

**Federal
Tax Return**

WEST TEXAS FOOD BANK

**For the fiscal year ending
September 30, 2024**

**RANDY SILHAN, CPA, CFE
P.O. BOX 1341
WOLFFORTH, TX 79382
Phone: (432) 580-0204
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July 23, 2025

WEST TEXAS FOOD BANK
411 S. PAGEWOOD
ODESSA, TX 79761

Dear Joey, Libby, and Members of the Board,

I have prepared the Food Bank's Form 990 based on the audited financial statements and other information you provided . Please review the enclosed copy and contact me if any records need correcting before being e-filed.

If you have any questions about the return(s) or about WEST TEXAS FOOD BANK's tax situation during the year, please do not hesitate to call me at (432) 580-0204. I appreciate this opportunity to serve you.

Sincerely,

RANDY SILHAN
RANDY SILHAN, CPA, CFE

Privacy Notice

As a tax practitioner, I receive and collect nonpublic personal information from various forms and statements that you provide. I do not disclose such information unless you instruct me to do so. I maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

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

A For the 2023 calendar year, or tax year beginning 10/1/2023, and ending 9/30/2024	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization WEST TEXAS FOOD BANK Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 411 S. PAGEDWOOD City or town State ZIP code ODESSA TX 79761 Foreign country name Foreign province/state/county Foreign postal code
D Employer identification number 75-2057692	
E Telephone number (432) 580-6333	
G Gross receipts \$ 27,311,605	
F Name and address of principal officer: LIBBY STEPHENS 411 S. PAGEDWOOD, ODESSA, TX 79761	
H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website: www.wtxfoodbank.org	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	
L Year of formation: 1985	
M State of legal domicile: TX	

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: The Food Bank is a 501(c)(3) nonprofit, hunger relief organization that distributes donated & purchased food to children, families, and seniors through a network of over 100 partner agencies in 19 counties in West Texas
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) 3 23
	4	Number of independent voting members of the governing body (Part VI, line 1b) 4 23
Revenue	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 77
	6	Total number of volunteers (estimate if necessary) 6 13,000
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 7a 0
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0
Expenses	8	Contributions and grants (Part VIII, line 1h) 30,014,951 26,136,429
	9	Program service revenue (Part VIII, line 2g) 451,084 772,070
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 127,562 189,184
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 64,265 86,287
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 30,657,862 27,183,970
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3) 18,389,434 20,438,221
	14	Benefits paid to or for members (Part IX, column (A), line 4) 0 0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 4,259,903 4,982,415
	16a	Professional fundraising fees (Part IX, column (A), line 11e) 215,957 168,183
	17	Total fundraising expenses (Part IX, column (D), line 25) 837,519
Net Assets or Fund Balances	18	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 3,137,713 3,490,571
	19	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 26,003,007 29,079,390
	20	Revenue less expenses. Subtract line 18 from line 12 4,654,855 -1,895,420
	21	Total assets (Part X, line 16) 37,899,577 36,691,966
	22	Total liabilities (Part X, line 26) 675,484 959,478
	23	Net assets or fund balances. Subtract line 21 from line 20 37,224,093 35,732,488

Part II Signature Block

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

Sign Here	Signature of officer LIBBY STEPHENS		Date 7/22/2025	
	Type or print name and title EXECUTIVE DIRECTOR			
Paid Preparer Use Only	Print/Type preparer's name RANDY SILHAN	Preparer's signature RANDY SILHAN	Date 7/23/2025	Check <input checked="" type="checkbox"/> if self-employed
	Firm's name RANDY SILHAN, CPA, CFE	Firm's EIN 26-2515308	PTIN P00107901	
	Firm's address P.O. BOX 1341, WOLFFORTH, TX 79382	Phone no. (432) 580-0204		

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

Part III**Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☐

1	Briefly describe the organization's mission: The WTFB exists to collect, purchase, and distribute food to feed the hungry in 19 counties in West Texas in partnership with volunteers and community organizations and to educate these partners and the public at large about the real face of hunger.		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 26,827,309 including grants of \$ 20,438,221) (Revenue \$ 772,070)		
	The Food Bank distributed approximately 14.2million pounds of food to agencies and individuals throughout 19 counties in West Texas covering over 34,000 miles. This is done through programs and strategic partnerships with approximately over 100 community partner agencies including food pantries, community kitchens, churches, emergency organizations, shelters, residential centers, senior centers and youth centers. The Food Bank also provides education and community awareness on issues of hunger and nutrition.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)		
4d	Other program services (Describe on Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)		
4e	Total program service expenses 26,827,309		

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V. ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable.	1a	7
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable.	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

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

Yes No

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	77			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X	
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X		
c	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	7d				
e	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.					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X	
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," 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? If "Yes," see the instructions and file Form 4720, Schedule N.	15			X	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X	
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? If "Yes," complete Form 6069.	17				

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

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 23		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b Enter the number of voting members included on line 1a, above, who are independent	1b 23		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a 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

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
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	
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 X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done.	12c X	
13 Did the organization have a written whistleblower policy?	13 X	
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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official.	15a X	
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed TX

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records
 JOEY RUIZ (432) 580-6333
 411 S. PAGEWOOD, ODESSA, TX 79761

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Libby Stephens CEO	40.00 0.00			X				302,007	0	34,737
(2) Joey Ruiz CFO	40.00 0.00			X				223,689	0	20,231
(3) Kelly Boydston Director of Impact and Strategy	40.00 0.00					X		148,704	0	27,536
(4) Nancy Salcido Director of Human Resources	40.00 0.00					X		143,711	0	27,523
(5) Mark Matthews Director of Operations	40.00 0.00					X		131,563	0	16,384
(6) Brentley Oden Director of Programs and Advocacy	40.00 0.00					X		124,562	0	6,725
(7) Krysta Hadlock President	2.00 0.00	X		X				0	0	0
(8) Adam Munoz Vice President	2.00 0.00	X		X				0	0	0
(9) DaLacy Sleeper Secretary	2.00 0.00	X		X				0	0	0
(10) Jefferson Cox Treasurer	2.00 0.00	X		X				0	0	0
(11) Eric Whitaker Past President	1.00 0.00	X		X				0	0	0
(12) Amanda Day Director	2.00 0.00	X						0	0	0
(13) Jessicka Gonzales Director	1.00 0.00	X						0	0	0
(14) RJ Lopez Director	1.00 0.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Ashley Akin Director	1.00 0.00	X						0	0	0
(16) Mariann Bagley Director	1.00 0.00	X						0	0	0
(17) Justin Brown Director	1.00 0.00	X						0	0	0
(18) Karmen Bryant Director	1.00 0.00	X						0	0	0
(19) Trey Fournier Director	1.00 0.00	X						0	0	0
(20) Lauren Kulbeth Director	1.00 0.00	X						0	0	0
(21) Stephanie Mead Director	1.00 0.00	X						0	0	0
(22) Kris Phillips Director	1.00 0.00	X						0	0	0
(23) Thaimar Ramirez Director	1.00 0.00	X						0	0	0
(24) Melanie Saiz Director	1.00 0.00	X						0	0	0
(25) Even Thomas Director	1.00 0.00	X						0	0	0
1b Subtotal								1,074,236	0	133,136
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								1,074,236	0	133,136

