

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

2013

Open to Public Inspection

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning **JUL 1, 2013** and ending **JUN 30, 2014**

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
KENDALL WHITTIER, INC.

D Employer identification number
73-1016797

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
P.O. BOX 4165

E Telephone number
918-829-5394

City or town, state or province, country, and ZIP or foreign postal code
TULSA, OK 74159

F Group Exemption Number ▶

G Accounting Method: Cash Accrual Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ **HTTP://WWW.KENDALLWHITTIERINC.ORG**

J Tax-exempt status (check only one) — 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **139,582.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Revenue	1	Contributions, gifts, grants, and similar amounts received																130,778.											
	2	Program service revenue including government fees and contracts																											
	3	Membership dues and assessments																											
	4	Investment income SEE SCHEDULE O																1,107.											
	5a	Gross amount from sale of assets other than inventory																7,697.											
	5b	Less: cost or other basis and sales expenses																5,750.											
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)																1,947.											
	6	Gaming and fundraising events																											
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)																											
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)																												
c	Less: direct expenses from gaming and fundraising events																												
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)																												
7a	Gross sales of inventory, less returns and allowances																												
7b	Less: cost of goods sold																												
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																												
8	Other revenue (describe in Schedule O)																												
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8																133,832.												
Expenses	10	Grants and similar amounts paid (list in Schedule O)																											
	11	Benefits paid to or for members																											
	12	Salaries, other compensation, and employee benefits																88,511.											
	13	Professional fees and other payments to independent contractors																4,053.											
	14	Occupancy, rent, utilities, and maintenance																											
	15	Printing, publications, postage, and shipping																422.											
	16	Other expenses (describe in Schedule O) SEE SCHEDULE O																27,435.											
17	Total expenses. Add lines 10 through 16																120,421.												
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)																13,411.											
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)																157,778.											
	20	Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE O																7,546.											
	21	Net assets or fund balances at end of year. Combine lines 18 through 20																178,735.											

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	70,456.	22	85,426.
23 Land and buildings		23	
24 Other assets (describe in Schedule O) SEE SCHEDULE O	89,007.	24	95,061.
25 Total assets	159,463.	25	180,487.
26 Total liabilities (describe in Schedule O) SEE SCHEDULE O	1,685.	26	1,752.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	157,778.	27	178,735.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? **SEE SCHEDULE O**

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28 SEE SCHEDULE O		28a	70,839.
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>			
29 SEE SCHEDULE O		29a	5,806.
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>			
30		30a	
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>			
31 Other program services (describe in Schedule O)		31a	
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>			
32 Total program service expenses (add lines 28a through 31a)		32	76,645.

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated - see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
JENNIFER CAMPBELL DIRECTOR	0.75	0.	0.	0.
JO ANNE DEATON DIRECTOR	0.75	0.	0.	0.
STEVE DEATON DIRECTOR	0.75	0.	0.	0.
TODD FREEMAN PRESIDENT	0.75	0.	0.	0.
PEARL GARRISON DIRECTOR	0.75	0.	0.	0.
CHRISTOPHER HALL DIRECTOR	0.75	0.	0.	0.
JAMES MADERE TREASURER	0.75	0.	0.	0.
NATHAN MATTOX VICE PRESIDENT	0.75	0.	0.	0.
FR. DAVID MEDINA DIRECTOR	0.75	0.	0.	0.
SUSAN NEAL DIRECTOR	0.75	0.	0.	0.
PAT TREADWAY SECRETARY	0.75	0.	0.	0.
GAVIN PEARSON DIRECTOR	0.75	0.	0.	0.

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Sch. O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions
b Did the organization file Form 1120-POL for this year?
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
a Initiation fees and capital contributions included on line 9
b Gross receipts, included on line 9, for public use of club facilities
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed
42 a The organization's books are in care of
Located at
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44 a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
c Did the organization receive any payments for indoor tanning services during the year?
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45 b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

		Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Sch. C, Part II		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?		X
49b	If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None." NONE

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note. All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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

Sign Here	Signature of officer	Date
	KARA JOY MCKEE, EXECUTIVE DIRECTOR	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	JUSTIN A. MOORE, CPA	JUSTIN A. MOORE,	11/10/14		P00420306
	Firm's name ▶ STANFIELD & O'DELL, P.C.	Firm's address ▶ 3211 S. LAKEWOOD AVE. TULSA, OK 74135-4934		Firm's EIN ▶ 73-1293433	Phone no. 918-628-0500

