BOX 828 FO BOX 828 STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, PEARL STREET COMM. DEV. CORP. 2519 ROBINSON ST. JACKSON, MS 39209 75-2982650 0. 21,092. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD TO HOMELESS	ROLLING FORK, MS 39159	64-6001061		0.	20,936.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
P.O. BOX 562 MERIDIAN, MS 39302 64-0670858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV PO BOX 828 STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOU						FOOD INVENTORY		TO PROVIDE, WITHOUT			
MERIDIAN, MS 39302 64-0670858 0. 20,948. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV PO BOX 828 STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT THE BASIS OF FOOD INVENTORY JACKSON, MS 39209 75-2982650 0. 21,092. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE AND TO	LOVE'S INCORPORATED (KITCHEN)					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV PO BOX 828 STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FEARL STREET COMM. DEV. CORP. 2519 ROBINSON ST. JACKSON, MS 39209 75-2982650	P.O. BOX 562					THE BASIS OF		ELDERLY, HANDICAPPED,			
FOOD INVENTORY GOLDEN TRAINGLE PLANNING & DEV PO BOX 828 STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PEARL STREET COMM. DEV. CORP. 2519 ROBINSON ST. JACKSON, MS 39209 75-2982650 75-2982650 75-2982650 FOOD INVENTORY IS VALUED ON TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY THE BASIS OF FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE AND PROVIDE AND PR	MERIDIAN, MS 39302	64-0670858		0.	20,948.	APPROXIMATIONS		· · · · · · · · · · · · · · · · · · ·			
PO BOX 828 STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PEARL STREET COMM. DEV. CORP. 2519 ROBINSON ST. JACKSON, MS 39209 75-2982650 0. 21,092. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT PRVO, INC - COVINGTON COUNTY PO BOX 2343 THE BASIS OF ELDERLY, HANDICAPPED, ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	·				,	FOOD INVENTORY		·			
STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FEARL STREET COMM. DEV. CORP. 2519 ROBINSON ST. JACKSON, MS 39209 75-2982650 0. 21,092. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	GOLDEN TRAINGLE PLANNING & DEV					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
STARKVILLE, MS 39579 64-0508015 0. 21,034. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PEARL STREET COMM. DEV. CORP. 2519 ROBINSON ST. JACKSON, MS 39209 75-2982650 0. 21,092. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PRVO, INC - COVINGTON COUNTY PO BOX 2343 THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	PO BOX 828					THE BASIS OF		ELDERLY, HANDICAPPED,			
FOOD INVENTORY PEARL STREET COMM. DEV. CORP. 2519 ROBINSON ST. JACKSON, MS 39209 75-2982650 0. 21,092. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PRVO, INC - COVINGTON COUNTY PO BOX 2343 FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,	STARKVILLE MS 39579	64-0508015		0.	21,034.	APPROXIMATIONS		· · · · · · · · · · · · · · · · · · ·			
PEARL STREET COMM. DEV. CORP. 2519 ROBINSON ST. JACKSON, MS 39209 75-2982650 0. 21,092. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PRVO, INC - COVINGTON COUNTY PO BOX 2343 1S VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,					,			· · · · · · · · · · · · · · · · · · ·			
THE BASIS OF ELDERLY, HANDICAPPED, JACKSON, MS 39209 75-2982650 0. 21,092. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FRVO, INC - COVINGTON COUNTY PO BOX 2343 THE BASIS OF ELDERLY, HANDICAPPED, CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,	PEARL STREET COMM. DEV. CORP.					IS VALUED ON		·			
JACKSON, MS 39209 75-2982650 0. 21,092. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,								'			
FOOD INVENTORY PRVO, INC - COVINGTON COUNTY PO BOX 2343 FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,		75-2982650		0.	21,092.	APPROXIMATIONS		l '			
PRVO, INC - COVINGTON COUNTY PO BOX 2343 IS VALUED ON THE BASIS OF CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,	,				,			· · · · · ·			
PO BOX 2343 THE BASIS OF ELDERLY, HANDICAPPED,	PRVO, INC - COVINGTON COUNTY							· ·			
	•							· '			
	COLLINS, MS 39428-0000	64-0433756		0.	21,157.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			

Part II Continuation of Grants and Othe	r Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MULTI-COUNTY CAA FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
2900 SAINT PAUL STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
MERIDIAN, MS 39301	64-0440512		0.	21,242.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
ROSEMONT HUMAN SERVICES FP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3930 OFFICER THOMAS CATCHING D					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39209	64-0902648		0.	21,417.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
OVERFLOW FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
222 RAILROAD DR					THE BASIS OF		ELDERLY, HANDICAPPED,
MAGEE, MS 39111	20-2633045		0.	21,569.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
GRACE INSPIRATIONS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 10795					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39203	27-2390800		0.	21,717.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
ST. AUG FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1530 GOVERNMENT STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
BRANDON, MS 39042	38-3657625		0.	21,832.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
PRVO, INC., JONES COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1222 HILLCREST DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,
LAUREL, MS 39442-0000	64-0433756		0.	21 838.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
ROSE HILL M.B.C FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
6132 HWY 48 EAST					THE BASIS OF		ELDERLY, HANDICAPPED,
MAGNOLIA, MS 39652-0000	64-0675585		0.	21 932.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SPIRIT FOOD DELIVERANCE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
6465 OAK TREE DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39213	84-3862755		0.	22 118	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
	01 3002/33		· ·	22,110.	FOOD INVENTORY	1	TO PROVIDE, WITHOUT
PENTECOSTAL CHURCH OF GOD					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 1390					THE BASIS OF		ELDERLY, HANDICAPPED,
MERIDIAN, MS 39305	45-3428422		0.	22 102	APPROXIMATIONS	FOOD	· · · · · · · · · · · · · · · · · · ·
MEKIDIAN, MO 33303	43-3440444		<u> </u>	22,192.	PI LYOVINALION?	Ł OOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	iedule I (Form 990), Pa T	irt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MS OLA SCHOOL OF BARBERING AND					IS VALUED ON		CHARGE, FOOD TO HOMELESS
COMMUNITY DEVE - 5264 OLD HWY 42 -					THE BASIS OF		ELDERLY, HANDICAPPED,
HATTIESBURG, MS 39402	87-0811638		0.	22,240.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MAGEE'S CREEK M.B. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS
P.O. BOX 422					THE BASIS OF		ELDERLY, HANDICAPPED,
TYLERTOWN, MS 39667-0000	64-0808876		0.	22,339.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SUMRALL UMC FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS
P.O. BOX 276					THE BASIS OF		ELDERLY, HANDICAPPED,
SUMRALL, MS 39482	64-0683657		0.	22,496.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MALLORY COMMUNITY HEALTH CENTE					IS VALUED ON		CHARGE, FOOD TO HOMELESS
PO BOX 479					THE BASIS OF		ELDERLY, HANDICAPPED,
LEXINGTON, MS 39095-0000	64-0829371		0.	22,905.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
AMITE RIVER BAPTIST ASSN.					IS VALUED ON		CHARGE, FOOD TO HOMELESS
P.O. BOX 192					THE BASIS OF		ELDERLY, HANDICAPPED,
LIBERTY, MS 39645-0000	20-3686043		0.	23,083.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
ST. COLUMB'S IONA HOUSE F/P					IS VALUED ON		CHARGE, FOOD TO HOMELESS
550 SUNNYBROOK RD					THE BASIS OF		ELDERLY, HANDICAPPED,
RIDGELAND, MS 39157	64-0747951		0.	23,215.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
ANDERSON UNITED METHODIST CH					IS VALUED ON		CHARGE, FOOD TO HOMELESS
6205 HANGING MOSS ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39206-0000	83-0385896		0.	23,273.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				·	FOOD INVENTORY		TO PROVIDE, WITHOUT
RIVER OF LIFE FELLOWSHIP					IS VALUED ON		CHARGE, FOOD TO HOMELESS
P.O. BOX 1573					THE BASIS OF		ELDERLY, HANDICAPPED,
PRENTISS, MS 39474-0000	64-0848253		0.	24,002.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
CENTRAL MS FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS
2190 PINE GROVE ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
WALNUT GROVE, MS 39189	20-4825011		0.	24 280	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Other A	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WE CARE COMMUNITY SER. CSFP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
909 WALNUT STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
VICKSBURG, MS 39183-0000	51-0188737		0.	24,887.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
HOUSE OF HOPE MIN/OUTREACH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
418 MORGANTOWN ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
NATCHEZ, MS 39120	72-1353551		0.	24,889.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
GOOD SAMARITAN CENTER, INC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
114 MILLSAPS AVE					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39202	64-0538126		0.	25,185.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				-	FOOD INVENTORY		TO PROVIDE, WITHOUT
WESLEY HOUSE COMMUNITY CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 1207					THE BASIS OF		ELDERLY, HANDICAPPED,
MERIDIAN, MS 39301	64-0308403		0.	25,762.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				·	FOOD INVENTORY		TO PROVIDE, WITHOUT
MADCAPP FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 217					THE BASIS OF		ELDERLY, HANDICAPPED,
CANTON, MS 39046-0000	64-0719803		0.	25,767.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
,				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
PRVO, INC - MARION COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1183 HWY 13 SOUTH					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBIA, MS 39429-0000	64-0433756		0.	26 012.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
GTPDD - LOWNDES CO.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 828					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBUS, MS 39702	64-0508015		0.	26 022.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SOUTHERN FOUNDATION					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
317 DR. MLK DRIVE EAST, SUITE 102					THE BASIS OF		ELDERLY, HANDICAPPED,
STARKVILLE, MS 39759	58-2034687		0.	26 412	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
,	,		1	_=,122.	FOOD INVENTORY		TO PROVIDE, WITHOUT
EMERGENCY WATER DISTRIBUTION 2021					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
440 WEST BEATTY STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
440 WEST DEATTI STREET							