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 6

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Onyx General Contractors, LLC P.O. Box 60547 Midland, TX 79711	Facilities construction	6,741,317
Value Added Food Sales 965 Reno Wayland, MI 49348	Food & distribution	605,152
Feeding America 1601 Paysphere Circle Chicago, IL 60674	Food & distribution, dues	380,397
I Deal Specialties 2493 Cedarwood Road Pepper Pike, OH 44124	Food & distribution	325,817
Penske Truck Leasing P.O. Box 802577 Chicago, IL 60680	Truck leasing for food distrib	299,556

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 5

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII. ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	0			
	b	Membership dues	1b	0			
	c	Fundraising events	1c	0			
	d	Related organizations	1d	0			
	e	Government grants (contributions)	1e	1,815,151			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	24,321,278			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 17,189,705			
	h	Total. Add lines 1a-1f		26,136,429			
	Program Service Revenue				Business Code		
2a		Shared maintenance fees	624210	279,135	279,135		
b		Purchased product revenue	624210	492,935	492,935		
c		. . . . .		0			
d		. . . . .		0			
e		. . . . .		0			
f		All other program service revenue		0			
g		Total. Add lines 2a-2f		772,070			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		189,184			189,184
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		0			
	6a	Gross rents	(i) Real	(ii) Personal			
	b	Less: rental expenses	6b				
	c	Rental income or (loss)	6c	0	0		
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
					0	0	
	b	Less: cost or other basis and sales expenses	7b	0	0		
	c	Gain or (loss)	7c	0	0		
	d	Net gain or (loss)		0			
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
				172,209			
	b	Less: direct expenses	8b	127,635			
c	Net income or (loss) from fundraising events		44,574				
9a	Gross income from gaming activities. See Part IV, line 19.						
			0				
b	Less: direct expenses	9b	0				
c	Net income or (loss) from gaming activities		0				
10a	Gross sales of inventory, less returns and allowances						
			0				
b	Less: cost of goods sold	10b	0				
c	Net income or (loss) from sales of inventory		0				
Miscellaneous Revenue				Business Code			
	11a	Insurance refunds, reimbursements, discount	900099	41,713	41,713		
	b	. . . . .		0			
	c	. . . . .		0			
	d	All other revenue		0			
	e	Total. Add lines 11a-11d		41,713			
12	Total revenue. See instructions.		27,183,970	813,783	0	189,184	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX. ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	20,438,221	20,438,221		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	507,844	159,019	180,390	168,435
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	3,377,761	2,674,343	527,563	175,855
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	124,126	98,277	19,387	6,462
9	Other employee benefits	689,488	545,903	107,689	35,896
10	Payroll taxes	283,196	224,221	44,231	14,744
11	Fees for services (nonemployees):				
a	Management	0			
b	Legal	0			
c	Accounting	17,500	13,856	2,733	911
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	168,183			168,183
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	94,909	75,144	14,824	4,941
12	Advertising and promotion	91,236	0	0	91,236
13	Office expenses	761,545	602,954	118,943	39,648
14	Information technology	0			
15	Royalties	0			
16	Occupancy	356,717	282,430	55,715	18,572
17	Travel	952,547	754,181	148,775	49,591
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	42,124	33,352	6,579	2,193
20	Interest	5,180	0	5,180	
21	Payments to affiliates	21,339	16,895	3,333	1,111
22	Depreciation, depletion, and amortization	822,390	651,127	128,447	42,816
23	Insurance	205,989	163,092	32,173	10,724
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 O.)				
a	OTHER DUES & SUBSCRIPTIONS	23,226	18,389	3,627	1,210
b	SPECIAL FOOD EDUCATION & PROGRAM COSTS	95,869	75,905	14,973	4,991
c		0			
d		0			
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	29,079,390	26,827,309	1,414,562	837,519
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X. ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	835,416	1	130,430
	2 Savings and temporary cash investments	6,513,442	2	1,053,187
	3 Pledges and grants receivable, net	2,724,926	3	1,190,952
	4 Accounts receivable, net	54,021	4	106,953
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	2,526,144	8	2,263,259
	9 Prepaid expenses and deferred charges	31,787	9	38,504
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 33,792,914		
	b Less: accumulated depreciation	10b 4,720,135		
	11 Investments—publicly traded securities	2,316,841	11	2,780,345
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	205,020	15	55,557
16 Total assets. Add lines 1 through 15 (must equal line 33)	37,899,577	16	36,691,966	
Liabilities	17 Accounts payable and accrued expenses	424,520	17	217,322
	18 Grants payable	0	18	
	19 Deferred revenue	44,868	19	42,747
	20 Tax-exempt bond liabilities	0	20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	
	23 Secured mortgages and notes payable to unrelated third parties	0	23	642,993
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	206,096	25	56,416
	26 Total liabilities. Add lines 17 through 25	675,484	26	959,478
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	28,012,464	27	33,982,354
	28 Net assets with donor restrictions	9,211,629	28	1,750,134
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	
	30 Paid-in or capital surplus, or land, building, or equipment fund	0	30	
	31 Retained earnings, endowment, accumulated income, or other funds	0	31	
	32 Total net assets or fund balances	37,224,093	32	35,732,488
33 Total liabilities and net assets/fund balances	37,899,577	33	36,691,966	

Part XI Reconciliation of Net AssetsCheck 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	27,183,970
2	Total expenses (must equal Part IX, column (A), line 25)	2	29,079,390
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,895,420
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	37,224,093
5	Net unrealized gains (losses) on investments	5	403,815
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	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	35,732,488

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

Page 1 of 1

Employer identification number

75-2057692

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

[illegible]

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

WEST TEXAS FOOD BANK

Employer identification number

75-2057692

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations 0
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total					0	0

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	22,639,617	26,548,061	29,374,753	30,014,951	26,136,429	134,713,811
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	22,639,617	26,548,061	29,374,753	30,014,951	26,136,429	134,713,811
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						134,713,811

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	22,639,617	26,548,061	29,374,753	30,014,951	26,136,429	134,713,811
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	73,478	60,671	68,076	127,562	189,184	518,971
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	9,273	28,407	21,796	58,276	41,713	159,465
11 Total support. Add lines 7 through 10						135,392,247
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 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 2023 (line 6, column (f), divided by line 11, column (f))	14	99.50%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	99.55%
16a 33 1/3% support test—2023. 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—2022. 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—2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-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 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.)

Part II Section B Line 10 Other income consists of insurance reimbursements, rebates,
and miscellaneous income.