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	324,752.	202,677.	99,657.	126,352.	124,203.	877,641.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	324,752.	202,677.	99,657.	126,352.	124,203.	877,641.
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)						217,532.
6 Public support. Subtract line 5 from line 4.						660,109.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	324,752.	202,677.	99,657.	126,352.	124,203.	877,641.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,573.	3,500.	1,417.	1,246.	1,107.	8,843.
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 IV.)	24,023.	20,325.				44,348.
11 Total support. Add lines 7 through 10						930,832.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	70.92	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	78.91	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

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Name of the organization **KENDALL WHITTIER, INC.** Employer identification number **73-1016797**

FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INCOME:

DESCRIPTION OF PROPERTY:	AMOUNT:
INTEREST INCOME	1,107.

FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:

DESCRIPTION OF OTHER EXPENSES:	AMOUNT:
BANK CHARGES	459.
COMMUNITY EVENTS	50.
FITNESS & NUTRITION	2,186.
FOOD PURCHASES	4,042.
PIE PROJECTS	1,723.
TELEPHONE	4,258.
IN KIND EXPENSES	6,575.
OFFICE SUPPLIES	3,086.
DEPRECIATION	1,108.
INSURANCE	3,362.
TAXES	266.
YEARLY APPEAL	320.
TOTAL TO FORM 990-EZ, LINE 16	27,435.

FORM 990-EZ, PART I, LINE 20, CHANGES IN NET ASSETS:

CHANGES IN NET ASSETS OR FUND BALANCES:	AMOUNT:
NET UNREALIZED GAIN ON INVESTMENTS	7,546.

FORM 990-EZ, PART II, LINE 24, OTHER ASSETS:

DESCRIPTION	BEG. OF YEAR	END OF YEAR
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INVESTMENT IN MUTUAL FUNDS	82,933.	90,095.
OTHER DEPRECIABLE ASSETS	6,074.	4,966.
TOTAL TO FORM 990-EZ, LINE 24	89,007.	95,061.

FORM 990-EZ, PART II, LINE 26, OTHER LIABILITIES:

DESCRIPTION	BEG. OF YEAR	END OF YEAR
PAYROLL TAX LIABILITIES	1,685.	1,752.

FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - TO WORK TOGETHER TO
IMPROVE THE QUALITY OF OUR NEIGHBORS' LIVES BY MEETING THEIR NEEDS FOR
EMERGENCY FOOD SERVICES AND BY PROVIDING ACCESS TO HEALTHY FOODS BOTH
THROUGH OUTREACH EFFORTS AND HANDS-ON EDUCATIONAL EXPERIENCES.

FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE ACCOMPLISHMENTS:

NUTRITION & WELLNESS PROGRAMS:

EMERGENCY FOOD PANTRY AND GROW GARDEN (GARDENING TO REACH
OUT AND WELCOME)

OUR OVERALL OBJECTIVES ARE TO IMPROVE THE QUALITY OF OUR NEIGHBORS'
LIVES BY MEETING THEIR NEEDS FOR EMERGENCY FOOD SERVICES AND BY
PROVIDING ACCESS TO HEALTHY FOODS BOTH THROUGH OUTREACH EFFORTS AND
HANDS-ON EDUCATIONAL EXPERIENCES. FROM WITHIN THE NEIGHBORHOOD, WE HAVE
BEEN ABLE TO OBSERVE THAT TWO OF THE KEY STEPS TO ENDING THE POVERTY
CYCLE ARE PROVIDING NOURISHMENT NOW AND INSPIRATION FOR THE FUTURE,
SUCH THAT FAMILIES CAN INVEST TIME AND ENERGY IN DEVELOPING THE SKILLS
THEY NEED TO SUCCEED. OUR PROGRAMS PROVIDE SECURITY, EDUCATION AND
INSPIRATION THAT ALLOW KENDALL WHITTIER RESIDENTS TO BUILD BETTER

SCHEDULE O
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Name of the organization

KENDALL WHITTIER, INC.

Employer identification number

73-1016797

QUALITY LIVES.