(a) Name and address of organization of government (b) EIN (c) IRC section of graphicable (c)	Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
S. VALUED ON CHARGE, POOD TO HOMBLESS, P.O. BOX 503 LAUREL, MS 39411 82-5325912 0. 26,553, APPROXIMATIONS POOD INVESTORY COUNTY ON THE RASES OF CHARGE, POOD TO HOMBLESS, P.O. BOX 874 COUNTY ON THE RASES OF COUNTY ON THE RA	. ,	(b) EIN	*		noncash	valuation (book, FMV,					
P.O. BOX 503 LAUREL, MS 39411 82-5325912 0. 26,553, APPROXIMATIONS FOOD INVENTORY P.B.M. MINISTRIES, INC. P.B.M. MINISTRIES, INC. P.B.M. MINISTRIES, INC. P.O. BOX 874 WOODVILLE, MS 39669 43-1954220 0. 26,875, APPROXIMATIONS FOOD INVENTORY BLABELY, ILL, BATTERED, WOODVILLE, MS 39669 43-1954220 0. 26,875, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, WOODVILLE, MS 39669 43-1954220 0. 26,875, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, BLOERLY, HANDICAPPED, WINDOWN CHARITY M.B. CRUTCH BRASIS OF BLOERLY, HANDICAPPED, WINDOWN CHARITY M.B. CRUTCH BRASIS OF BROWNITY ACTION AGENCY BY FLOWER STREET NATCHEZ, MS 39051 0000 45-0512838 0. 27,173, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, WINDOWN CHARLES, MS 39121 64-0442959 0. 27,231, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, WINDOWN CHARLES, MS 39121 64-0442959 0. 27,231, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, WINDOWN COMM. PAVILION BROWN COMM. PAVILION BROWN COMM. PAVILION WINDOWN COMM. PAV						FOOD INVENTORY		TO PROVIDE, WITHOUT			
AUREL, MS 39441 82-5325912 0. 26,553 APPROXIMATIONS FOOD MEMPHALLY ILL, BATTERED, P. B. M. MINISTRIES, INC. 15 VALUED ON CHARGE, FOOD TO HOMELESS, P. O. BOX 874 16 VALUED ON CHARGE, FOOD TO HOMELESS, P. O. BOX 874 17 VALUED ON CHARGE, FOOD TO HOMELESS, P. O. BOX 874 17 VALUED ON CHARGE, FOOD TO HOMELESS, P. O. BOX 875 17 VALUED ON CHARGE, FOOD TO HOMELESS, P. O. BOX 875 17 VALUED ON CHARGE, FOOD TO HOMELESS, S. SAPROXIMATIONS FOOD INVENTORY 15 VALUED ON CHARGE, FOOD TO HOMELESS, P. O. BOX 357 CHARGE, MS 39551 0000 45-0512838 0. 27,173 APPROXIMATIONS FOOD MEMPHALLY ILL, BATTERED, P. O. BOX 357 CHARGE, FOOD TO HOMELESS, P. O. BOX 357 CHARGE, MS 39121 64-0442959 0. 27,231 APPROXIMATIONS FOOD MEMPHALLY ILL, BATTERED, P. O. BOX 357 CHARGE, FOOD TO HOMELESS, P. O.	GLORY HOUSE GLOBAL OUTREACH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
FOOD INVENTORY TO PROVIDE, MITHOUT FOOD INVENTORY TO PROVIDE, MITHOUT FOOD INVENTORY TO PROVIDE, MITHOUT FOOD TO HOMELESS, P. O. BOX 874 FOOD TO HOMELESS, P. O. BOX 874 FOOD FOOD FOOD TO HOMELESS, P. O. BOX 874 FOOD FOOD FOOD FOOD TO HOMELESS, P. O. BOX 874 FOOD FOOD FOOD FOOD FOOD FOOD FOOD FO	P.O. BOX 503					THE BASIS OF		ELDERLY, HANDICAPPED,			
P.B.M. MINISTRIES, INC. IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. DOX 874 EDERLY, HANDICAPPED, MODDVILLE, MS 39669 43-1954220 0. 26,875, APPROXIMATIONS FOOD INVENTORY TO PROVIDE, NITHOUT CHARGE, MS 39051-0000 45-0512838 0. 27,173, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39051-0000 45-0512838 0. 27,173, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39051-0000 45-0512838 0. 27,173, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39121 64-0442959 0. 27,231, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MATCHER, MS 39121 64-0442959 0. 27,231, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39121 64-0442959 0. 27,472, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39121 64-0442959 0. 27,472, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39121 64-0578960 0. 27,472, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 391368 64-0578960 0. 27,472, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39168 64-0578960 0. 27,472, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39168 0. 27,832, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39168 0. 27,832, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39168 0. 27,832, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39168 0. 27,832, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39168 0. 27,832, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39168 0. 27,832, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39168 0. 27,832, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39168 0. 27,830, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MS 39169 MS	LAUREL, MS 39441	82-5325912		0.	26,553.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
P. O. BOX 874 WOODVILLE, MS 39669 43-1954220 0. 26,875 ************************************						FOOD INVENTORY		TO PROVIDE, WITHOUT			
NODDVILLE, MS 39669	P.B.M. MINISTRIES, INC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
FOOD INVENTORY IS VALUED ON INVENTORY IN PROVIDE, WITHOUT IS VALUED ON IN CHARGE, FOOD TO HOMELESS, IN PROVIDE, WITHOUT IN PROVIDE, WITHOUT IS VALUED ON IN CHARGE, FOOD TO HOMELESS, IN PROVIDE, WITHOUT IN PROVIDE, WITHOUT IS VALUED ON IN PROVIDE, WITHOUT I	P. O. BOX 874					THE BASIS OF		ELDERLY, HANDICAPPED,			
MOUNT CHARITY M.B. CHURCH	WOODVILLE, MS 39669	43-1954220		0.	26,875.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
THE BASIS OF ELDERLY, HANDICAPPED,						FOOD INVENTORY		TO PROVIDE, WITHOUT			
CARTHAGE, MS 39051 0000 45-0512838 0. 27,173. APPROXIMATIONS POOD MENTALLY ILL, BATTERED,	MOUNT CHARITY M.B. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
AJFC COMMUNITY ACTION AGENCY AJFC COMMUNITY ACTION AGENCY AJFC COMMUNITY ACTION AGENCY AJFC COMMUNITY ACTION AGENCY B FELTUS STREET NATCHEZ, MS 39121 64-0442959 0. 27,231, APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF TATLORSVILLE, MS 39168 64-0578960 0. 27,472, APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF TATLORSVILLE, MS 39168 64-0578960 0. 27,472, APPROXIMATIONS FOOD INVENTORY IS VALUED ON THE BASIS OF CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, TO PROVIDE, WITHOUT LEAKE COUNTY MCMILLAN PARK CARTHAGE, MS 39051 64-0676325 0. 29,017, APPROXIMATIONS FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVI	535 WOODS ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,			
AJFC COMMUNITY ACTION AGENCY 8 FEUTUS STREET 18 APPLICATION AGENCY 8 FEUTUS STREET 19 CHARGE, FOOD TO HOMELESS, 8 FEUTUS STREET 10 CHARGE, FOOD TO HOMELESS, 10 CHARGE, FOOD TO HOMELESS, 11 VALUED ON CHARGE, FOOD TO HOMELESS, 12 VALUED ON CHARGE, FOOD TO HOMELESS, 13 VALUED ON CHARGE, FOOD TO HOMELESS, 14 VALUED ON CHARGE, FOOD TO HOMELESS, 15 VALUED ON CHARGE, FOOD TO HOMELESS, 16 VALUED ON CHARGE, FOOD TO HOMELESS, 17 VALUED ON CHARGE, FOOD TO HOMELESS, 18 VALUED ON CHARCE, FOOD TO HOMELESS, 18 VALUED ON CHARCE, FOOD T	CARTHAGE, MS 39051-0000	45-0512838		0.	27,173.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
8 FELTUS STREET NATCHEZ, MS 39121 64-0442959 0. 27,231.APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FIRST BAPTIST CHURCH TAYLORSVILLE P.O. BOX 357 TAYLORSVILLE, MS 39168 64-0578960 0. 27,472.APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TIS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 357 TAYLORSVILLE, MS 39168 64-0578960 0. 27,472.APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, WINONA COMM. PAVILION TIS VALUED ON CHARGE, FOOD TO HOMELESS, 902 NORTH UNION WINONA, MS 38967 81-2603164 0. 27,832.APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TIS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 1113 FOREST, MS 39074 72-1357124 0. 27,890.APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TIS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 1113 FOREST, MS 39074 72-1357124 0. 27,890.APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TIS VALUED ON CHARGE, FOOD TO HOMELESS, MCMILLAN PARK CARTHAGE, MS 39051 64-0676325 0. 29,017.APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, OUR DAILY BREAD OF CALHOUN TO PROVIDE, WITHOUT						FOOD INVENTORY		TO PROVIDE, WITHOUT			
NATCHEZ, MS 39121 64-0442959 0. 27,231. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FIRST BAPTIST CHURCH TAYLORSVILLE FOOD INVENTORY FIRST BAPTIST CHURCH TAYLORSVILLE FOOD INVENTORY TIS VALUED ON FOOD INVENTORY TO PROVIDE, WITHOUT FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD TO HOMBLESS, FOOD	AJFC COMMUNITY ACTION AGENCY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 357 TAYLORSVILLE, MS 39168 64-0578960 0. 27,472. APPROXIMATIONS FOOD INVENTORY WINONA COMM. PAVILION WINONA COMM. PAVILION THE BASIS OF WINONA, MS 38967 81-2603164 0. 27,832. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT CRUDUP-WARD CENTER P.O. BOX 1113 FOOD INVENTORY IS VALUED ON THE BASIS OF CHARGE, FOOD TO HOMELESS, P.O. BOX 1113 FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, P.O. BOX 1113 FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, P.O. BOX 1113 FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, P.O. BOX 1113 FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, P.O. BOX 1113 FOOD INVENTORY TO PROVIDE, WITHOUT TO HOMELESS, P.O. BOX 206	8 FELTUS STREET					THE BASIS OF		ELDERLY, HANDICAPPED,			
FIRST BAPTIST CHURCH TAYLORSVILLE P.O. BOX 357 TAYLORSVILLE, MS 39168 64-0578960 0. 27,472, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY WINONA COMM. PAVILION 902 NORTH UNION WINONA, MS 38967 81-2603164 0. 27,832, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, WINONA, MS 38967 81-2603164 0. 27,832, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, WINONA, MS 38967 81-2603164 0. 27,832, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, CRUDUP-WARD CENTER FOOD INVENTORY CRUDUP-WARD CENTER FOREST, MS 39074 72-1357124 0. 27,890, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FO	NATCHEZ, MS 39121	64-0442959		0.	27,231.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
P.O. BOX 357 THE BASIS OF ELDERLY, HANDICAPPED, TAYLORSVILLE, MS 39168 64-0578960 0. 27,472. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 902 NORTH UNION WINONA, MS 38967 81-2603164 0. 27,832. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY CRUDUP-WARD CENTER P.O. BOX 1113 FOREST, MS 39074 72-1357124 0. 27,890. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, FOREST, MS 39074 72-1357124 0. 27,890. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT LEAKE COUNTY LEAKE COUNTY LEAKE COUNTY LEAKE COUNTY CARTIAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, THE BASIS OF ELDERLY, HANDICAPPED, OUR DAILY BREAD OF CALHOUN P.O. BOX 206						FOOD INVENTORY		TO PROVIDE, WITHOUT			
TAYLORSVILLE, MS 39168 64-0578960 0. 27,472. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY WINONA COMM. PAVILION UNIONA COMM. PAVILION UNIONA, MS 38967 81-2603164 0. 27,832. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, WINONA, MS 38967 81-2603164 0. 27,832. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY CRUDUP-WARD CENTER IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O.BOX 1113 FOREST, MS 39074 72-1357124 0. 27,890. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O.BOX 1113 FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, MCMILLAN PARK COUNTY MCMILLAN PARK CARTHAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 206 FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 206	FIRST BAPTIST CHURCH TAYLORSVILLE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
WINONA COMM. PAVILION 902 NORTH UNION WINONA, MS 38967 81-2603164 0. 27,832. APPROXIMATIONS FOOD INVENTORY CRUDUP-WARD CENTER P.O. BOX 1113 FOREST, MS 39074 72-1357124 0. 27,890. APPROXIMATIONS FOOD INVENTORY LEAKE COUNTY LEAKE COUNTY LEAKE COUNTY CARTHAGE, MS 39051 64-0676325 D. 29,017. APPROXIMATIONS FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT TO	P.O. BOX 357					THE BASIS OF		ELDERLY, HANDICAPPED,			
WINONA COMM. PAVILION 902 NORTH UNION WINONA, MS 38967 81-2603164 0. 27,832. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY CRUDUP-WARD CENTER P.O. BOX 1113 FOREST, MS 39074 72-1357124 0. 27,890. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY LEAKE COUNTY LEAKE COUNTY LEAKE COUNTY CARTHAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF CARTHAGE, MS 39051 FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	TAYLORSVILLE, MS 39168	64-0578960		0.	27,472.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
902 NORTH UNION WINONA, MS 38967 81-2603164 0. 27,832. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 1113 FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 27,890. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY LEAKE COUNTY LEAKE COUNTY LEAKE COUNTY CRITTING FOOD MENTALLY ILL, BATTERED, THE BASIS OF CARTHAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE AND PROVIDE AND PROVIDE						FOOD INVENTORY		TO PROVIDE, WITHOUT			
WINONA, MS 38967 81-2603164 0. 27,832. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY CRUDUP-WARD CENTER P.O.BOX 1113 FOREST, MS 39074 72-1357124 0. 27,890. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY LEAKE COUNTY LEAKE COUNTY LEAKE COUNTY CRUDITY CRUDITY CRUDITY LEAKE COUNTY LEAKE COUNTY CARTHAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, CARTHAGE, MS 39051 FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE AND PROVIDE AND PROVIDE AND PROVIDE AND PROVIDE AND	WINONA COMM. PAVILION					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
FOOD INVENTORY CRUDUP-WARD CENTER P.O.BOX 1113 FOREST, MS 39074 72-1357124 0. 27,890. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY LEAKE COUNTY LEAKE COUNTY MCMILLAN PARK CARTHAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE AND TO PROVIDE A	902 NORTH UNION					THE BASIS OF		ELDERLY, HANDICAPPED,			
CRUDUP-WARD CENTER P.O.BOX 1113 FOREST, MS 39074 72-1357124 0. 27,890. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY LEAKE COUNTY MCMILLAN PARK CARTHAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT OUR DAILY BREAD OF CALHOUN P.O. BOX 206	WINONA, MS 38967	81-2603164		0.	27,832.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
P.O.BOX 1113 FOREST, MS 39074 72-1357124 0. 27,890. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY LEAKE COUNTY MCMILLAN PARK CARTHAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, FOOD INVENTORY OUR DAILY BREAD OF CALHOUN P.O. BOX 206 THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,						FOOD INVENTORY		TO PROVIDE, WITHOUT			
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FOOD INVENTORY LEAKE COUNTY LEAKE COUNTY MCMILLAN PARK CARTHAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY OUR DAILY BREAD OF CALHOUN P.O. BOX 206 TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	P.O.BOX 1113					THE BASIS OF		ELDERLY, HANDICAPPED,			
LEAKE COUNTY MCMILLAN PARK CARTHAGE, MS 39051 OUR DAILY BREAD OF CALHOUN P.O. BOX 206 CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, ELDERLY, HANDICAPPED, ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	FOREST, MS 39074	72-1357124		0.	27,890.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
MCMILLAN PARK CARTHAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY OUR DAILY BREAD OF CALHOUN P.O. BOX 206 THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,					·	FOOD INVENTORY		TO PROVIDE, WITHOUT			
CARTHAGE, MS 39051 64-0676325 0. 29,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY OUR DAILY BREAD OF CALHOUN P.O. BOX 206 THE BASIS OF ELDERLY, HANDICAPPED,	LEAKE COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
FOOD INVENTORY OUR DAILY BREAD OF CALHOUN P.O. BOX 206 TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	MCMILLAN PARK					THE BASIS OF		ELDERLY, HANDICAPPED,			
FOOD INVENTORY OUR DAILY BREAD OF CALHOUN P.O. BOX 206 TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	CARTHAGE, MS 39051	64-0676325		0.	29,017.	APPROXIMATIONS		· '			
OUR DAILY BREAD OF CALHOUN P.O. BOX 206 IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED,	·				,			, , ,			
P.O. BOX 206 THE BASIS OF ELDERLY, HANDICAPPED,	OUR DAILY BREAD OF CALHOUN							· ·			
								,			
	BRUCE, MS 38915-0000	64-0466850		0.	29,162.	APPROXIMATIONS		·			