Electronic Filing Only

Schedule B
(Form 990)

Schedule of Contributors

OMB No. 1545-0047

2023

Department of the Treasury
Internal Revenue Service

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

Name of the organization

WEST TEXAS FOOD BANK

Employer identification number

75-2057692

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

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

Name of organization WEST TEXAS FOOD BANK	Employer identification number 75-2057692
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	USDA - passed through TX Dept. of Agriculture P.O. Box 12487 Austin TX 78711 Foreign State or Province: _____ Foreign Country: _____	\$ 7,912,447	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	HEB Reclamation Center 5401 Business Park Dr. San Antonio TX 78218 Foreign State or Province: _____ Foreign Country: _____	\$ 876,376	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	Collaborative for Fresh Produce 101 W. Renner Rd, Ste 160 Richardson TX 75082 Foreign State or Province: _____ Foreign Country: _____	\$ 1,518,251	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	General Mills 1 General Mills Blvd Golden Valley MN 55426 Foreign State or Province: _____ Foreign Country: _____	\$ 532,130	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	USDA - passed through TX Dept. of Agriculture P.O. Box 12487 Austin TX 78711 Foreign State or Province: _____ Foreign Country: _____	\$ 1,546,674	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	Charles Butt Foundation 1005 Congress Ave. Suite 100 Austin TX 78701 Foreign State or Province: _____ Foreign Country: _____	\$ 1,000,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization WEST TEXAS FOOD BANK	Employer identification number 75-2057692
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Sam's Wholesale Club 8288 1500 N Tradewinds Midland TX 79705 Foreign State or Province: _____ Foreign Country: _____	\$ 590,578	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8	Sam's Wholesale Club 4230 JBS Parkway Odessa TX 79762 Foreign State or Province: _____ Foreign Country: _____	\$ 584,018	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ Foreign State or Province: _____ Foreign Country: _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization WEST TEXAS FOOD BANK	Employer identification number 75-2057692
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	5,412,361 lbs of food received throughout the year	\$ 7,809,687	
2	444,861 lbs of food valued at \$1.97/lb received throughout the year	\$ 876,376	
3	770,686 lbs of food valued at \$1.97/lb received throughout the year	\$ 1,518,251	
4	270,117 lbs of food valued at \$1.97/lb received throughout the year	\$ 532,130	
7	299,786 lbs of food valued at \$1.97/lb received throughout the year	\$ 590,578	
8	296,456 lbs of food valued at \$1.97/lb received throughout the year	\$ 584,018	

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

2023

Open to Public
Inspection

Name of the organization

WEST TEXAS FOOD BANK

Employer identification number

75-2057692

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (for example, recreation or education) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Preservation of a certified historic structure	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.	
(i) Revenue included on Form 990, Part VIII, line 1	\$
(ii) Assets included in Form 990, Part X	\$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.	
a Revenue included on Form 990, Part VIII, line 1	\$
b Assets included in Form 990, Part X	\$

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
1c Beginning balance	0
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	0

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	902,670	828,469	1,015,765	644,330	671,317
b Contributions			0	220,000	250
c Net investment earnings, gains, and losses	194,017	106,293	-159,104	177,922	-312
d Grants or scholarships					
e Other expenditures for facilities and programs	35,849	32,092	28,192	26,487	26,925
f Administrative expenses					
g End of year balance	1,060,838	902,670	828,469	1,015,765	644,330

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

a Board designated or quasi-endowment 81%

b Permanent endowment 19%

c Term endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations

(ii) Related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	1,118,385		1,118,385
b Buildings	0	12,659,578	2,555,429	10,104,149
c Leasehold improvements	0	5,143,429	429,230	4,714,199
d Equipment	0	1,931,977	1,317,763	614,214
e Other	0	12,939,545	417,713	12,521,832

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)). 29,072,779

Part VII Investments—Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely held equity interests	0	
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B)).	0	

Part VIII Investments—Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)).	0	

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)).	0

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	0
(2)	Operating lease liabilities	56,416
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)).		56,416

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 . . . ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	27,587,785
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	403,815
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	403,815
3	Subtract line 2e from line 1	3	27,183,970
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	27,183,970

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	29,079,390
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	29,079,390
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	29,079,390

Part XIII Supplemental Information.

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

Part V Line 4 The purpose of the endowment is to hold the corpus in perpetuity while the

principal is invested through an agreement with the Permian Basin Area Foundation.

Earnings may be distributed annually in accordance with the terms of the agreement which

is 4% of the endowment fund value at the end of the annual valuation period. Distributed

funds are used for operations of the Food Bank, including food purchases and acquisition

of capital assets needed to fulfill the mission of the Food Bank.

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

WEST TEXAS FOOD BANK

Employer identification number

75-2057692

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** ☒ Mail solicitations **e** ☒ Solicitation of non-government grants
b ☒ Internet and email solicitations **f** ☒ Solicitation of government grants
c ☐ Phone solicitations **g** ☒ Special fundraising events
d ☐ In-person solicitations

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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
		Yes	No			
1 BRAD CECIL & ASSOCIATES 2115 Arlington Downs Rd Arlington TX 760	DIRECT MAIL		X	1,025,294	168,183	857,111
2				0	0	0
3				0	0	0
4				0	0	0
5				0	0	0
6				0	0	0
7				0	0	0
8				0	0	0
9				0	0	0
10				0	0	0
Total				1,025,294	168,183	857,111

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

TX

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.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		Golf tournament (event type)	Road show (event type)	8 (total number)	
Revenue	1 Gross receipts	79,072	50,000	43,137	172,209
	2 Less: Contributions			0	0
	3 Gross income (line 1 minus line 2)	79,072	50,000	43,137	172,209
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs	40,881	0	0	40,881
	7 Food and beverages	0	0	0	0
	8 Entertainment	0	0	0	0
	9 Other direct expenses	6,864	7,067	72,823	86,754
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(127,635)
	11 Net income summary. Subtract line 10 from line 3, column (d)				44,574

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.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				0
Direct Expenses	2 Cash prizes				0
	3 Noncash prizes				0
	4 Rent/facility costs				0
	5 Other direct expenses				0
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				(0)
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				0

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity conducted in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name

Address

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ 0 and the amount of gaming revenue retained by the third party \$ 0
- c If "Yes," enter name and address of the third party:

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation \$ 0

Description of services provided

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ 0

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

SCHEDULE 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

2023

**Open to Public
Inspection**

Name of the organization

WEST TEXAS FOOD BANK

Employer identification number

75-2057692

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Nonprofit organizations, individuals Permian Basin West Texas, TX 79760				20,438,221	FMV	14,202,175 lbs of food distributed	Feeding people
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

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

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

1

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

Schedule I (Form 990) 2023

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

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

Part I Line 2 The Food Bank processes and maintains an inventory of all food received and distributed through their inventory management

software system and reports to management and the board of directors on a regular basis.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

WEST TEXAS FOOD BANK

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Employer identification number

75-2057692

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

X

4a

X

4b

X

4c

X

5a

X

5b

X

6a

X

6b

X

7

X

8

X

9

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	Libby Stephens CEO	(i) 302,007			12,133	22,605	336,745	
		(ii)					0	
2	Joey Ruiz CFO	(i) 223,689			8,987	11,244	243,920	
		(ii)					0	
3	Kelly Boydston Director of Impact and Strategy	(i) 148,704			6,191	21,345	176,240	
		(ii)					0	
4	Nancy Salcido Director of Human Resources	(i) 143,711			6,049	21,474	171,234	
		(ii)					0	
5		(i)						
		(ii)						
6		(i)						
		(ii)						
7		(i)						
		(ii)						
8		(i)						
		(ii)						
9		(i)						
		(ii)						
10		(i)						
		(ii)						
11		(i)						
		(ii)						
12		(i)						
		(ii)						
13		(i)						
		(ii)						
14		(i)						
		(ii)						
15		(i)						
		(ii)						
16		(i)						
		(ii)						

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

WEST TEXAS FOOD BANK

Noncash Contributions

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.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Employer identification number

75-2057692

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	10,173,791	17,189,705	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archaeological artifacts				
25 Other (.)				
26 Other (.)				
27 Other (.)				
28 Other (.)				