OUR EMERGENCY FOOD PANTRY (EFP) PROVIDES, AT NO COST, ONE WEEK'S WORTH OF FOOD FOR A FAMILY OR INDIVIDUAL IN NEED UP TO 4 TIMES PER YEAR. WE PROTECT THE SECURITY OF OUR DONATED SPACE, OUR FRUGAL BUDGET, AND THE DIGNITY OF OUR CLIENTS BY UTILIZING CAREFULLY SCREENED VOLUNTEER LABOR FOR HOME DELIVERIES. DURING OUR 2013-2014 FISCAL YEAR WE SERVED 1,488 UNDUPLICATED INDIVIDUALS(2,770 DUPLICATED). IN 2012, IT CAME TO OUR ATTENTION THAT WHILE DEMOGRAPHIC INFORMATION FOR OUR NEIGHBORHOOD INDICATES THAT HISPANIC RESIDENT POPULATION MAY BE AS HIGH AS 65%, OUR HISPANIC CLIENTELE IS LIMITED TO LESS THAN 12% OF OUR CUSTOMERS ANNUALLY. TO INSURE THAT WE ARE MAKING NECESSARY CONNECTIONS TO REACH ALL NEIGHBORS IN NEED, IN JUNE 2013, WE HIRED A BI-LINGUAL EXECUTIVE DIRECTOR AND IN SEPTEMBER, 2013, A HISPANIC LIAISON WAS HIRED TO HELP EXPAND OUR EFP OUTREACH AND DELIVERY. OUR PANTRY IS CLEAN, ORGANIZED AND EFFICIENT, AND OUR EFP DIRECTOR EXCEEDS EXPECTATIONS WITH CARE, COMPASSION AND ATTENTION TO DETAILS THAT MATTER TO OUR CUSTOMERS. OUR TEAM WORKS WITH PARTNER ORGANIZATIONS TO MAKE SURE THAT OUR CUSTOMERS RECEIVE INFORMATION ON OTHER SERVICES IN THE NEIGHORHOOD THAT CAN HELP THEM AVOID FUTURE NEED FOR EMERGENCY FOOD AND TO ENSURE THAT ALL POTENTIAL HELPERS LEARN BEST PRACTICES AND OPPORTUNITIES FOR DEDICATED SERVICE TO COMMUNITY. OUR OBJECTIVES FOR THE EMERGENCY FOOD PANTRY FOR OUR 2014-15 FISCAL YEAR ARE TO:

- PROVIDE NUTRITIOUS AND CULTURALLY APPROPRIATE EMERGENCY FOOD IN A TIMELY MANNER
- INCREASE OUR ABILITY TO REACH HISPANIC FAMILIES IN NEED
- INCREASE THE NUMBER OF MINORITY, ESPECIALLY HISPANIC, PERSONS WHO

SCHEDULE O
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VOLUNTEER AT THE EFP

- DECREASE REPEAT APPLICANTS

MANY OF OUR EFP VOLUNTEERS ALSO ASSIST WITH THE GROW COMMUNITY GARDEN.

COMMUNITY GARDENING HAS BEEN SHOWN TO IMPROVE NEIGHBORHOODS FAR BEYOND

THE OBVIOUS BENEFITS OF FOOD PRODUCTION AND NUTRITION BY OFFERING

EDUCATION, INSPIRATION, INCREASED NEIGHBORHOOD SECURITY, A MEETING

PLACE FOR COMMUNITY MEMBERS, AND A SOURCE OF NEIGHBORHOOD PRIDE. THE

PRIDE THAT COMES FROM NURTURING A PLANT FROM SEED ALL THE WAY TO THE

FAMILY DINNER TABLE CAN INSPIRE CHILDREN TO BELIEVE IN THEIR ABILITY TO

TURN EFFORT INTO SUCCESSFUL OUTCOMES. THAT PRIDE IS AS MUCH OF A GARDEN

PRODUCT AS THE VEGETABLES. OUR GROW GARDEN HAS SUCCESSFULLY ENGAGED

CHILDREN FROM KENDALL WHITTIER ELEMENTARY AND UNIVERSITY SCHOOLS FOR

THE PAST SEVEN YEARS. THE SUCCESS OF OUR EFFORTS HAS CAUGHT THE

ATTENTION OF NUMEROUS NEIGHBORHOOD PARTNERS AND SUPPORTERS. DURING OUR

2013-14 FISCAL YEAR WE EXPANDED OUR COMMUNITY GARDEN CLIENTS TO INCLUDE

RESIDENTS PARTICIPATING IN THE COMMUNITY ACTION PROJECT SPONSORED

GROUP, GROWING TOGETHER. WE INTEND TO FIND WAYS FOR ALL KENDALL

WHITTIER RESIDENTS TO ENGAGE WITH OUR GARDENS AND FOR GARDENERS TO

BUILD A SHARED SENSE OF COMMUNITY AND A PLAN FOR IMPROVING THE LIFELONG

HEALTH OF ALL NEIGHBORS.