Part II Continuation of Grants and Othe	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
					FOOD INVENTORY		TO PROVIDE, WITHOUT			
MID-STATE OPPORTUNITY, INC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
204 NORTH CHURCH ST.					THE BASIS OF		ELDERLY, HANDICAPPED,			
CHARLESTON, MS 38921	64-0432686		0.	29,172.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
					FOOD INVENTORY		TO PROVIDE, WITHOUT			
TINNIN ROAD CHURCH OF CHRIST					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
118 BLUEBERRY LANE					THE BASIS OF		ELDERLY, HANDICAPPED,			
CLINTON, MS 39056	64-0855968		0.	29,538.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
					FOOD INVENTORY		TO PROVIDE, WITHOUT			
SACRED HEART FAMILY CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
1493 HWY 17 (PARISH CENTER)					THE BASIS OF		ELDERLY, HANDICAPPED,			
CAMDEN, MS 39045	64-0391585		0.	30,737.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
					FOOD INVENTORY		TO PROVIDE, WITHOUT			
TULANE BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
220 EAST THIRD STREET					THE BASIS OF		ELDERLY, HANDICAPPED,			
YAZOO CITY, MS 39194	90-0763733		0.	31,285.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
					FOOD INVENTORY		TO PROVIDE, WITHOUT			
MULTI-COUNTY CSA					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
PO BOX 905					THE BASIS OF		ELDERLY, HANDICAPPED,			
MERIDIAN, MS 39302-0000	64-0440512		0.	31,684.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
					FOOD INVENTORY		TO PROVIDE, WITHOUT			
CENTRAL UNITED METHODIST CHURC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
500 NORTH FARISH ST.					THE BASIS OF		ELDERLY, HANDICAPPED,			
JACKSON, MS 39202-0000	64-0647770		0.	31,939.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
·				,	FOOD INVENTORY		TO PROVIDE, WITHOUT			
MUSTARD TREE MISSIONS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
P.O. BOX 8048					THE BASIS OF		ELDERLY, HANDICAPPED,			
MERIDIAN, MS 39303-0000	06-1667783		0.	32,370.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
·				,	FOOD INVENTORY		TO PROVIDE, WITHOUT			
GOD'S WAREHOUSE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
155 OGELSBY RD					THE BASIS OF		ELDERLY, HANDICAPPED,			
STURGIS, MS 39769	64-0147200		0.	32,852.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT			
REVELS UNITED METH/CH - CSFP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,			
711 SOUTH BROADWAY STREET					THE BASIS OF		ELDERLY, HANDICAPPED,			
GREENVILLE, MS 38701-0000	64-0782005		0.	34,560.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,			
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(g) Name and address of organization or government (g) Amount of clesh grant or clesh grant or clesh grant or clesh grant or government (g) Amount of clesh grant or government (g) Amount of clesh grant or government (g) Amount of clesh grant (g) Amount	Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
NEW HORIZON	• • • • • • • • • • • • • • • • • • • •	(b) EIN	` .f		noncash	valuation (book, FMV,				
1750 ELLIE AVE JACKSON, MS 39204 57-0899274 0. 34,631. APPROXIMATIONS POOD MENTALLY ILL, BATTERED, JACKSON, MS 39204 57-0899274 0. 34,631. APPROXIMATIONS POOD MENTALLY ILL, BATTERED, CODE INVESTORY IS VALUED ON HEARING, FOOD TO HOMBLESS, ELDEBLY, HANDICAPPED, MERIDIAN, MS 39301 83-2114276 0. 35,323. APPROXIMATIONS POOD MENTALLY ILL, BATTERED, NOXUBEE CO. HUMAN RESOURCE AGE 12 WASHINGTON STREET HANDICAPPED, MERIDIAN, MS 39301 0000 64-0867266 0. 36,607. APPROXIMATIONS POOD MENTALLY ILL, BATTERED, THE BASES OF HEARING, POOD TO HOMBLESS, ELDEBLY, HANDICAPPED, MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT STANDARD P						FOOD INVENTORY		TO PROVIDE, WITHOUT		
STACKSON, MS 39204 57-0899274 0. 34,631 APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, RESIDENCE OF HOPE S VALUED ON CHARGE, FOOD TO HOMELESS,	NEW HORIZON					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON	1750 ELLIS AVE					THE BASIS OF		ELDERLY, HANDICAPPED,		
RESIDENCE OF HOPE 3901 KING ROAD 83 2114276 0. 35,323, APPROXIMATIONS FOOD INVESTORY NOXUBEE CO. HUMAN RESOURCE AGE 212 MASHINGTON STREET MACON, MS 39341-0000 64-0867266 0. 36,607, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MACON, MS 39341-0000 64-0867266 0. 36,607, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVESTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 212 MASHINGTON STREET MACON, MS 39341-0000 64-0867266 0. 36,607, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVESTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 252 MATERFORD RD. GREATER MT. CALVARY 450 WATERFORD RD. FOOD INVESTORY 15 VALUED ON FOOD INVESTORY 15 VALUED ON FOOD INVESTORY 15 VALUED ON THE BASIS OF FOOD INVESTORY 15 VALUED ON THE BASIS OF FOOD INVESTORY 15 VALUED ON THE BASIS OF THEODORE, AL 36582-0000 63-0821997 0. 38,430, APPROXIMATIONS FOOD INVESTORY 15 VALUED ON THE BASIS OF THEODORE, AL 36582-0000 63-0821997 0. 38,420, APPROXIMATIONS FOOD INVESTORY THE BASIS OF THE BASIS OF THEODORE, AL 36582-0000 FOOD INVESTORY THE BASIS OF THE BASIS	JACKSON, MS 39204	57-0899274		0.	34,631.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
### BASIS OF #### BASIS OF ##### BASIS OF ###### BASIS OF ######## BASIS OF ###################################						FOOD INVENTORY		TO PROVIDE, WITHOUT		
MERIDIAN, MS 39301 83-2114276 0. 35,323. APPROXIMATIONS POOD MENTALLY ILL, BATTERED,	RESIDENCE OF HOPE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, POOD INVENTORY CHARGE, FOOD TO HOMELESS, POOD CHARGE, FOOD CHARGE, FOOD CHARGE, FOOD CHARGE, FOOD CHARGE, FOOD CHARGE, FOO	3901 KING ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,		
NOXUBEE CO. HUMAN RESOURCE AGE 212 WASHINGTON STREET MACON, MS 39341-0000 64-0867266 0. 36,607, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FED BASIS OF MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT FEEDING THE GULF COAST S248 MOBILE SOUTH STREET THEODORE, AL 36582-0000 63-0821997 0. 38,420, APPROXIMATIONS FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FIRE BASIS OF FOOD INVENTORY FOOD	MERIDIAN, MS 39301	83-2114276		0.	35,323.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
THE BASIS OF ELDERLY, HANDICAPPED, MACON, MS 39341-0000 64-0867266 0. 36,607. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, GREATER MT. CALVARY 1S VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, THE BASIS OF CHARGE, FOOD TO HOMELESS, CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, CHARCH MINISTRIES JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD THE BASIS OF CHARGE, FOOD TO HOMELESS, 46 IRONWOOD ROAD THE BASIS OF CHARGE, FOOD TO HOMELESS, 46 IRONWOOD ROAD THE BASIS OF CHARGE, FOOD TO HOMELESS, 46 IRONWOOD ROAD THE BASIS OF CHARGE, FOOD TO HOMELESS, 46 IRONWOOD ROAD						FOOD INVENTORY		TO PROVIDE, WITHOUT		
MACON, MS 39341-0000 64-0867266 0. 36,607. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	NOXUBEE CO. HUMAN RESOURCE AGE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
GREATER MT. CALVARY 450 WATERFORD RD. BRANDON, MS 39042 64-0519382 0. 38,343, APPROXIMATIONS FOOD INVENTORY FEEDING THE GULF COAST FLEBASIS OF FLOOD INVENTORY FEEDING THE GULF COAST THE BASIS OF THE DOORE, AL 36582-0000 63-0821997 0. 38,420, APPROXIMATIONS FOOD INVENTORY TO PROVIDE, WITHOUT THE DOORE, AL 36582-0000 64-0797349 0. 38,420, APPROXIMATIONS THE BASIS OF THE BAS	212 WASHINGTON STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
GREATER MT. CALVARY 450 MATERFORD RD. BRANDON, MS 39042 64-0519382 0. 38,343. APPROXIMATIONS FOOD INVENTORY FEEDING THE GULF COAST 5248 MOBILE SOUTH STREET THEODORE, AL 36582-0000 63-0821997 0. 38,420. APPROXIMATIONS FOOD INVENTORY FOOD INVENTOR	MACON, MS 39341-0000	64-0867266		0.	36,607.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
### BASIS OF BLDERLY, HANDICAPPED, BRANDON, MS 39042 64-0519382 0. 38,343. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, POOD INVENTORY TO PROVIDE, WITHOUT TERDING THE GULF COAST 5248 MOBILE SOUTH STREET THEODORE, AL 36582-0000 63-0821997 0. 38,420. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, POOD INVENTORY TO PROVIDE, WITHOUT THEODORE, AL 36582-0000 63-0821997 0. 38,420. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, POOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF						FOOD INVENTORY		TO PROVIDE, WITHOUT		
BRANDON, MS 39042 64-0519382 0. 38,343. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FEEDING THE GULF COAST 5248 MOBILE SOUTH STREET THEODORE, AL 36582-0000 63-0821997 0. 38,420. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY HELFING HANDS OF CLEVELAND PO BOX 291 CLEVELAND, MS 38732 64-0797349 0. 39,222. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMBLESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMBLESS, FOOD INVENTORY JORDAN RIVERS JOES HWY 51 MM FIRE BASIS OF ELDERLY, HANDICAPPED, MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMBLESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMBLESS, FOOD INVENTORY NEW WHITE STONE M.B. CHURCH FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMBLESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMBLESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMBLESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMBLESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMBLESS, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMBLESS, FOOD TO HOMBLE	GREATER MT. CALVARY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
FEEDING THE GULF COAST 5248 MOBILE SOUTH STREET THEODORE, AL 36582-0000 63-0821997 0. 38,420. APPROXIMATIONS FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT TO	450 WATERFORD RD.					THE BASIS OF		ELDERLY, HANDICAPPED,		
FEEDING THE GULF COAST 5248 MOBILE SOUTH STREET THEODORE, AL 36582-0000 63-0821997 0. 38,420. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, THEODORE, AL 36582-0000 63-0821997 0. 38,420. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, CLEVELAND, MS 38732 64-0797349 0. 39,222. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, CLEVELAND, MS 38732 64-0797349 0. 39,222. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JORDAN RIVERS 3069 HWY 51 MM MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, MCCOMB, MS 38701 FOOD INVENTORY TO PROVIDE, WITHOUT SVALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF TO PROVIDE, WITHOUT JESUS CHURCH MINISTRIES 1S VALUED ON CHARGE, FOOD TO HOMELESS, TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED,	BRANDON, MS 39042	64-0519382		0.	38,343.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
THE BASIS OF ELDERLY, HANDICAPPED, THEODORE, AL 36582-0000 63-0821997 0. 38,420. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, PO BOX 291 CLEVELAND, MS 38732 64-0797349 0. 39,222. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, JORDAN RIVERS JORDAN RIVERS JORDAN RIVERS JORGAN MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT TO P						FOOD INVENTORY		TO PROVIDE, WITHOUT		
THEODORE, AL 36582-0000 63-0821997 0. 38,420. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY HELPING HANDS OF CLEVELAND FOOD SON 291 CLEVELAND, MS 38732 64-0797349 0. 39,222. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JORDAN RIVERS JOEPH STATES SOND STREET FOOD SON STREET FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE AND TO PRO	FEEDING THE GULF COAST					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
FOOD INVENTORY HELPING HANDS OF CLEVELAND PO BOX 291 CLEVELAND, MS 38732 64-0797349 0. 39,222. APPROXIMATIONS FOOD INVENTORY JORDAN RIVERS JORDAN RIVERS JORGAN MS 38648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT THE BASIS OF THE BASIS	5248 MOBILE SOUTH STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
HELPING HANDS OF CLEVELAND PO BOX 291 CLEVELAND, MS 38732 64-0797349 0. 39,222. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JORDAN RIVERS 3069 HWY 51 MM MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD THE BASIS OF ELDERLY, HANDICAPPED,	THEODORE, AL 36582-0000	63-0821997		0.	38,420.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
PO BOX 291 CLEVELAND, MS 38732 64-0797349 0. 39,222. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 3069 HWY 51 MM MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY THE BASIS OF ELDERLY, HANDICAPPED, MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, 422 PAP BROWN STREET GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY JESUS CHURCH MINISTRIES TO PROVIDE, WITHOUT TO PROVID						FOOD INVENTORY		TO PROVIDE, WITHOUT		
CLEVELAND, MS 38732 64-0797349 0. 39,222. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JORDAN RIVERS 3069 HWY 51 MM MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY NEW WHITE STONE M.B. CHURCH 422 PAP BROWN STREET GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD THE BASIS OF ELDERLY, HANDICAPPED,	HELPING HANDS OF CLEVELAND					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
JORDAN RIVERS JORDAN RIVERS 3069 HWY 51 MM MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON THE BASIS OF GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE AND WITHOUT TO PROVIDE AND WITHOUT TO PROVIDE AND WITHOUT TO PROVIDE AND WITHO	PO BOX 291					THE BASIS OF		ELDERLY, HANDICAPPED,		
JORDAN RIVERS 3069 HWY 51 MM MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY IS VALUED ON GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	CLEVELAND, MS 38732	64-0797349		0.	39,222.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
3069 HWY 51 MM MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY NEW WHITE STONE M.B. CHURCH 422 PAP BROWN STREET GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT HE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, FOOD INVENTORY JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD	<u> </u>					FOOD INVENTORY		TO PROVIDE, WITHOUT		
MCCOMB, MS 39648 61-1750382 0. 39,260. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY NEW WHITE STONE M.B. CHURCH 422 PAP BROWN STREET GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD CHARGE, FOOD TO HOMELESS, THE BASIS OF CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,	JORDAN RIVERS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
FOOD INVENTORY NEW WHITE STONE M.B. CHURCH 422 PAP BROWN STREET GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	3069 HWY 51 MM					THE BASIS OF		ELDERLY, HANDICAPPED,		
NEW WHITE STONE M.B. CHURCH 422 PAP BROWN STREET GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	MCCOMB, MS 39648	61-1750382		0.	39,260.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
THE BASIS OF ELDERLY, HANDICAPPED, GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,					·	FOOD INVENTORY		TO PROVIDE, WITHOUT		
GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	NEW WHITE STONE M.B. CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
GREENVILLE, MS 38701 84-1725294 0. 39,268. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD 1. SYALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,	422 PAP BROWN STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
FOOD INVENTORY JESUS CHURCH MINISTRIES IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	GREENVILLE, MS 38701	84-1725294		0.	39,268.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
JESUS CHURCH MINISTRIES 46 IRONWOOD ROAD IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	•				,			· · · · · · · · · · · · · · · · · · ·		
46 IRONWOOD ROAD THE BASIS OF ELDERLY, HANDICAPPED,	JESUS CHURCH MINISTRIES					IS VALUED ON		· ·		
	46 IRONWOOD ROAD					THE BASIS OF		· '		
	HEIDELBERG, MS 39439	64-0900392		0.	40,321.	APPROXIMATIONS	FOOD	l '		