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Part I Line 19 Donated food is valued at \$1.97/lb based on fair market value estimated by

Feeding American. USDA commodities are valued based on actual amounts provided from the

USDA commodity report. A total of 4,761,430 lbs of donated food products were received

from private and public contributions and a total of 5,412,361 lbs was received from USDA

federal commodities.

Electronic Filing Only

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

2023

**Open to Public
Inspection**

Name of the organization

WEST TEXAS FOOD BANK

Employer identification number

75-2057692

Form 990, Part VI, Section B, Line 11b: The 990 is presented along with the audited financial

statements to the board of directors and executive management for their review and approval

prior to filing.

Form 990, Part VI, Section B, Line 12c: Board members complete a conflict of interest policy

upon election to the board to disclose any personal or business interests. Management and the

executive committee monitor actions taken at board meetings and other business transactions to

identify any potential conflicts of interest. Board members must abstain from any votes for

which a potential conflict may exist. Vendor transactions are monitored for any potential

conflicts by the finance director through accounts payable controls.

Form 990, Part VI, Section B, Line 15a: The Food Bank's policy is to evaluate the executive

director annually, to be completed by the September board meeting. The Board Chair leads the

evaluation process by calling a meeting of the Executive Committee, which includes the

Immediate Past Chair. The committee will perform the evaluation as a group using personnel

evaluation forms and will use data from Feeding America concerning compensation of other Food

Bank executives based on region, size of operation, as a base in setting the compensation

level for the Executive Director. The Board Chair and committee will present and discuss the

evaluation of the Executive Director to the full board for approval.

Form 990, Part VI, Section C, Line 19: All documents are available for public inspection at

the Food Bank's administrative offices at 411 S. Pagewood, Odessa, TX 79761. The 990 and

audited financial statements are published on their website and the 990 is also on

www.guidestar.org.

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2023

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment

Sequence No. 179

Name(s) shown on return
WEST TEXAS FOOD BANKBusiness or activity to which this form relates
990Identifying number
75-2057692**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,160,000
2	Total cost of section 179 property placed in service (see instructions)	2	371,141
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,890,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	1,160,000
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	0
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	0
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562.	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	0
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	0

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2023	17	700,267
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property		65,910	5	HY	S/L	6,592
c 7-year property		153,587	7	FM	S/L	10,850
d 10-year property						
e 15-year property		76,978	15	HY	S/L	2,563
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

20 a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	102,118
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	822,390
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2023)

Part V

Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No					24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No				
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/ investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost	
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions							25		
26 Property used more than 50% in a qualified business use:									
		%							
		%							
See statement		%					102,118		
27 Property used 50% or less in a qualified business use:									
		%				S/L –			
		%				S/L –			
		%				S/L –			
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	102,118	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	0	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (don't include commuting miles)	See Stmt											
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons. See instructions.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI**Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2023 tax year (see instructions):					
43 Amortization of costs that began before your 2023 tax year				43	
44 Total. Add amounts in column (f). See the instructions for where to report				44	0

Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I — Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions.	Taxpayer identification number (TIN)
	WEST TEXAS FOOD BANK	75-2057692
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	411 S. PAGEWOOD	
File by the due date for filing your return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	ODESSA, TX 79761	

Enter the Return Code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
Plan Number _____
Plan Year Ending (MM/DD/YYYY) _____

Part II — Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of JOEY RUIZ
Telephone No. (432) 580-6333 Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 8/15, 20 25, to file the **exempt organization return** for the organization named above. The extension is for the organization's return for:

☐ calendar year 20 ____ or
☒ tax year beginning 10/1, 20 23, and ending 9/30, 20 24.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

Form 4562 Statement - 990

9/30/2024

WEST TEXAS FOOD BANK 75-2057692

Item No.	Description of Property	Date Placed In Service	Asset Code	Business Use %	Cost or Other Basis	Sec. 179 Deduction	Credit	Special Allowance	Salvage Value	Recovery Basis	Recovery Period	Method	Convention Code	Prior Accum. Deprec., 179, Bonus	2023 Deprec.	2023 Accum. Deprec.
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Depreciation Detail

MACRS deductions for prior years (Line 17)