OUR OBJECTIVES FOR THE GROW GARDEN FOR OUR 2014-15 YEAR ARE TO:

- CONTINUE TO DEVELOP AND FACILITATE AN EDUCATION CURRICULUM FOR

HANDS-ON LEARNING

- INCREASE THE NUMBER OF NEIGHBORS SERVED IN THE EDUCATIONAL PROGRAMS

BY AT LEAST 20%

- INCREASE OUR REACH IN THE LARGER NEIGHBORHOOD TO MAKE THE GROW GARDEN

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

KENDALL WHITTIER, INC.

Employer identification number

73-1016797

A COOPERATIVE COMMUNITY GARDEN, HONORING OUR MISSION OF "GARDENING TO REACH OUT AND WELCOME."

WE SEE TREMENDOUS POTENTIAL FOR OUR GROW GARDEN TO BECOME A MODEL OF NEIGHBORHOOD COOPERATION, PRODUCING NOT ONLY FOOD, BUT NEIGHBORHOOD PRIDE.

AT THE VERY END OF OUR 2013-14 FISCAL YEAR, IN JUNE OF 2014, WE WERE GIVEN A PIECE OF PROPERTY IN THE KENDALL WHITTIER NEIGHBORHOOD TO CREATE ANOTHER COMMUNITY GARDEN. THIS GARDEN, THE TIPTON GARDEN IS IN DEVELOPMENT AND OUR VISION FOR IT IS TO CREATE A TRADITIONAL COMMUNITY GARDEN WITH NEIGHBORHOOD RESIDENTS, BUSINESS OWNERS AND ORGANIZATIONS CREATING, COORDINATING, AND MAINTAINING GARDEN BEDS. LIKE OUR GROW GARDEN, WE SEE THIS AS AN OPPORTUNITY TO BEAUTIFY THE NEIGHBORHOOD AND HELP FOSTER A GREATER SENSE OF COMMUNITY PRIDE. WE WILL HAVE MORE TO REPORT NEXT YEAR AS THIS EXCITING PROJECT GROWS.

FORM 990-EZ, PART III, LINE 29, PROGRAM SERVICE ACCOMPLISHMENTS:

COMMUNITY DEVELOPMENT AND OUTREACH PROGRAM:

THROUGH OUR COMMUNITY DEVELOPMENT AND OUTREACH PROGRAM EFFORTS, IN JUNE 2013, AND AGAIN IN JUNE 2014, WE WERE ABLE TO HELP PROVIDE A WEEK-LONG SUMMER CAMP EXPERIENCE TO 10 NEIGHBORHOOD CHILDREN. THE GENEROSITY OF THE BOB COLEMAN FAMILY AND DWIGHT MISSION CAMP AND THE DEDICATION OF THE TRUE BLUE NEIGHBORS YOUTH MENTORING PROGRAM STAFF MAKE THIS INCREDIBLE EXPERIENCE POSSIBLE. WE ALSO PROVIDED VOLUNTEER AND FINANCIAL SUPPORT FOR THE ANNUAL KENDALL WHITTIER NEIGHBORHOOD LIGHTS ON! HOLIDAY CELEBRATION AND THE FOURTH OF JULY PARADE. THESE ARE LARGE WELL-ATTENDED ANNUAL EVENTS THAT ALWAYS ATTRACT MANY CHILDREN AND

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FAMILIES. OUR PARTNERS IN EDUCATION EFFORTS AT KENDALL WHITTIER
ELEMENTARY SCHOOL INCLUDED PARTICIPATION IN BACK-TO-SCHOOL NIGHT EVENTS
AND VOLUNTEER AND FINANCIAL SUPPORT OF THE ANNUAL HOLIDAY GIFT SACK
PREPARATION. THROUGH OUR EMERGENCY FOOD PANTRY IN DECEMBER 2013, WE
PROVIDED FOOD ITEMS FOR APPROXIMATELY 1,000 HOLIDAY GIFT SACKS AND
ITEMS FOR 50 HOLIDAY FOOD BASKETS FOR FAMILIES IN NEED. WE ALSO
PARTNERED WITH A NEIGHBORHOOD COFFEE SHOP, 918 COFFEE, TO PROVIDE GIFT
CERTIFICATES TO EACH OF THE KENDALL-WHITTIER ELEMENTARY SCHOOL TEACHERS
AS A THANK YOU FOR THEIR TIRELESS SERVICE.