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
HIGHLAND ELEM. SCHOOL					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
330 BRAME ST.					THE BASIS OF		ELDERLY, HANDICAPPED,		
RIDGELAND, MS 39157	64-0437641		0.	40,566.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
JACKSON REVIVAL CENTER CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
1616 ROBINSON ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39209	74-6051852		0.	41,054.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
PRVO, INC FORREST COUNTY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
100 W. FRONT STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
HATTIESBURG, MS 39401-0000	64-0433756		0.	41,664.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
MT. BEULAH CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 2171					THE BASIS OF		ELDERLY, HANDICAPPED,		
COLLINS, MS 39428	90-0517660		0.	41,720.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
MISSION OKOLONA					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P. O. BOX 537					THE BASIS OF		ELDERLY, HANDICAPPED,		
OKOLONA, MS 38860	64-0940178		0.	41,792.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
				·	FOOD INVENTORY		TO PROVIDE, WITHOUT		
CARROLL-MONTGOMERY BAP. ASSN.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 461					THE BASIS OF		ELDERLY, HANDICAPPED,		
WINONA, MS 38967-0000	64-0635647		0.	41,976.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
SUNFLOWER CO. CSFP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P. O. BOX 423					THE BASIS OF		ELDERLY, HANDICAPPED,		
INDIANOLA, MS 38751-0000	64-0910480		0.	42,319.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
			-	,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
TEAM INC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
1511 BRIDEWELL LANE					THE BASIS OF		ELDERLY, HANDICAPPED,		
PORT GIBSON, MS 39150	74-3094030		0.	42 505.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
	1 2 2 2 2 2 3 3		·	,-,-,-	FOOD INVENTORY		TO PROVIDE, WITHOUT		
JACKSON REVIVAL CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
1616 ROBINSON STREET					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39209	74-6051852		0.	42 757	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
	,1 0031032		· ·	1 12,757.		<u> </u>	<u></u>		

Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
HELPING HANDS OF HUMPHREYS CO.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 511					THE BASIS OF		ELDERLY, HANDICAPPED,
BELZONI, MS 39038	64-0792268		0.	43,262.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
CROSSGATES BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
8 CROSS WOODS ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
BRANDON, MS 39042	64-0636492		0.	44,099.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
CARY CHRISTIAN CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 57					THE BASIS OF		ELDERLY, HANDICAPPED,
CARY, MS 39054	64-0781589		0.	44,922.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WORD OF CHRIST					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3051 JR LYNCH STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39209	30-0195335		0.	45,866.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
JERUSALEM MB CHURCH FP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
16 ROANOKE BLVD.					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBUS, MS 39705	10-0007986		0.	48,713.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
VILLAGE OF DREAMS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
205 HENRY DR APT B					THE BASIS OF		ELDERLY, HANDICAPPED,
GREENVILLE, MS 38703	27-3768302		0.	49,705.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
•				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
CHUNKY COMMUNITY CHURCH FP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P. O. BOX 147					THE BASIS OF		ELDERLY, HANDICAPPED,
CHUNKY, MS 39323	64-0655937		0.	53,462.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
•				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
PLUM STREET SOUP KITCHEN					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1231 SUNSET DR. SUITE 242					THE BASIS OF		ELDERLY, HANDICAPPED,
GRENADA, MS 38901	64-0843457		0.	53.987.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FOOD INVENTORY		TO PROVIDE, WITHOUT
MADISON COUNTY CSA					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 1358					THE BASIS OF		ELDERLY, HANDICAPPED,
CANTON, MS 39046-0000	71-1027302		0.	54 293.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
			<u>``</u>	5-,-55.		F	, , , , , , , , , , , , , , , , , , , ,

Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SALVATION ARMY FP- HATTIESBURG					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 1750					THE BASIS OF		ELDERLY, HANDICAPPED,
HATTIESBURG, MS 39401	13-5562351		0.	57,646.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WORD OF CHRIST MINISTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3051 J.R. LYNCH STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39209	30-0195335		0.	58,295.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MS MINORITY FARMERS ALLIANCE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
30010 SHEPARD DRIVE EAST					THE BASIS OF		ELDERLY, HANDICAPPED,
OKOLONA, MS 38860	46-5131800		0.	59,872.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
SOUTHWEST MISS. OPPORTUNITY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P. O. BOX 1667					THE BASIS OF		ELDERLY, HANDICAPPED,
MCCOMB, MS 39648-0000	64-0433629		0.	60,737.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
EAST LOUISVILLE BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 706					THE BASIS OF		ELDERLY, HANDICAPPED,
LOUISVILLE, MS 39339	64-0531352		0.	60,890.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
COPIAH COUNTY HUMAN RESOURCES					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 448					THE BASIS OF		ELDERLY, HANDICAPPED,
HAZLEHURST, MS 39083	64-0837421		0.	63,580.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
·				·	FOOD INVENTORY		TO PROVIDE, WITHOUT
NEW LIFE FOOD MINISTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3000 STATE BLVD					THE BASIS OF		ELDERLY, HANDICAPPED,
MERIDIAN, MS 39307	83-0492577		0.	64,665.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
RIVERSIDE ELEMENTARY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
939 RIVERSIDE ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
AVON, MS 38723	64-0800516		0.	68,821.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
•				,	FOOD INVENTORY		TO PROVIDE, WITHOUT
TRUE LIGHT MINISTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O.BOX 1263					THE BASIS OF		ELDERLY, HANDICAPPED,
YAZOO CITY, MS 39194	56-2664789		0.	80 870.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

(a) Name and address of organization or government (b) EN (c) IFO section of applicable (c) Amount of cash grant produced assistance	Part II Continuation of Grants and Othe	r Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
EMERGES SDA CHURCH P.O. BOX 352 METCALFE, NS 38760 52-0643036 0. 86,914, APROXIMATIONS POOD INVENTORY LOOK 188,913, APPROXIMATIONS POOD INVENTORY LOOK 188,914, APPROXIMATIONS POOD INVENTORY LOOK 188,914,920,800 MENTALLY ILL, MATTERED, AND INVENTORY LOOK 188,914,920,800 MENTALLY ILL, MATTERED, MENTALLY ILL, MATTERED, AND INVENTORY LOOK 188,914,920,800 MENTALLY ILL, MATTERED, MENTALLY ILL, MATTERED, AND INVENTORY LOOK 188,914,914,914,914,914,914,914,914,914,914		(b) EIN	* .*.	1 ' ' .	noncash	valuation (book, FMV,		1
P.O. BOX 352 S2-0643036 D. 86,914, APPROXIMATIONS POOD MEMBELLY ILL, BATTERED, METCALFE, MS 38760 S2-0643036 D. 86,914, APPROXIMATIONS POOD INVESTORY CO PROVIDE, WITHOUT CORRESTONE CHURCH POOD PANTRY SYALUBD ON THE BASIS OF HEARER, POOD TO HOMBLESS, ELDERLY, HANDICAPPED, JACKSON, MS 39288 53-2101736 D. 89,413, APPROXIMATIONS POOD MEMBELLY ILL, BATTERED, JACKSON, MS 39288 S3-2101736 D. 89,413, APPROXIMATIONS POOD MEMBELLY ILL, BATTERED, JACKSON, MS 39288 S3-2101736 D. 89,492, APPROXIMATIONS POOD MEMBELLY, HANDICAPPED, MEMBELLY STREET S4AUBE ON THE BASIS OF HEARER, POOD TO HOMBLESS, ELDERLY, HANDICAPPED, MEMBELLY STREET S4AUBE ON THE BASIS OF HEARER, POOD TO HOMBLESS, P.O. 804,492, APPROXIMATIONS POOD MEMBELLY, HANDICAPPED, MEMBELLY HANDICAPPED, MEMBELSS, STANDARD HANDICAPPED, MEMBELSS						FOOD INVENTORY		TO PROVIDE, WITHOUT
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CORNERSTONE CHURCH FOOD PANTRY 1.5 VALUED ON 1.5 VALUED	METCALFE, MS 38760	52-0643036		0.	86,914.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
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MFN CFAP BOXES	JACKSON, MS 39288	53-2101736		0.	89,413.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
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SALVATION ARMY - VICKSBURG P.O. BOX 1166 THE BASIS OF THE	JACKSON, MS 39203	64-0676325		0.	94,492.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
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CENTER RIDGE BAPTIST CHURCH 2715 OLD BENTON ROAD IS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,				†				· · · · · · · · · · · · · · · · · · ·
2715 OLD BENTON ROAD THE BASIS OF ELDERLY, HANDICAPPED,	CENTER RIDGE BAPTIST CHURCH							'
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	YAZOO CITY, MS 39194	72-1383105		0.	122 040		FOOD	MENTALLY ILL, BATTERED,