14	Odessa Facility 411 S. Pagew	1/1/2016	R-5	100.00%	10,941,996	0	0	0	0	10,941,996	39.0	SL/GDS	MM	2,162,906	280,553	2,443,459
27	Odessa Facility 411 S. Pagew	5/30/2017	R-12	100.00%	52,166	0	0	0	0	52,166	39.0	SL/GDS	MM	8,530	1,338	9,868
32	Odessa - Mobile Radios	4/29/2018	F-10	100.00%	5,530	0	0	0	0	5,530	7.0	SL/GDS	FM	4,345	790	5,135
37	Odessa - Freezer SW Compre	5/15/2018	F-10	100.00%	4,411	0	0	0	0	4,411	7.0	SL/GDS	FM	3,413	630	4,043
33	Odessa - Evaporative cooler	6/12/2018	F-10	100.00%	12,268	0	0	0	0	12,268	7.0	SL/GDS	FM	9,349	1,753	11,102
31	Odessa -Port-a-coolers	6/28/2018	F-10	100.00%	8,000	0	0	0	0	8,000	7.0	SL/GDS	FM	6,096	1,143	7,239
39	Odessa - Breakroom furniture	7/27/2018	F-11	100.00%	12,423	0	0	0	0	12,423	7.0	SL/GDS	FM	9,319	1,775	11,094
38	Odessa - Phone soundstation	9/30/2018	F-11	100.00%	6,249	0	0	0	0	6,249	7.0	SL/GDS	FM	4,539	893	5,432
41	Odessa WH racks	10/23/2018	F-10	100.00%	9,908	0	0	0	0	9,908	7.0	SL/GDS	FM	7,075	1,415	8,490
43	Odessa 2013 Utility Truck, Trai	1/18/2019	V-4	100.00%	44,271	0	0	0	0	44,271	5.0	SL/GDS	FM	42,057	2,214	44,271
46	Odessa TV for comm room	5/31/2019	F-10	100.00%	1,680	0	0	0	0	1,680	7.0	SL/GDS	FM	1,060	240	1,300
42	Odessa 3 pallet trucks	7/8/2019	F-10	100.00%	14,431	0	0	0	0	14,431	7.0	SL/GDS	FM	8,763	2,062	10,825
44	Odessa Wraps for trucks	9/27/2019	V-4	100.00%	23,970	0	0	0	0	23,970	5.0	SL/GDS	FM	19,575	4,395	23,970
40	Odessa 250g water softn,fiiltr s	9/29/2019	R-13	100.00%	7,250	0	0	0	0	7,250	7.0	SL/GDS	FM	4,230	1,036	5,266
49	Odessa replacement solar pan	12/23/2019	R-13	100.00%	70,000	0	0	0	0	70,000	15.0	SL/GDS	FM	17,890	4,667	22,557
47	Fence around dumpsters	1/24/2020	R-13	100.00%	12,125	0	0	0	0	12,125	15.0	SL/GDS	FM	3,030	808	3,838
53	Odessa wrap for mobile pantry	1/28/2020	V-4	100.00%	5,995	0	0	0	0	5,995	5.0	SL/GDS	FM	4,496	1,199	5,695
50	Odessa caliche for trash bins	4/24/2020	R-13	100.00%	7,300	0	0	0	0	7,300	15.0	SL/GDS	FM	1,704	487	2,191
48	Odessa bldg security cameras	5/28/2020	R-13	100.00%	12,738	0	0	0	0	12,738	15.0	SL/GDS	FM	2,901	849	3,750
55	Odessa 2020 Hino 268a Rush	6/22/2020	V-4	100.00%	118,592	0	0	0	0	118,592	5.0	SL/GDS	FM	79,060	23,718	102,778
51	Odessa warehouse-5 pallet ja	8/28/2020	F-10	100.00%	18,000	0	0	0	0	18,000	7.0	SL/GDS	FM	8,142	2,571	10,713
59	Odessa outreach dsk, chrs, c	9/23/2020	F-11	100.00%	5,370	0	0	0	0	5,370	7.0	SL/GDS	FM	2,365	767	3,132
61	Odessa office furniture	10/26/2020	F-11	100.00%	5,369	0	0	0	0	5,369	7.0	SL/GDS	FM	2,301	767	3,068
66	Odessa Mop sink	11/30/2020	R-13	100.00%	2,926	0	0	0	0	2,926	15.0	SL/GDS	FM	569	195	764
46	Odessa bldg security camera s	12/11/2020	R-13	100.00%	3,807	0	0	0	0	3,807	15.0	SL/GDS	FM	720	254	974
58	Odessa Freezer/Cooler expan:	12/30/2020	R-13	100.00%	847,620	0	0	0	0	847,620	15.0	SL/GDS	FM	160,106	56,508	216,614
68	Odessa Yale forklift (Medley)	1/8/2021	V-4	100.00%	34,923	0	0	0	0	34,923	5.0	SL/GDS	FM	19,208	6,985	26,193
69	Odessa forklift (NJ Mailin)	4/8/2021	V-4	100.00%	41,477	0	0	0	0	41,477	5.0	SL/GDS	FM	20,738	8,295	29,033
73	Odessa 2022 Volvo D13 HD Ti	4/28/2021	V-4	100.00%	143,431	0	0	0	0	143,431	5.0	SL/GDS	FM	71,715	28,686	100,401
67	Odessa water softener system	5/11/2021	R-13	100.00%	13,050	0	0	0	0	13,050	15.0	SL/GDS	FM	2,103	870	2,973
74	Odessa Penske Trailer with wr	5/13/2021	V-4	100.00%	52,695	0	0	0	0	52,695	5.0	SL/GDS	FM	25,469	10,539	36,008
62	Odessa office furniture	7/30/2021	F-11	100.00%	3,750	0	0	0	0	3,750	7.0	SL/GDS	FM	1,206	536	1,742
76	Odessa cargo trailer	8/9/2021	V-4	100.00%	11,170	0	0	0	0	11,170	5.0	SL/GDS	FM	4,840	2,234	7,074
63	Art for Midland Garden	9/8/2021	F-11	100.00%	5,000	0	0	0	0	5,000	7.0	SL/GDS	FM	1,488	714	2,202
65	Odessa Utility portable shop bl	9/13/2021	R-13	100.00%	4,955	0	0	0	0	4,955	15.0	SL/GDS	FM	688	330	1,018
91	Odessa - Warehouse office fur	11/3/2021	F-11	100.00%	9,402	0	0	0	0	9,402	7.0	SL/GDS	FM	2,574	1,343	3,917
82	Odessa WH pushback racks	12/1/2021	F-10	100.00%	145,500	0	0	0	0	145,500	7.0	SL/GDS	FM	38,107	20,786	58,893
79	Odessa office window - bldg ir	2/22/2022	R-13	100.00%	3,240	0	0	0	0	3,240	15.0	SL/GDS	FM	360	216	576
78	Odessa security cameras	3/9/2022	R-13	100.00%	10,214	0	0	0	0	10,214	15.0	SL/GDS	FM	1,078	681	1,759
84	Odessa utility trailer	3/30/2022	V-4	100.00%	11,954	0	0	0	0	11,954	5.0	SL/GDS	FM	3,786	2,391	6,177
60	Midland Innovative Gardens	3/31/2022	R-5	100.00%	1,717,582	0	0	0	0	1,717,582	39.0	SL/GDS	MM	67,931	44,039	111,970
80	Midland bldg cabinets	4/11/2022	R-13	100.00%	5,562	0	0	0	0	5,562	15.0	SL/GDS	FM	556	371	927
83	Odessa pallet jack	6/7/2022	F-10	100.00%	3,000	0	0	0	0	3,000	7.0	SL/GDS	FM	572	429	1,001
81	Odessa A/C units 2nd floor offi	7/14/2022	R-13	100.00%	25,088	0	0	0	0	25,088	15.0	SL/GDS	FM	2,091	1,673	3,764
86	Odessa product distribution tru	8/8/2022	V-4	100.00%	84,250	0	0	0	0	84,250	5.0	SL/GDS	FM	19,658	16,850	36,508
89	Odessa 3-Dell Latitude laptops	9/11/2022	F-5	100.00%	5,090	0	0	0	0	5,090	5.0	SL/GDS	FM	1,103	1,018	2,121
92	Midland - art for Innov Gardens	9/15/2022	F-11	100.00%	80,000	0	0	0	0	80,000	7.0	SL/GDS	FM	12,381	11,429	23,810
93	Odessa - roller shades	9/21/2022	F-11	100.00%	2,858	0	0	0	0	2,858	7.0	SL/GDS	FM	442	408	850