(a) Name and address of organization or government (b) EIN (c) IRC section of papilicable (d) Amount of Cash grant properties of papilicable (e) Amount of Cash grant papilicable (e) Amount of Cash	Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
NID-SOUTH FOOD BANK BATESVILLE ST VALUED ON HEASTS OF HEARIST OF ELDERLY, HANDICAPPED, BATESVILLE, MS 38606 62-1340755 0. 128,729, APPROXIMATIONS FOOD INVENTORY ELDERLY, HANDICAPPED, STARKVILLE CHURCH OF GOD S VALUED ON HEARIST OF HEARIST	• • • • • • • • • • • • • • • • • • • •	(b) EIN	` .f		noncash	valuation (book, FMV,				
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STARKVILLE CHURCH OF GOD	BATESVILLE, MS 38606	62-1340755		0.	128,729.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
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MORE, INC. IS VALUED ON	STARKVILLE, MS 39759	23-7002419		0.	133,584.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
THE BASIS OF ELDERLY, HANDICAPPED,						FOOD INVENTORY		TO PROVIDE, WITHOUT		
DACKSON, MS 39206 82-5313976 0. 144,241. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	MORE, INC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
CHRISTIAN SERVICES, INC. P.O. BOX 1994 HATTIESBURG, MS 39403-0000 64-0730835 0. 154,122, APPROXIMATIONS FOOD INVENTORY IS VALUED ON THE BASIS OF FOOD INVENTORY IS VALUED ON MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF FLICKORY, MS 39332-0000 64-0655271 0. 154,888, APPROXIMATIONS FOOD INVENTORY IS VALUED ON THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF FLICKING MADICAPPED, MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT THE BASIS OF FOOD INVENTORY IS VALUED ON THE BASIS OF FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITH	59382 FLORAL DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,		
CHRISTIAN SERVICES, INC. P.O. BOX 1994 HATTIESBURG, MS 39403-0000 64-0730835 0. 154,122. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HICKORY BAP. CHURCH FOOD PANTRY PLO. BOX 219 HICKORY, MS 39332-0000 64-0655271 0. 154,888. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HICKORY, MS 39332-0000 64-0655271 0. 154,888. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HICKORY, MS 3932-0000 64-0655271 0. 154,888. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HICKORY, MS 3932-0000 64-0655271 0. 154,888. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HICKORY, MS 3932-0000 30-0271263 0. 159,422. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HICKORY, MS 39120-0000 30-0271263 0. 159,422. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HICKORY, MS 39111 64-0388677 0. 168,196. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HAGEE, MS 39111 64-0388677 0. 168,196. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HAGEE, MS 39103 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, HOUSE, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,	JACKSON, MS 39206	82-5313976		0.	144,241.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
P.O. BOX 1994 HATTIESBURG, MS 39403-0000 64-0730835 0. 154,122. APPROXIMATIONS FOOD MENNALLY ILL, BATTERED, FOOD INVENTORY FOOD HARRES, FOOD TO HOMBLESS, P.O. BOX 219 HICKORY, MS 39332-0000 64-0655271 0. 154,888. APPROXIMATIONS FOOD MENNALLY ILL, BATTERED, FOOD INVENTORY FILGRIM BAPTIST CHURCH FILGRIM BAPTIST CHURCH FILGRIM BLVD. NATCHEZ, MS 39120-0000 30-0271263 0. 159,422. APPROXIMATIONS FOOD MENNALLY ILL, BATTERED, FOOD INVENTORY FOOD MENNALLY ILL, BATTERED, FOOD MENNALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENNALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENNALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENNALLY ILL, BATTERED, FOOD MENNALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD ON CHARGE, FOOD TO HOMBLESS, P. O. BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENNALLY ILL, BATTERED, FOOD MENNALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD ON CHARGE, FOOD TO HOMBLESS, P. O. BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENNALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD ON CHARGE, FOOD TO HOMBLESS, P. O. BOX 1741						FOOD INVENTORY		TO PROVIDE, WITHOUT		
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FOOD INVENTORY HICKORY BAP. CHURCH FOOD PANTRY P.O. BOX 219 RICKORY, MS 39332-0000 64-0655271 0. 154,888. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FLOERLY, HANDICAPPED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, TO PROVIDE, WITHOUT TO	P.O. BOX 1994					THE BASIS OF		ELDERLY, HANDICAPPED,		
HICKORY BAP. CHURCH FOOD PANTRY P.O. BOX 219 HICKORY, MS 39332-0000 64-0655271 0. 154,888. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FILGRIM BAPTIST CHURCH IT PILGRIM BLVD. NATCHEZ, MS 39120-0000 30-0271263 0. 159,422. APPROXIMATIONS FOOD INVENTORY FIRST UMC MAGEE PO BOX 661 MAGEE, MS 39111 64-0388677 0. 168,196. APPROXIMATIONS FOOD INVENTORY SALVATION ARMY- COLUMBUS P. O. BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF COLUMBUS, MS 39703 13-5562351 0. 172,884, APPROXIMATIONS FOOD INVENTORY SOUTH PLEASANT HILL M. B. CHUR P. O. BOX 1741 THE BASIS OF ELDERLY, HANDICAPPED, CHARGE, FOOD TO HOMELESS, TO PROVIDE, WITHOUT TO PROVIDE, PROVIDE, PROVIDE, PROVIDE, PROVIDE, PROVIDE, PROVIDE, PROVIDE,	HATTIESBURG, MS 39403-0000	64-0730835		0.	154,122.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
P.O. BOX 219 HICKORY, MS 39332-0000 64-0655271 0. 154,888. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, NATCHEZ, MS 39120-0000 30-0271263 0. 159,422. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, NATCHEZ, MS 39120-0000 30-0271263 0. 159,422. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED,						FOOD INVENTORY		TO PROVIDE, WITHOUT		
HICKORY, MS 39332-0000 64-0655271 0. 154,888. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FILGRIM BAPTIST CHURCH IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, NATCHEZ, MS 39120-0000 30-0271263 0. 159,422. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FIRST UMC MAGEE FOOD TO HOMELESS, FOOD OF THE BASIS OF ELDERLY, HANDICAPPED, MAGEE, MS 39111 64-0388677 0. 168,196. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, FOOD TO PROVIDE, WITHOUT FOOD INVENTORY	HICKORY BAP. CHURCH FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
PILGRIM BAPTIST CHURCH 17 PILGRIM BLVD. NATCHEZ, MS 39120-0000 18 POOD INVENTORY IS VALUED ON THE BASIS OF THE BASIS OF THE BASIS OF TO PROVIDE, WITHOUT TO PROVIDE	P.O. BOX 219					THE BASIS OF		ELDERLY, HANDICAPPED,		
PILGRIM BAPTIST CHURCH 117 PILGRIM BLVD. NATCHEZ, MS 39120-0000 30-0271263 0. 159,422. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FIRST UMC MAGEE FOOD TO HOMELESS, FOOD TO HOMELESS, FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FIRST UMC MAGEE FOOD TO HOMELESS, FOOD INVENTORY FOOD INVENTORY FOOD TO HOMELESS, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD TO HOMELESS, FOOD THE BASIS OF FOOD THE BASIS	HICKORY, MS 39332-0000	64-0655271		0.	154,888.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
THE BASIS OF ELDERLY, HANDICAPPED, NATCHEZ, MS 39120-0000 30-0271263 0. 159,422. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FIRST UMC MAGEE FOOD SON 661 FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY SALVATION ARMY- COLUMBUS FOOD BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD TO HOMELESS, FOOD TO HOMELES						FOOD INVENTORY		TO PROVIDE, WITHOUT		
NATCHEZ, MS 39120-0000 30-0271263 0. 159,422. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FIRST UMC MAGEE FO BOX 661 MAGEE, MS 39111 64-0388677 0. 168,196. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD TO HOMELESS, FOOD TO HOMELESS, FOOD TO HOMELESS, FOOD TO HOMELESS, FOOD INVENTORY FOOD TO HOMELESS, FOOD TO HOME	PILGRIM BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
FOOD INVENTORY FIRST UMC MAGEE PO BOX 661 MAGEE, MS 39111 64-0388677 0. 168,196. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY SALVATION ARMY- COLUMBUS P. O. BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE AND PROVIDE A	117 PILGRIM BLVD.					THE BASIS OF		ELDERLY, HANDICAPPED,		
FIRST UMC MAGEE PO BOX 661 MAGEE, MS 39111 64-0388677 0. 168,196. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY SALVATION ARMY- COLUMBUS P. O. BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT SOUTH PLEASANT HILL M. B. CHUR P.O. BOX 1741 THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	NATCHEZ, MS 39120-0000	30-0271263		0.	159,422.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
PO BOX 661 MAGEE, MS 39111 64-0388677 0. 168,196. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY SALVATION ARMY- COLUMBUS P. O. BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT ELDERLY, HANDICAPPED, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT SOUTH PLEASANT HILL M. B. CHUR P.O. BOX 1741 FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,						FOOD INVENTORY		TO PROVIDE, WITHOUT		
MAGEE, MS 39111 64-0388677 0. 168,196. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY SALVATION ARMY- COLUMBUS P. O. BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY SOUTH PLEASANT HILL M. B. CHUR P.O. BOX 1741 THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	FIRST UMC MAGEE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
FOOD INVENTORY SALVATION ARMY- COLUMBUS P. O. BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, FOOD INVENTORY TO PROVIDE, WITHOUT	PO BOX 661					THE BASIS OF		ELDERLY, HANDICAPPED,		
SALVATION ARMY- COLUMBUS P. O. BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY SOUTH PLEASANT HILL M. B. CHUR P.O. BOX 1741 FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	MAGEE, MS 39111	64-0388677		0.	168,196.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
P. O. BOX 8 COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY SOUTH PLEASANT HILL M. B. CHUR P. O. BOX 1741 THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,					·	FOOD INVENTORY		TO PROVIDE, WITHOUT		
COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, P.O. BOX 1741 THE BASIS OF ELDERLY, HANDICAPPED,	SALVATION ARMY- COLUMBUS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
COLUMBUS, MS 39703 13-5562351 0. 172,884. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON CHARGE, FOOD TO HOMELESS, THE BASIS OF ELDERLY, HANDICAPPED,	P. O. BOX 8					THE BASIS OF		'		
FOOD INVENTORY SOUTH PLEASANT HILL M. B. CHUR P.O. BOX 1741 TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,	COLUMBUS, MS 39703	13-5562351		0.	172,884.	APPROXIMATIONS		· '		
SOUTH PLEASANT HILL M. B. CHUR P.O. BOX 1741 IS VALUED ON THE BASIS OF CHARGE, FOOD TO HOMELESS, ELDERLY, HANDICAPPED,	·				,			, , , , , , , , , , , , , , , , , , ,		
P.O. BOX 1741 ELDERLY, HANDICAPPED,	SOUTH PLEASANT HILL M. B. CHUR					IS VALUED ON		'		
l l	P.O. BOX 1741					THE BASIS OF		· ·		
	PRENTISS, MS 39474	64-0739331		0.	178,176.	APPROXIMATIONS		· '		

Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	nedule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
STATE LINE BAPTIST FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 2371					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBUS, MS 39704	20-0751119		0.	184,470.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
CHOCTAW COUNTY FOOD MINISTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 854					THE BASIS OF		ELDERLY, HANDICAPPED,
ACKERMAN, MS 39735	64-0917300		0.	192,625.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
NEW VISION OUTREACH MINISTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 1534					THE BASIS OF		ELDERLY, HANDICAPPED,
WAYNESBORO, MS 39367	77-0698762		0.	194,011.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
THE SALVATION ARMY FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P. O. BOX 422					THE BASIS OF		ELDERLY, HANDICAPPED,
MERIDIAN, MS 39302	13-5562351		0.	196,507.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
GRENADA FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 104					THE BASIS OF		ELDERLY, HANDICAPPED,
GRENADA, MS 38902	64-0805470		0.	196,808.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WINGARD HOME, INC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1279 N. WEST ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39202	20-3861944		0.	200,183.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
FIRST ASSEMBLY NATCHEZ/F/P					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
150 LIBERTY ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
NATCHEZ, MS 39120	64-6008816		0.	211,042.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
TULANE BAPTIST CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
220 EAST 3RD STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
YAZOO CITY, MS 39194	90-0763733		0.	211,562.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
THE SALVATION ARMY-LAUREL					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 2548					THE BASIS OF		ELDERLY, HANDICAPPED,
LAUREL, MS 39442	13-5562351		0.	213,337.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
TWELVE BASKETS FOOD BANK					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
333 COWAN ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,		
GULFPORT, MS 39507-0000	64-0466850		0.	222,398.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
PROJECT HOMESTEAD					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 891					THE BASIS OF		ELDERLY, HANDICAPPED,		
WEST POINT, MS 39773-0000	64-0908819		0.	229,215.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
NEW WAY MISSISSIPPI					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 24404					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39225	73-1631055		0.	231,092.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
MERCY HOUSE OF GEORGETOWN-TC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 266					THE BASIS OF		ELDERLY, HANDICAPPED,		
GEORGETOWN, MS 39078	45-4670832		0.	234,393.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
NEWMAN SERVICES FOUNDATION					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 962					THE BASIS OF		ELDERLY, HANDICAPPED,		
TERRY, MS 39170	27-2390800		0.	238,634.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
					FOOD INVENTORY		TO PROVIDE, WITHOUT		
HELPING HANDS MINISTRIES					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 299					THE BASIS OF		ELDERLY, HANDICAPPED,		
KOSCIUSKO, MS 39090	64-0744335		0.	248,259.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
·				,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
SCOTT CO. BAPTIST ASSOC.CRISIS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
518 AIRPORT ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,		
FOREST, MS 39074	64-0527876		0.	271,212.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
				,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
HOPE VILLAGE FOR CHILDREN					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
P.O. BOX 26					THE BASIS OF		ELDERLY, HANDICAPPED,		
MERIDIAN, MS 39302	64-0927575		0.	271,219.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
,	1			,	FOOD INVENTORY		TO PROVIDE, WITHOUT		
MIDTOWN/JLJ					IS VALUED ON		CHARGE, FOOD TO HOMELESS,		
C/O MFN CASSANDRA GUESS					THE BASIS OF		ELDERLY, HANDICAPPED,		
JACKSON, MS 39205	64-6000505		0.	273,273.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,		
	1		<u> </u>	, _ , _ ,			1		

Part II Continuation of Grants and Othe	r Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
PINELAKE CHURCH CARE CENTER					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
6071 HWY 25					THE BASIS OF		ELDERLY, HANDICAPPED,
BRANDON, MS 39047-0000	64-0538192		0.	274,660.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
EDWARDS STREET FELLOWSHIP CENT					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 17532					THE BASIS OF		ELDERLY, HANDICAPPED,
HATTIESBURG, MS 39404	64-0698304		0.	282,361.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
ST. ANDREWS MISSION S/K					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 1407					THE BASIS OF		ELDERLY, HANDICAPPED,
MCCOMB, MS 39649-0000	64-0880295		0.	302,303.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WORLD OVERCOMERS FOOD OUTREACH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 2772					THE BASIS OF		ELDERLY, HANDICAPPED,
MADISON, MS 39130	64-0927276		0.	309,867.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MORRISON HEIGHTS BAPTIST CHURC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3000 HAMPSTEAD BOULEVARD					THE BASIS OF		ELDERLY, HANDICAPPED,
CLINTON, MS 39056-0000	64-6011952		0.	314,223.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
RIVER CITY MISSION FP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
3705 WASHINGTON ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
VICKSBURG, MS 39180	64-0851447		0.	333,120.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MS CENTER P & SH. (HOPE HOME)					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PO BOX 1201					THE BASIS OF		ELDERLY, HANDICAPPED,
RAYMOND, MS 39154-0000	71-1004096		0.	369,651.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
MARION COUNTY FOOD PANTRY					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P O BOX 27					THE BASIS OF		ELDERLY, HANDICAPPED,
COLUMBIA, MS 39429	64-0828677		0.	371,141.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
WE WILL GO MINISTRIES					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
806 NORTH FARISH ST.					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39202	33-1069413		0.	377,695.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,

302 W JACKSON STREET RIDGELAND, MS 39157 64-0574836 0. 390,589. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY EVER REACHING COMM. OUTREACH 306 N BROOKS AVE FELAHATCHIE, MS 39143 36-4756928 0. 402,174. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS THE BASIS OF ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT	Part II Continuation of Grants and Othe	er Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	rt II.)	
EXALUED ON		(b) EIN	* .*.	1 ' ' .	noncash	valuation (book, FMV,		, , , ,
302 W JACKSON STREET						FOOD INVENTORY		TO PROVIDE, WITHOUT
RIDGELAND, MG 39157 64-0574836 0. 390,589. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, EVER REACHING COMM. OUTERACH EVER REACHING COMM. OUTERACH BOOD INVENTORY EVER REACHING COMM. OUTERACH BOOD INVENTORY EVER REACHING COMM. OUTERACH BOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDLCAPPED, PELAIRITCHIE, MS 39143 36-4756928 0. 402,174. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT THE POINTE CHURCH FF IS VALUED ON THE BASIS OF ELDERLY, HANDLCAPPED, BRANDON, MS 39042 81-5377308 0. 414,077. APPROXIMATIONS FOOD INVENTORY PETAL CHILDREN'S TASK FORCE BIAS SPACE BOOD INVENTORY PETAL CHILDREN'S TASK FORCE BIAS SPACE BOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT CREENWOOD INTERFAITH MINISTRIE FOOD INVENTORY GREENWOOD, MS 38935 8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY I	FIRST RIDGELAND CHURCH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
EVER REACHING COMM. OUTREACH EVER REACHING COMM. OUTREACH 36 N BROOKS AVE PELAHATCHIE, MS 39143 36-4756928 0. 402,174. APPROXIMATIONS FOOD INVENTORY IS VALUED ON HERBASIS OF HERBASIS OF HERBASIS OF PELAHATCHIE, MS 39143 36-4756928 0. 402,174. APPROXIMATIONS FOOD INVENTORY THE POINTE CHURCH FF IS VALUED ON HERBASIS OF HERBAS	302 W JACKSON STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
EVER REACHING COMM. OUTREACH SOUTH AND CLARGE, FOOD TO HOMELESS 306 N BROOKS AVE HE BASIS OF ELDERLY, HANDICAPPED, PELLAHATCHIE, MS 39143 36-4756928 0, 402,174. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY CHARGE, FOOD TO HOMELESS 1120 STAR ROAD ELDERLY, HANDICAPPED, SEARCH	RIDGELAND, MS 39157	64-0574836		0.	390,589.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, PELAHATCHIE, MS 39143 36-4756928 0. 402,174. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE CHURCH FP 1. VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, BRANDON, MS 39042 81-5377308 0. 414,077. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, PETAL CHILDREN'S TASK FORCE 1. VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, FOOD TO HOWELESS IN THE BASIS OF ELDERLY, HANDICAPPED, FOOD TO HOWELESS						FOOD INVENTORY		TO PROVIDE, WITHOUT
PELAHATCHIE, MS 39143 36-4756928 0. 402,174. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IN PROVIDE, WITHOUT THE POINTE CHURCH FP	EVER REACHING COMM. OUTREACH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY TO PROVIDE, WITHOUT IS VALUED ON	306 N BROOKS AVE					THE BASIS OF		ELDERLY, HANDICAPPED,
THE FOINTE CHURCH FF 1120 STAR ROAD RANDON, MS 39042 81-5377308 81-5377308 0. 414,077. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FETAL CHILDREN'S TASK FORCE 314 S. GEORGE STREET FETAL, MS 39465 64-0897384 0. 457,221. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD FORWIDE, WITHOUT FORWING, POOD INVENTORY FORWING, POOD MENTALLY ILL, BATTERED, FOOD INV	PELAHATCHIE, MS 39143	36-4756928		0.	402,174.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
1120 STAR ROAD BRANDON, MS 39042 81-5377308 0. 414,077. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY ILL, B						FOOD INVENTORY		TO PROVIDE, WITHOUT
BRANDON, MS 39042 81-5377308 0, 414,077. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS 314 S. GEORGE STREET PETAL, MS 39465 64-0897384 0. 457,221. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS 314 S. GEORGE STREET PETAL, MS 39465 64-0897384 0. 457,221. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS OF ELDERLY, HANDICAPPED, GREENWOOD, MS 38935-8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS OF ELDERLY, HANDICAPPED, GREENWOOD, MS 39759 5TARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS OF ELDERLY, HANDICAPPED, GREENWOOD, MS 39602-0000 64-0804351 0. 586,088 APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, GREENWOOD, MS 39602-0000 64-0804351 0. 586,088 APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT THE BASIS OF ELDERLY, HANDICAPPED, GREENWILLE, MS 39602-0000 64-0804351 0. 586,088 APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD TO HOMELESS OF THE BASIS OF ELDERLY, HANDICAPPED, WITHOUT TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT THE BASIS OF THE BAS	THE POINTE CHURCH FP					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
PETAL CHILDREN'S TASK FORCE 314 S. GEORGE STREET PETAL, MS 39465 64-0897384 0. 457,221. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GREENWOOD INTERPAITH MINISTRIE GREENWOOD, MS 38935-8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GREENWOOD, MS 38935-8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY	1120 STAR ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
PETAL CHILDREN'S TASK FORCE 314 S. GEORGE STREET PETAL, MS 39465 64-0897384 0. 457,221, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GREENWOOD INTERFAITH MINISTRIE PO BOX 8223 GREENWOOD, MS 38935-8223 30-0215847 0. 463,017, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY PINELAKE CARE CTRSTARKVILLE 200 HWY 25 N STARKVILLE, MS 39759 64-0538192 0. 489,190, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY BROOKHAVEN OUTREACH MINISTRIES P.O. BOX 1158 BROOKHAVEN, MS 39602-0000 64-0804351 0. 586,088, APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY ILL,	BRANDON, MS 39042	81-5377308		0.	414,077.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
THE BASIS OF ELDERLY, HANDICAPPED, PETAL, MS 39465 64-0897384 0. 457,221. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GREENWOOD INTERFAITH MINISTRIE FOOD INVENTORY GREENWOOD, MS 38935-8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FINELAKE CARE CTRSTARKVILLE 200 HWY 25 N STARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY ILL,						FOOD INVENTORY		TO PROVIDE, WITHOUT
PETAL, MS 39465 64-0897384 0. 457,221. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY GREENWOOD INTERFAITH MINISTRIE FO BOX 8223 GREENWOOD, MS 38935-8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENT	PETAL CHILDREN'S TASK FORCE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
FOOD INVENTORY GREENWOOD INTERFAITH MINISTRIE PO BOX 8223 THE BASIS OF GREENWOOD, MS 38935-8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD INVENTORY PINELAKE CARE CTRSTARKVILLE 200 HWY 25 N STARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD INVENTORY FOOD INV	314 S. GEORGE STREET					THE BASIS OF		ELDERLY, HANDICAPPED,
GREENWOOD INTERFAITH MINISTRIE PO BOX 8223 GREENWOOD, MS 38935-8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS 200 HWY 25 N STARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS 200 HWY 25 N STARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS P.O. BOX 1158 BROOKHAVEN, MS 39602-0000 64-0804351 0. 586,088. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS P.O. BOX 5005 FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS P.O. BOX 5005 FOOD INVENTORY TO PROVIDE, WITHOUT HEARTY HELPINGS P.O. BOX 5005 GREENVILLE, MS 38704 26-3170356 0. 766,100. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT	PETAL, MS 39465	64-0897384		0.	457,221.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
PO BOX 8223 GREENWOOD, MS 38935-8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FINELAKE CARE CTRSTARKVILLE 200 HWY 25 N STARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, THE BASIS OF FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD MENTALLY ILL, BATTERED, FOOD MENTALY ILL, BATTERED,	·				·	FOOD INVENTORY		TO PROVIDE, WITHOUT
GREENWOOD, MS 38935-8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, STARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT HEARTY HELPINGS P.O. BOX 5005 GREENVILLE, MS 38704 26-3170356 0. 766,100. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT	GREENWOOD INTERFAITH MINISTRIE					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
GREENWOOD, MS 38935-8223 30-0215847 0. 463,017. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY IS VALUED ON THE BASIS OF ELDERLY, HANDICAPPED, STARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT HEARTY HELPINGS P.O. BOX 5005 GREENVILLE, MS 38704 26-3170356 0. 766,100. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT	PO BOX 8223					THE BASIS OF		ELDERLY, HANDICAPPED,
PINELAKE CARE CTRSTARKVILLE 200 HWY 25 N STARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY BROOKHAVEN OUTREACH MINISTRIES P.O. BOX 1158 BROOKHAVEN, MS 39602-0000 64-0804351 0. 586,088. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY BROOKHAVEN, MS 39602-0000 64-0804351 0. 586,088. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT	GREENWOOD, MS 38935-8223	30-0215847		0.	463,017.	APPROXIMATIONS	FOOD	
PINELAKE CARE CTRSTARKVILLE 200 HWY 25 N STARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY BROOKHAVEN OUTREACH MINISTRIES P.O. BOX 1158 BROOKHAVEN, MS 39602-0000 64-0804351 0. 586,088. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT STARKVILLE, MS 39602-0000 64-0804351 0. 586,088. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT STARKVILLE, MS 38704 15 VALUED ON CHARGE, FOOD TO HOMELESS THE BASIS OF TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT	·				·	FOOD INVENTORY		TO PROVIDE, WITHOUT
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STARKVILLE, MS 39759 64-0538192 0. 489,190. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY BROOKHAVEN OUTREACH MINISTRIES P.O. BOX 1158 BROOKHAVEN, MS 39602-0000 64-0804351 0. 586,088. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT HEARTY HELPINGS P.O. BOX 5005 F.O. BOX 5005 GREENVILLE, MS 38704 26-3170356 0. 766,100. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT	200 HWY 25 N					THE BASIS OF		ELDERLY, HANDICAPPED.
FOOD INVENTORY BROOKHAVEN OUTREACH MINISTRIES P.O. BOX 1158 BROOKHAVEN, MS 39602-0000 64-0804351 0. 586,088. APPROXIMATIONS FOOD INVENTORY HEARTY HELPINGS P.O.BOX 5005 GREENVILLE, MS 38704 TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS THE BASIS OF ELDERLY, HANDICAPPED, TO PROVIDE, WITHOUT	STARKVILLE MS 39759	64-0538192		0.	489,190,	APPROXIMATIONS	FOOD	·
BROOKHAVEN OUTREACH MINISTRIES P.O. BOX 1158 BROOKHAVEN, MS 39602-0000 64-0804351 0. 586,088. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON CHARGE, FOOD TO HOMELESS P.O. BOX 5005 GREENVILLE, MS 38704 26-3170356 CHARGE, FOOD TO HOMELESS THE BASIS OF CHARGE, FOOD TO HOMELESS TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT	,				,			· · · · · · · · · · · · · · · · · · ·
P.O. BOX 1158 BROOKHAVEN, MS 39602-0000 64-0804351 0. 586,088. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY IS VALUED ON P.O. BOX 5005 GREENVILLE, MS 38704 26-3170356 0. 766,100. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, TO PROVIDE, WITHOUT On Provide, WITHOUT TO PROVIDE, WITHOUT	BROOKHAVEN OUTREACH MINISTRIES					IS VALUED ON		· · · · · · · · · · · · · · · · · · ·
BROOKHAVEN, MS 39602-0000 64-0804351 0. 586,088. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT HEARTY HELPINGS P.O.BOX 5005 GREENVILLE, MS 38704 26-3170356 0. 766,100. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT								· '
FOOD INVENTORY HEARTY HELPINGS P.O.BOX 5005 GREENVILLE, MS 38704 26-3170356 TO PROVIDE, WITHOUT CHARGE, FOOD TO HOMELESS ELDERLY, HANDICAPPED, FOOD INVENTORY TO PROVIDE, WITHOUT TO PROVIDE, WITHOUT		64-0804351		0.	586 088.		FOOD	· · · · · · · · · · · · · · · · · · ·
HEARTY HELPINGS P.O.BOX 5005 GREENVILLE, MS 38704 26-3170356 1S VALUED ON CHARGE, FOOD TO HOMELESS THE BASIS OF ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT				-		+		· · · · · · · · · · · · · · · · · · ·
P.O.BOX 5005 GREENVILLE, MS 38704 26-3170356 THE BASIS OF 0. 766,100. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT	HEARTY HELPINGS							· '
GREENVILLE, MS 38704 26-3170356 0. 766,100. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED, FOOD INVENTORY TO PROVIDE, WITHOUT								
FOOD INVENTORY TO PROVIDE, WITHOUT		26-3170356		0	766 100		FOOD	· · · · · · · · · · · · · · · · · · ·
				†	100,200	+		
CIMAGE, 1000 TO NOMBERED	OUR DAILY BREAD							·
P.O. BOX 1021 THE BASIS OF ELDERLY, HANDICAPPED,								· '
CANTON, MS 39046-1021 42-1741521 0. 769,789. APPROXIMATIONS FOOD MENTALLY ILL, BATTERED,		42-1741521		n	769 789		FOOD	l '