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Item No.	Description of Property	Date Placed In Service	Asset Code	Business Use %	Cost or Other Basis	Sec. 179 Deduction	Credit	Special Allowance	Salvage Value	Recovery Basis	Recovery Period	Method	Con-vention Code	Prior Accum. Deprec., 179, Bonus	2023 Deprec.	2023 Accum. Deprec.	
90	Odessa 7-Apple Ipad	9/28/2022	F-5	100.00%	3,420	0	0	0	0	3,420	5.0	SL/GDS	FM	741	684	1,425	
106	Odessa - Artwork WTFB Gard	10/19/2022	F-11	100.00%	15,000	0	0	0	0	15,000	7.0	SL/GDS	FM	2,143	2,143	4,286	
104	Midland - Apple Ipad 10.2 in	10/31/2022	F-5	100.00%	1,602	0	0	0	0	1,602	5.0	SL/GDS	FM	320	320	640	
105	Midland MS Surf Lptp St 14.4 t	10/31/2022	F-5	100.00%	3,318	0	0	0	0	3,318	5.0	SL/GDS	FM	664	664	1,328	
109	Midland Lego sculpture	12/6/2022	R-13	100.00%	29,900	0	0	0	0	29,900	15.0	SL/GDS	FM	1,661	1,993	3,654	
107	Odessa Flagship lateral files	12/15/2022	F-11	100.00%	3,146	0	0	0	0	3,146	7.0	SL/GDS	FM	375	449	824	
95	Midland - concrete steps	3/6/2023	R-13	100.00%	9,250	0	0	0	0	9,250	15.0	SL/GDS	FM	360	617	977	
96	Midland sign	4/13/2023	R-13	100.00%	7,700	0	0	0	0	7,700	15.0	SL/GDS	FM	257	513	770	
102	Odessa Thermo King Trlr Cove	4/18/2023	V-4	100.00%	5,424	0	0	0	0	5,424	5.0	SL/GDS	FM	542	1,085	1,627	
98	Odessa-Heart Sine AED 350p	6/5/2023	F-10	100.00%	4,380	0	0	0	0	4,380	7.0	SL/GDS	FM	209	626	835	
108	Midland office furniture	8/8/2023	F-11	100.00%	7,625	0	0	0	0	7,625	7.0	SL/GDS	FM	182	1,089	1,271	
97	Mdland - 5 ton HVAC	9/27/2023	R-13	100.00%	18,970	0	0	0	0	18,970	15.0	SL/GDS	FM	105	1,265	1,370	
111	MidCo facility 1601 Westcliff	9/30/2023	R-12	100.00%	3,852,180	0	0	0	0	3,852,180	32.0	SL/GDS	MQ4	15,048	120,381	135,429	
113	MidCo Office furniture	9/30/2023	F-11	100.00%	2,486	0	0	0	0	2,486	1.0	SL/GDS	FM	207	2,279	2,486	
114	MidCo Stove, washer, dryer, o	9/30/2023	F-10	100.00%	364	0	0	0	0	364	1.0	SL/GDS	FM	30	334	364	
115	MidCo Kitchen stainless steel t	9/30/2023	F-10	100.00%	223	0	0	0	0	223	1.0	SL/GDS	FM	19	204	223	
116	MidCo Stainless steel demo tal	9/30/2023	F-10	100.00%	143	0	0	0	0	143	1.0	SL/GDS	FM	12	131	143	
117	MidCo Freezers(2), fridge, tvs	9/30/2023	F-10	100.00%	155	0	0	0	0	155	1.0	SL/GDS	FM	13	142	155	
118	MidCo Phone system	9/30/2023	F-10	100.00%	488	0	0	0	0	488	1.0	SL/GDS	FM	41	447	488	
119	MidCo Forklift	9/30/2023	F-10	100.00%	2,185	0	0	0	0	2,185	1.0	SL/GDS	FM	182	2,003	2,185	
120	MidCo Bldg impr seal coat floo	9/30/2023	R-13	100.00%	15,885	0	0	0	0	15,885	10.0	SL/GDS	FM	132	1,588	1,721	
121	MidCo Furn & fixt pantry to offi	9/30/2023	F-11	100.00%	4,017	0	0	0	0	4,017	2.0	SL/GDS	FM	167	2,008	2,176	
123	MidCo Bldg impr louver, pantry	9/30/2023	R-13	100.00%	47,862	0	0	0	0	47,862	10.0	SL/GDS	FM	399	4,786	5,185	
124	MidCo Security system upgrad	9/30/2023	R-13	100.00%	6,663	0	0	0	0	6,663	10.0	SL/GDS	FM	56	666	722	
Total MACRS deductions for prior years (Line 17)					18,710,972	0	0	0	0	18,710,972							
GDS 5-year property (Line 19b)															2,896,500	700,267	3,596,769
135	Truck wraps	11/28/2023	V-4	100.00%	4,495	0	0	0	0	4,495	5.0	SL/GDS	HY	0	450	450	
136	Truck wraps (Oxy)	2/28/2024	V-4	100.00%	4,495	0	0	0	0	4,495	5.0	SL/GDS	HY	0	450	450	
137	48 Truck Wrap	6/20/2024	V-4	100.00%	37,425	0	0	0	0	37,425	5.0	SL/GDS	HY	0	3,742	3,743	
138	53 Ridgid Trailer wrap	9/18/2024	V-4	100.00%	19,495	0	0	0	0	19,495	5.0	SL/GDS	HY	0	1,950	1,950	
Total GDS 5-year property (Line 19b)					65,910	0	0	0	0	65,910							
GDS 7-year property (Line 19c)															0	6,592	6,593
142	Volunteer center furniture	3/5/2024	F-11	100.00%	31,674	0	0	0	0	31,674	7.0	SL/GDS	HY	0	2,262	2,262	
143	5 desks	3/20/2024	F-11	100.00%	1,900	0	0	0	0	1,900	7.0	SL/GDS	HY	0	136	136	
133	Forklift improvements	3/24/2024	F-10	100.00%	4,512	0	0	0	0	4,512	7.0	SL/GDS	HY	0	322	322	
144	Outreach office furniture	3/25/2024	F-11	100.00%	14,800	0	0	0	0	14,800	7.0	SL/GDS	HY	0	1,057	1,057	
145	Cedar benches	4/3/2024	F-11	100.00%	9,144	0	0	0	0	9,144	7.0	SL/GDS	HY	0	653	653	
146	Office furniture	4/23/2024	F-11	100.00%	4,860	0	0	0	0	4,860	7.0	SL/GDS	HY	0	347	347	
147	Odessa expansion office equip	4/28/2024	F-11	100.00%	9,575	0	0	0	0	9,575	7.0	SL/GDS	HY	0	684	684	
126	Ice maker	5/3/2024	F-10	100.00%	5,959	0	0	0	0	5,959	7.0	SL/GDS	FM	0	355	355	
148	Odessa expansion office equip	6/6/2024	F-11	100.00%	7,750	0	0	0	0	7,750	7.0	SL/GDS	HY	0	553	553	
127	Fire alarms	6/11/2024	F-10	100.00%	1,920	0	0	0	0	1,920	7.0	SL/GDS	FM	0	91	91	
141	Wifi 6 smart wireless access pr	6/19/2024	F-11	100.00%	8,750	0	0	0	0	8,750	7.0	SL/GDS	HY	0	625	625	
149	Office furniture	7/23/2024	F-11	100.00%	6,293	0	0	0	0	6,293	7.0	SL/GDS	HY	0	449	449	
150	Midland location furniture	7/28/2024	F-11	100.00%	5,925	0	0	0	0	5,925	7.0	SL/GDS	HY	0	423	423	
151	Volunteer center furniture	8/26/2024	F-11	100.00%	15,945	0	0	0	0	15,945	7.0	SL/GDS	HY	0	1,138	1,138	
152	Office furniture	8/30/2024	F-11	100.00%	24,580	0	0	0	0	24,580	7.0	SL/GDS	HY	0	1,755	1,755	

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Item No.	Description of Property	Date Placed In Service	Asset Code	Business Use %	Cost or Other Basis	Sec. 179 Deduction	Credit	Special Allowance	Salvage Value	Recovery Basis	Recovery Period	Method	Con-vention Code	Prior Accum. Deprec., 179, Bonus	2023 Deprec.	2023 Accum. Deprec.
Total GDS 7-year property (Line 19c)					153,587	0	0	0	0	153,587				0	10,850	10,850
GDS 15-year property (Line 19e)																
129	Wall pack, bubls	12/5/2023	R-13	100.00%	3,240	0	0	0	0	3,240	15.0	SL/GDS	HY	0	108	108
130	Berring replacemnt in WH	4/19/2024	R-13	100.00%	7,400	0	0	0	0	7,400	15.0	SL/GDS	HY	0	246	246
131	Loading deck fencing	4/30/2024	R-13	100.00%	10,100	0	0	0	0	10,100	15.0	SL/GDS	HY	0	336	336
140	Odessa expansin wiring	6/17/2024	R-13	100.00%	22,180	0	0	0	0	22,180	15.0	SL/GDS	HY	0	739	739
128	Stand and flange for lego art	7/9/2024	R-13	100.00%	25,370	0	0	0	0	25,370	15.0	SL/GDS	HY	0	845	845
132	Wiring 6 falcons 2 receivers	8/26/2024	R-13	100.00%	8,688	0	0	0	0	8,688	15.0	SL/GDS	HY	0	289	289
Total GDS 15-year property (Line 19e)					76,978	0	0	0	0	76,978				0	2,563	2,563
Subtotal Depreciation																
					19,007,447	0	0	0	0	19,007,447				2,896,500	720,272	3,616,775

Listed Property

Listed property with more than 50% business use (Line 25 and 26)																
134	2023 Ford Transit	11/27/2023	V-6	100.00%	54,324	0	0	0	0	54,324	5.0	SL/GDS	HY	0	5,432	5,432
8	Computer Hardware Configura	3/11/2013	F-15	100.00%	21,732	0	0	0	0	21,732	5.0	SL/GDS	FM	21,730	0	21,730
4	Dell Computer - Alpine	6/19/2012	F-15	100.00%	1,002	0	0	0	0	1,002	5.0	SL/GDS	FM	961	0	961
3	Dell Computer - Odessa	6/19/2012	F-15	100.00%	1,002	0	0	0	0	1,002	5.0	SL/GDS	FM	961	0	961
2	Dell Latitude Laptop - Alpine	5/21/2012	F-15	100.00%	1,553	0	0	0	0	1,553	5.0	SL/GDS	FM	1,480	0	1,480
10	Dell PT 320 Edge Server	10/22/2012	F-15	100.00%	4,030	0	0	0	0	4,030	5.0	SL/GDS	FM	4,030	0	4,030
11	Ford F250 Pickup Truck	2/18/2015	V-6	100.00%	41,102	0	0	0	0	41,102	5.0	SL/GDS	FM	41,100	0	41,100
122	MidCo 2018 Nissan Rogue	9/30/2023	V-6	100.00%	0	0	0	0	0	0	1.0	SL/GDS	FM	0	0	0
99	Odessa - 16' trailer wrap refig	10/19/2022	V-6	100.00%	6,500	0	0	0	0	6,500	5.0	SL/GDS	FM	1,300	1,300	2,600
20	Odessa - 2015 Ford Transit Va	8/23/2016	V-6	100.00%	16,426	0	0	0	0	16,426	5.0	SL/GDS	FM	16,426	0	16,426
35	Odessa - 2017 Nissan Van	2/27/2018	V-6	100.00%	25,095	0	0	0	0	25,095	5.0	SL/GDS	FM	25,095	0	25,095
36	Odessa - 2018 Chevy Silvarad	7/31/2018	V-6	100.00%	56,685	0	0	0	0	56,685	5.0	SL/GDS	FM	56,685	0	56,685
29	Odessa - Dell Poweredge serv	2/11/2017	F-15	100.00%	5,556	0	0	0	0	5,556	5.0	SL/GDS	FM	5,555	0	5,555
87	Odessa - Ford truck (Wadley)	8/25/2022	V-6	100.00%	43,500	0	0	0	0	43,500	5.0	SL/GDS	FM	10,150	8,700	18,850
30	Odessa - Freezer, TVs, Refrig	1/29/2017	F-15	100.00%	3,859	0	0	0	0	3,859	5.0	SL/GDS	FM	3,859	0	3,859
28	Odessa 2017 Ford Transit Car	3/14/2017	V-6	100.00%	24,278	0	0	0	0	24,278	5.0	SL/GDS	FM	24,278	0	24,278
75	Odessa 2018 Ford Escape	5/24/2021	V-5	100.00%	11,632	0	0	0	0	11,632	5.0	SL/GDS	FM	5,621	2,326	7,947
71	Odessa 2018 Ford Transit w/w	3/2/2021	V-5	100.00%	14,550	0	0	0	0	14,550	5.0	SL/GDS	FM	7,517	2,910	10,427
57	Odessa 2019 F150 4x2 Super	8/25/2020	V-6	100.00%	34,854	0	0	0	0	34,854	5.0	SL/GDS	FM	22,075	6,971	29,046
52	Odessa 2019 Ford Transit XL	2/3/2020	V-6	100.00%	29,501	0	0	0	0	29,501	5.0	SL/GDS	FM	21,633	5,900	27,533
103	Odessa 2020 Ford van major r	8/30/2023	V-6	100.00%	2,754	0	0	0	0	2,754	5.0	SL/GDS	FM	92	551	643
100	Odessa 2022 Ford Expedition	11/10/2022	V-6	100.00%	61,531	0	0	0	0	61,531	5.0	SL/GDS	FM	11,281	12,306	23,587
88	Odessa 2022 Ford F350	9/12/2022	V-6	100.00%	54,850	0	0	0	0	54,850	5.0	SL/GDS	FM	11,884	10,970	22,854
101	Odessa 2023 Ford E350 Truck	2/8/2023	V-7	100.00%	38,575	0	0	0	0	38,575	5.0	SL/GDS	FM	5,143	7,715	12,858
56	Odessa 7x14 produce transpor	7/13/2020	V-6	100.00%	24,688	0	0	0	0	24,688	5.0	SL/GDS	FM	16,048	4,938	20,986
21	Odessa Freezer - SNAP Ed	10/28/2015	F-15	100.00%	12,189	0	0	0	0	12,189	5.0	SL/GDS	FM	12,189	0	12,189
70	Odessa mule with trailer	12/2/2020	V-9	100.00%	13,986	0	0	0	0	13,986	5.0	SL/GDS	FM	7,925	2,797	10,722
72	Odessa Nissan Transit Wrap	3/5/2021	V-5	100.00%	2,895	0	0	0	0	2,895	5.0	SL/GDS	FM	1,496	579	2,075
85	Odessa Two 7x16 cooler trans	6/14/2022	V-6	100.00%	88,671	0	0	0	0	88,671	5.0	SL/GDS	FM	23,645	17,734	41,379
19	Odessa Wal-Mart Truck - Com	7/13/2016	F-15	100.00%	5,096	0	0	0	0	5,096	5.0	SL/GDS	FM	5,095	0	5,095
18	Odessa WH - Kitchen Equipme	1/28/2016	F-15	100.00%	3,084	0	0	0	0	3,084	5.0	SL/GDS	FM	3,084	0	3,084
17	Odessa WH - Televisions	1/28/2016	F-15	100.00%	5,375	0	0	0	0	5,375	5.0	SL/GDS	FM	5,375	0	5,375
54	Odesssa 2020 Ford Transit Ca	5/4/2020	V-6	100.00%	44,775	0	0	0	0	44,775	5.0	SL/GDS	FM	30,596	8,955	39,551
9	Phone system - Odessa & Alpi	2/20/2013	F-15	100.00%	6,236	0	0	0	0	6,236	5.0	SL/GDS	FM	6,235	0	6,235