Part II Continuation of Grants and Other	er Assistance to Don	nestic Organizations	and Domestic Go	overnments (Sch	nedule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					FOOD INVENTORY		TO PROVIDE, WITHOUT
VINE PLACE COMMUNITY OUTREACH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
124 VINE DRIVE					THE BASIS OF		ELDERLY, HANDICAPPED,
BRANDON, MS 39047	84-2146885		0.	792,377.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
CARE CENTER MINISTRIES MS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 4458					THE BASIS OF		ELDERLY, HANDICAPPED,
BRANDON, MS 39047	83-3042924		0.	797,981.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE, WITHOUT
CHRISTIAN SERVICES, INC.					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 1994					THE BASIS OF		ELDERLY, HANDICAPPED,
HATTIESBURG, MS 39403-0000	64-0730835		0.	1,062,323.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
,				, ,	FOOD INVENTORY		TO PROVIDE, WITHOUT
FEED BY FAITH					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
P.O. BOX 1064					THE BASIS OF		ELDERLY, HANDICAPPED,
MERIDIAN, MS 39302	11-3814582		0.	1,219,715.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
,				, ,	FOOD INVENTORY		TO PROVIDE, WITHOUT
FRIENDS OF ALCOHOLICS					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
1298 FOA ROAD					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39209	64-6025471		0.	1,433,392.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
· · · · · · · · · · · · · · · · · · ·				, ,	FOOD INVENTORY		TO PROVIDE, WITHOUT
EBENEZER APOSTOLIC MINISTRIES					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
2508 EMMETT AVE.					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39213	42-1708740		0.	1 827 518.	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
					FOOD INVENTORY		TO PROVIDE WITHOUT
GLEANERS, INC					IS VALUED ON		CHARGE, FOOD TO HOMELESS,
359 NORTH MART PLAZA					THE BASIS OF		ELDERLY, HANDICAPPED,
JACKSON, MS 39206	64-0676325		0.	2 965 530	APPROXIMATIONS	FOOD	MENTALLY ILL, BATTERED,
energon, no 35200	04 0070323		· ·	2,303,330.	MITROXIMITIONS	T GOD	
			•		•	•	•

Part III can be duplicated if additional space is neede										
(a) Type of grant or assistance	(a) Type of grant or assistance (b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance (b) Method of valuation (book, FMV, appraisal, other) (f) Description of non-cash assistance									
Part IV Supplemental Information. Provide the information	required in Part I, lin	e 2; Part III, column	n (b); and any other ac	dditional information.						
PART II, LINE 1, COLUMN (H):										
NAME OF ORGANIZATION OR GOVERNMEN	T: NATCHEZ	COMMUNITY	Y STEWPOT							
(H) PURPOSE OF GRANT OR ASSISTANC	CE: TO PROV	IDE, WITH	OUT CHARGE,	FOOD TO						
HOMELESS, ELDERLY, HANDICAPPED, M	MENTALLY II	L, BATTERI	ED, POOR OR	OTHERWISE						
NEEDY MEN, WOMEN AND CHILDREN.										
NAME OF ORGANIZATION OR GOVERNMEN	T: FIRST A	SSEMBLY O	F GOD CARE	CT						
(H) PURPOSE OF GRANT OR ASSISTANC	CE: TO PROV	IDE, WITH	OUT CHARGE,	FOOD TO						
HOMELESS, ELDERLY, HANDICAPPED, N	MENTALLY II	L, BATTERI	ED, POOR OR	OTHERWISE						

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WYNNDALE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT:

BLESSING FOR ALL EMPOWERED BY FAITH- GRENADA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BRINKLEY MIDDLE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: DURANT MISSIONARY BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WE CARE COMMUNITY SERVICES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PINELAKE CARE CTR.-CLINTON

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WORD OF CHRIST MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HELPING HANDS OF HUMPHREYS CO.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHINA LEE CHRIST MINISTRY FP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: POWELL MIDDLE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NETTLETON FOOD PANTRY (FAITH)

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. JOSEPH'S FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LAUDERDALE BAPTIST CRISIS CENT

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BLESSINGS FOR ALL EMPOWERED BY FAITH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHOCTAW COUNTY FOOD MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SAM QUINN C.O.G.I.C.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LANIER HS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. GABRIEL MERCY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ROLLING FORK METHODIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SOS CRYSTAL SPRINGS FP, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MAGNOLIA MEDICAL FOUNDATION HINDS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIAN LIBERTY MB CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: STEWPOT

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SOUTH LAKE FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SEEDS OF CHANGE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CARDOZO MIDDLE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CROSSGATES BAPTIST CHURCH CSFP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BGC OF CENTRAL MISSISSIPPI

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

NEEDY MEN, WOMEN AND CHILDREN.

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HEARTS & HANDS FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NAME OF ORGANIZATION OR GOVERNMENT: FIRST CHURCH OF DELIVERANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MALLORY COMM. HEALTH/ LEFLORE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: POTTER'S HOUSE FAM/SER/CTR.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PROVIDENCE MB CHURCH

NAME OF ORGANIZATION OR GOVERNMENT: BETHESDA UNITED METHODIST CH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: KEMPER SPRINGS COMM. CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITY FOOD PANTRY

NAME OF ORGANIZATION OR GOVERNMENT: SILOAM MB CHURCH FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SHILOH SDA COMM. SERVICE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: EVER REACHING COMM. OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: TIPPAH CO. GOOD SAMARITAN CTR.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT:

MILESTON COMMUNITY DEVELOPMENT ASSOCIATION - MCDA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PLANTING SEEDS MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HINDS COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIAN FELLOWSHIP CHURCH

NAME OF ORGANIZATION OR GOVERNMENT: DELIVER ME SENIOR SUPPORT

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HEARTY HELPING FP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BREAD OF LIFE FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MIDTOWN CHARTER SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HARMONY M.B. CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT:

SPRINGBOARD TO OPPORTUNITIES HINDS CO.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PLEASANT GROVE UMC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. ANDREWS MISSION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SOUTH JACKSON SDA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BETHEL A.M.E. CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. JAMES BETHEL M.B. CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ANDERSON UNITED METHODIST CHUR

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CLARKE CO. ASSOC. FOR NEEDY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BETHEL BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MT CARMEL MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GOODLOE ELEMENTARY SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MT. ZION FOOD PANTRY

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SMITH COUNTY BAPTIST ASSOC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEW BEGINNING CHURCH IN CHRIST

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: OAK FOREST BC FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: EMMANUEL M.B.CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MS DELTA COUNCIL/FWOI

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PINELAKE CARE CENTER

NEEDY MEN, WOMEN AND CHILDREN.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WEBSTER CO BAPTIST ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NAME OF ORGANIZATION OR GOVERNMENT: OAK GROVE MB CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SAMARITAN'S CLOSET FP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FREEDOM WORSHIP CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GRACE EPISCOPAL CHURCH

NAME OF ORGANIZATION OR GOVERNMENT: JERUSALEM TEMPLE COGIC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEW DIMENSIONS DEV. FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LIFE CHURCH GTR

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: TOWN OF BOLTON DEV. CORP.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: DELTA HANDS FOR HOPE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MS CULTURAL CROSSROADS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: M.I.C.A. MCCOMB IN-DOM CARE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ROSE HILL M.B.C. SOUP KITCHEN

NAME OF ORGANIZATION OR GOVERNMENT: COLLEGE HILL B.C. FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LOUISE COMMUNITY MB CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PETER'S ROCK C.O.G.I.C.

NAME OF ORGANIZATION OR GOVERNMENT: HEARTLAND HANDS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: COVENANT PRESBYTERIAN CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LAMAR COUNTY SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: COPIAH COUNTY HUMAN RESOURCES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BGC OF EAST MS- ATTALA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ABERDEEN LOAVES & FISHES

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: VOICE OF CALVARY MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: RIVER CITY MISSION SK

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HIGHER DIMENSIONS OF MT. OLIVE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SHEPHERDS TENT FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SUNFLOWER AREA - CSFP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WESLEY YOUTH FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: AFTERNOON ADVENTURE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: THE WORD FULL GOSPEL BC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LAMPTON STREET CHURCH OF CHRIST

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SHEKINAH GLORY BC FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MS CENTER P & SH.(HOPE HOME)

NAME OF ORGANIZATION OR GOVERNMENT: PLEASANT HOME BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: YAZOO CO. BAPTIST BROTHERHOOD

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: UNITY M.B. CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MY BROTHER'S KEEPER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: JONES CHAPEL M.B. CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PLANTING SEEDS MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHANGING YOUR WORLD MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BOYD E.S./CROSSROADS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BETHLEHEM M.B. CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MVSU

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FREE MISSION BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. JOHN M.B. CHURCH F. P.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SMO INC., - WALTHALL CO.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: COUNTRY WOODS BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. VINCENT DE PAUL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MASJID MUHAMMAD

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GOOD SAMARITAN CENTER

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WALDEN CHAPEL UNITED METHODIST

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. LUKE UMC FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: TRIUMPHANT M.B. CHURCH PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: OAK GROVE MB CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GRACE EPISCOPAL CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FIRST BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WINSTON BAPTIST ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: STEPHEN CHAPEL MB CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: COVINGTON CO. BP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SMO, INC. - WILKINSON COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BETHLEHEM BAPTIST CH/FOOD/PAN.

NAME OF ORGANIZATION OR GOVERNMENT: HICKORY RIDGE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO
HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: JOSEPH'S FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PILGRIM REST COMMUNITY DEVELOPMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BOYS & GIRLS CLUB YAZOO

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WE ARE ONE UNITED METHODIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: EPHESUS BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MT. ZION FOOD MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: INVERNESS - CSFP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HUMPHREYS CO. BAPTIST BROTHERHOOD

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LOVING KINDNESS OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MCCSA - JASPER CO. SERV AGENCY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEW JERUSALEM CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BOYS & GIRLS CLUB OF LEFLORE C

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: JASPER COUNTY BAPTIST ASSOC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FBC HEIDELBERG

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: DELIVER ME SR. SUPPORT SVC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: B & G CLUB DELTA GRENADA

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SOUTHSIDE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIAN FELLOWSHIP OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: JERUSALEM BAPT. CHURCH-P.F.F.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHARITY FULL GOSPEL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEW MORNING STAR CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FIRST SEVENTH DAY ADVENTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WINONA COMM. PAVILION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LEXINGTON FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BONANZA BUYING CENTER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MOOREHEAD AREA - CSFP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MT. ZION FOOD PANTRY

NAME OF ORGANIZATION OR GOVERNMENT: JEFFERSON COMPREH./HEALTH/CTR.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. MARK MBC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FIRST BAPTIST CHURCH FLORA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CLARKE CO. ASSOC. FOR NEEDY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SMO, INC. - AMITE COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: UNITED COMMUNITY DEV. OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LINTONIA CHAPEL 7TH DAY ADV

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CENTER HILL BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WARREN COUNTY MOBILE PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SCOTT COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MULTI-COUNTY CSA - NESHOBA CO.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CARING HANDS OF SWEET HOME

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MANNA FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: YALOBUSHA COUNTY ACTION AGENCY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIANS UNITED M.B. CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CALVARY CHAPEL BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MILES MEMORIAL CME CHURCH

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BMA SDA CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ETERNAL LIFE PRAYER CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MCCSA - KEMPER COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FAITH BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: DELTA ADVANTAGE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: OAKLAND CSFP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: KEMPER SPRINGS COMM. CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ALTA WOODS UMC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HIGHER DIMENSIONS/CARTHAGE COLESIUM

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BEREAN SEVENTH DAY ADVENTIST

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: OPERATION UPWARD

NAME OF ORGANIZATION OR GOVERNMENT: SEMINARY BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HEAVENS MANNA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GREATER BEAVER MEADOW BAPTIST

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HOUSE OF BLESSINGS OUTREACH FP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FRANK PHILLIPS YMCA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WE CARE MISSION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FREE PEOPLE MBC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MOUNT ELAM M B CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: DURANT MISSIONARY BAPTIST CHUR

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: UNION HILL M.B. CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GREENVILLE

NAME OF ORGANIZATION OR GOVERNMENT: MULTI-COUNTY CSA - CLARKE CO.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BEREAN SEVEN DAY ADVENTIST

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MVSU UNIT 19

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GREATER FAIRVIEW MB CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: TRUE WORD MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MCCSA - WAYNE COUNTY

NAME OF ORGANIZATION OR GOVERNMENT: HELPING HANDS, CLEVELAND CSFP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: EVERS CARE/MS URBAN LEAGUE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PRVO, INC. - JEFF DAVIS CO.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: COMPASSION FOOD MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: TRIUMPH CHURCH FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NORTHSIDE/EASTSIDE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ENDLESS CHARITIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SHADY GROVE FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WESLEY YOUTH FOUNDATION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEW COVENANT COMMUNITY FP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HELPING HANDS OF HUMPHREYS CO.

NAME OF ORGANIZATION OR GOVERNMENT: WASHINGTON COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PRVO, INC - PERRY COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: TULANE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: RULEVILLE AREA - CSFP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FAYETTE FIRST NEW LIFE SDA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: DREW AREA - CSFP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CENTRAL UNITED METHODIST CHURC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: UNCLE JERRY'S FARM

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: OSEOLA MCCARTY DEV. CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PRVO, INC - LAMAR COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: JACKSON STREET MB CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PINE GROVE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SHARKEY COUNTY EMA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LOVE'S INCORPORATED (KITCHEN)

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GOLDEN TRAINGLE PLANNING & DEV

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PEARL STREET COMM. DEV. CORP.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PRVO, INC - COVINGTON COUNTY

NAME OF ORGANIZATION OR GOVERNMENT: MULTI-COUNTY CAA FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ROSEMONT HUMAN SERVICES FP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: OVERFLOW FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GRACE INSPIRATIONS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. AUG FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PRVO, INC., JONES COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ROSE HILL M.B.C FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SPIRIT FOOD DELIVERANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PENTECOSTAL CHURCH OF GOD

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT:

MS OLA SCHOOL OF BARBERING AND COMMUNITY DEVE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MAGEE'S CREEK M.B. CHURCH

NAME OF ORGANIZATION OR GOVERNMENT: SUMRALL UMC FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO
HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NAME OF ORGANIZATION OR GOVERNMENT: MALLORY COMMUNITY HEALTH CENTE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: AMITE RIVER BAPTIST ASSN.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. COLUMB'S IONA HOUSE F/P

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ANDERSON UNITED METHODIST CH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: RIVER OF LIFE FELLOWSHIP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CENTRAL MS FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WE CARE COMMUNITY SER. CSFP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HOUSE OF HOPE MIN/OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GOOD SAMARITAN CENTER, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WESLEY HOUSE COMMUNITY CENTER

NAME OF ORGANIZATION OR GOVERNMENT: MADCAPP FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PRVO, INC - MARION COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GTPDD - LOWNDES CO.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SOUTHERN FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: EMERGENCY WATER DISTRIBUTION 2021

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GLORY HOUSE GLOBAL OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: P.B.M. MINISTRIES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MOUNT CHARITY M.B. CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: AJFC COMMUNITY ACTION AGENCY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FIRST BAPTIST CHURCH TAYLORSVILLE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WINONA COMM. PAVILION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CRUDUP-WARD CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: LEAKE COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: OUR DAILY BREAD OF CALHOUN

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MID-STATE OPPORTUNITY, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: TINNIN ROAD CHURCH OF CHRIST

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SACRED HEART FAMILY CENTER

NAME OF ORGANIZATION OR GOVERNMENT: TULANE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MULTI-COUNTY CSA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CENTRAL UNITED METHODIST CHURC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MUSTARD TREE MISSIONS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GOD'S WAREHOUSE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: REVELS UNITED METH/CH - CSFP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEW HORIZON

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: RESIDENCE OF HOPE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NOXUBEE CO. HUMAN RESOURCE AGE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GREATER MT. CALVARY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FEEDING THE GULF COAST

NAME OF ORGANIZATION OR GOVERNMENT: HELPING HANDS OF CLEVELAND

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: JORDAN RIVERS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEW WHITE STONE M.B. CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: JESUS CHURCH MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HIGHLAND ELEM. SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: JACKSON REVIVAL CENTER CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

NEEDY MEN, WOMEN AND CHILDREN.

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PRVO, INC. - FORREST COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NAME OF ORGANIZATION OR GOVERNMENT: MT. BEULAH CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MISSION OKOLONA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CARROLL-MONTGOMERY BAP. ASSN.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SUNFLOWER CO. CSFP

NAME OF ORGANIZATION OR GOVERNMENT: TEAM INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: JACKSON REVIVAL CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HELPING HANDS OF HUMPHREYS CO.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CROSSGATES BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CARY CHRISTIAN CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WORD OF CHRIST

NAME OF ORGANIZATION OR GOVERNMENT: JERUSALEM MB CHURCH FP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: VILLAGE OF DREAMS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHUNKY COMMUNITY CHURCH FP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PLUM STREET SOUP KITCHEN

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MADISON COUNTY CSA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY FP- HATTIESBURG

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WORD OF CHRIST MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MS MINORITY FARMERS ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SOUTHWEST MISS. OPPORTUNITY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: EAST LOUISVILLE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: COPIAH COUNTY HUMAN RESOURCES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEW LIFE FOOD MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: RIVERSIDE ELEMENTARY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: TRUE LIGHT MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: EPHESUS SDA CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CORNERSTONE CHURCH FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MFN CFAP BOXES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY - VICKSBURG

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: JUBILEE MENNONITE CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIAN FOOD MISSION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WE 2GETHER CREATING CHANGE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: STILL WATER BOARDING SCHOOL

NAME OF ORGANIZATION OR GOVERNMENT: CENTER RIDGE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MID-SOUTH FOOD BANK - BATESVILLE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MORE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIAN SERVICES, INC.

NAME OF ORGANIZATION OR GOVERNMENT: STARKVILLE CHURCH OF GOD

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HICKORY BAP. CHURCH FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NAME OF ORGANIZATION OR GOVERNMENT: PILGRIM BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FIRST UMC MAGEE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SALVATION ARMY- COLUMBUS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SOUTH PLEASANT HILL M. B. CHUR

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: STATE LINE BAPTIST FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHOCTAW COUNTY FOOD MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEW VISION OUTREACH MINISTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: THE SALVATION ARMY FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GRENADA FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WINGARD HOME, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FIRST ASSEMBLY NATCHEZ/F/P

NAME OF ORGANIZATION OR GOVERNMENT: TULANE BAPTIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: THE SALVATION ARMY-LAUREL

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: TWELVE BASKETS FOOD BANK

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PROJECT HOMESTEAD

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEW WAY MISSISSIPPI

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MERCY HOUSE OF GEORGETOWN-TC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: NEWMAN SERVICES FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HELPING HANDS MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: SCOTT CO. BAPTIST ASSOC.CRISIS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HOPE VILLAGE FOR CHILDREN

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MIDTOWN/JLJ

NAME OF ORGANIZATION OR GOVERNMENT: PINELAKE CHURCH CARE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: EDWARDS STREET FELLOWSHIP CENT

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: ST. ANDREWS MISSION S/K

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WORLD OVERCOMERS FOOD OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MORRISON HEIGHTS BAPTIST CHURC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: RIVER CITY MISSION FP

NAME OF ORGANIZATION OR GOVERNMENT: MS CENTER P & SH. (HOPE HOME)

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: MARION COUNTY FOOD PANTRY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: WE WILL GO MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FIRST RIDGELAND CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: EVER REACHING COMM. OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: THE POINTE CHURCH FP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PETAL CHILDREN'S TASK FORCE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GREENWOOD INTERFAITH MINISTRIE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: PINELAKE CARE CTR.-STARKVILLE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: BROOKHAVEN OUTREACH MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: HEARTY HELPINGS

NAME OF ORGANIZATION OR GOVERNMENT: OUR DAILY BREAD

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: VINE PLACE COMMUNITY OUTREACH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CARE CENTER MINISTRIES MS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: CHRISTIAN SERVICES, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FEED BY FAITH

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: FRIENDS OF ALCOHOLICS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE
NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: EBENEZER APOSTOLIC MINISTRIES

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

NAME OF ORGANIZATION OR GOVERNMENT: GLEANERS, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE, WITHOUT CHARGE, FOOD TO

HOMELESS, ELDERLY, HANDICAPPED, MENTALLY ILL, BATTERED, POOR OR OTHERWISE

NEEDY MEN, WOMEN AND CHILDREN.

PART I, LINE 2:

GRANTS TO AGENCIES ARE BASED ON MEMBERSHIP AND LEGITIMATE NEED.

MEMBERSHIP IS LIMITED TO RELIGIOUS ORGANIZATIONS OR TO OUT-REACH

PROGRAMS RECOGNIZED BY THE IRS AS BEING NON-PROFIT 501(C)(3)

ORGANIZATIONS AND WHO MEET CERTAIN STANDARDS SUCH AS NOT CHARGING THE

NEEDY FOR FOOD, NON-DISCRIMINATING, PROPER RECORD KEEPING, FOLLOWING

FOOD HANDLING PROCEDURES AND AVOIDING DUPLICATION OF SERVICE. PERIODIC

VISITS TO MEMBER CHARITIES ARE CONDUCTED BY BOTH THE ORGANIZATION'S

PERSONNEL AND PERSONNEL OF THE MS DEPARTMENT OF HUMAN SERVICES FOR THE

PURPOSE OF MONITORING PERFORMANCE.

PART II, COLUMN (F):

FOOD INVENTORY IS VALUED ON THE BASIS OF APPROXIMATIONS OF VALUE PER

POUND OF DONATED PRODUCT. THE VALUES WERE DERIVED FROM THE UNITED

STATES DEPARTMENT OF AGRICULTURE (USDA) AND FEEDING AMERICA.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

. Inspection Employer identification number

	MISSISSIPPI	64-	64-0676325					
Pai	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	Method of noncash contr		•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other $_{\dots}$							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory	X	200	35,066,589.	SEE SCH M,	PART	' I	Ι
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organi	zation during	g the tax year for c	ontributions				
	for which the organization completed Form 82	.83, Part V, D	Oonee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and wh	ich isn't required to be used t	for			
	exempt purposes for the entire holding period	?				. 30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribut	ions?	31		Х
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in o	column (c) fo	r a type of property	for which column (a) is chec	cked,			
	describes to Death							

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022
Open to Public Inspection

Name of the organization

MISSISSIPPI FOOD NETWORK INC

Employer identification number 64-0676325

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

AN ELECTRONIC COPY OF THE FORM 990 IS PROVIDED TO THE BOARD FOR REVIEW

PRIOR TO FILING WITH THE IRS.

NEW DIRECTORS, AT APPOINTMENT MUST DISCLOSE TO THE EXECUTIVE DIRECTOR ANY
KNOWN OR POTENTIAL CONFLICTS OF INTERESTS. THE EXECUTIVE DIRECTOR CONTINUES
TO MONITOR ACTIVITIES THROUGHOUT THE YEAR AND PREVENTS ANY CONFLICTS OF
INTEREST. PERSONS WITH CONFLICTS ARE PROHIBITED FROM PARTICIPATING IN THE

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

DELIBERATIONS AND DECISIONS REGARDING THE TRANSACTION.

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

THE COMPENSATION OF THE EXECUTIVE DIRECTOR WAS SET BY THE BOARD BASED ON

THE COMPENSATION OF OTHERS IN SIMILAR POSITIONS AT SIMILAR ORGANIZATIONS.

THE EXECUTIVE DIRECTOR IS THE ONLY COMPENSATED OFFICER OF THE ORGANIZATION.

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

THE ORGANIZATION PUBLISHES THE FORM 990 ON ITS WEBSITE. THE FORM 1023 IS AVAILABLE TO THE PUBLIC UPON REQUEST.

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

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PAGE 12, PART XII, LINE 2C

THE AUDITOR MEETS WITH THE BOARD OF DIRECTORS AND AUDIT COMMITTEE

Schedule O (Form 990) 2022 Page **2**

Name of the organization MISSISSIPPI FOOD NETWORK INC	Employer identification number 64-0676325
MAKING A FULL PRESENTATION AT THE COMPLETION OF THE AUDIT	ANSWERING ANY
OF THE BOARD OF DIRECTORS QUESTIONS. THE AUDITOR WORKS CLO	SELY WITH THE
BOARD OF DIRECTORS DURING THE YEAR SHOULD ANY CONCERNS ARI	SE.