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Item No.	Description of Property	Date Placed In Service	Asset Code	Business Use %	Cost or Other Basis	Sec. 179 Deduction	Credit	Special Allowance	Salvage Value	Recovery Basis	Recovery Period	Method	Convention Code	Prior Accum. Deprec., 179, Bonus	2023 Deprec.	2023 Accum. Deprec.
7	Primarius Software	10/4/2012	F-15	100.00%	41,324	0	0	0	0	41,324	5.0	SL/GDS	FM	41,324	0	41,324
139	Smoker pit with trailer	9/19/2024	V-9	100.00%	20,342	0	0	0	0	20,342	5.0	SL/GDS	HY	0	2,034	2,034
Total listed prop with > 50% business use					823,552	0	0	0	0	823,552				451,868	102,118	553,986
Subtotal Listed Property					823,552	0	0	0	0	823,552				451,868	102,118	553,986
Total Depreciation and Amortization					19,830,999	0	0	0	0	19,830,999				3,348,368	822,390	4,170,761

Elections

Election to Use MACRS Straight Line Method - All Property

Pursuant to IRC Section 168(b)(3)(D), the Taxpayer elects to use the straight line method of depreciation in computing the deduction for all property placed in service during the current tax year.

Election to NOT claim first-year special depreciation - 3 Year Property

Pursuant to IRC Section 168(k)(2)(D)(iii), the Taxpayer elects out of first-year special depreciation for all 3-Year depreciable property placed in service during the current tax year.

Election to NOT claim first-year special depreciation - 5 Year Property

Pursuant to IRC Section 168(k)(2)(D)(iii), the Taxpayer elects out of first-year special depreciation for all 5-Year depreciable property placed in service during the current tax year.

Election to NOT claim first-year special depreciation - 7 Year Property

Pursuant to IRC Section 168(k)(2)(D)(iii), the Taxpayer elects out of first-year special depreciation for all 7-Year depreciable property placed in service during the current tax year.

Election to NOT claim first-year special depreciation - 10 Year Property

Pursuant to IRC Section 168(k)(2)(D)(iii), the Taxpayer elects out of first-year special depreciation for all 10-Year depreciable property placed in service during the current tax year.

Election to NOT claim first-year special depreciation - 15 Year Property

Pursuant to IRC Section 168(k)(2)(D)(iii), the Taxpayer elects out of first-year special depreciation for all 15-Year depreciable property placed in service during the current tax year.

Election to NOT claim first-year special depreciation - 20 Year Property

Pursuant to IRC Section 168(k)(2)(D)(iii), the Taxpayer elects out of first-year special depreciation for all 20-Year depreciable property placed in service during the current tax year.

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WEST TEXAS FOOD BANK 75-2057692

Item No.	Description of Property **** indicates DISPOSED	Date Placed in Service	Business Use %	Cost or Other Basis	Recovery Basis	Rec Period	Method	Con-vention Code	Prior Accum. Deprec., 179, Bonus	2023 Current Deprec.	2023 Accum. Deprec.	2024 Next Year Deprec.
1	COMPUTER UPGRADE-BIG 5	7/20/2000	100.00%	3,125	3,125	3.0	SL/GDS	HY	3,125	0	3,125	0
2	Dell Latitude Laptop - Alpine	5/21/2012	100.00%	1,553	1,553	5.0	SL/GDS	FM	1,480	0	1,480	0
3	Dell Computer - Odessa	6/19/2012	100.00%	1,002	1,002	5.0	SL/GDS	FM	961	0	961	0
4	Dell Computer - Alpine	6/19/2012	100.00%	1,002	1,002	5.0	SL/GDS	FM	961	0	961	0
5	Telecom Toshiba Phone Syste	12/27/2011	100.00%	4,882	4,882	7.0	SL/GDS	FM	4,767	0	4,767	0
6	Land - Parkway Industrial	3/20/2013	100.00%	114,375	114,375	0			0	0	0	0
7	Primarius Software	10/4/2012	100.00%	41,324	41,324	5.0	SL/GDS	FM	41,324	0	41,324	0
8	Computer Hardware Configura	3/11/2013	100.00%	21,732	21,732	5.0	SL/GDS	FM	21,730	0	21,730	0
9	Phone system - Odessa & Alpi	2/20/2013	100.00%	6,236	6,236	5.0	SL/GDS	FM	6,235	0	6,235	0
10	Dell PT 320 Edge Server	10/22/2012	100.00%	4,030	4,030	5.0	SL/GDS	FM	4,030	0	4,030	0
11	Ford F250 Pickup Truck	2/18/2015	100.00%	41,102	41,102	5.0	SL/GDS	FM	41,100	0	41,100	0
12	Big Orange Truck	6/24/2015	100.00%	148,125	148,125	5.0	SL/GDS	FM	148,125	0	148,125	0
13	Odessa Computer website	2/26/2015	100.00%	19,550	19,550	5.0	SL/GDS	FM	19,550	0	19,550	0
14	Odessa Facility 411 S. Pagew	1/1/2016	100.00%	10,941,996	10,941,996	39.0	SL/GDS	MM	2,162,906	280,553	2,443,459	280,553
15	Odessa WH shelving and merc	10/28/2015	100.00%	3,871	3,871	7.0	SL/GDS	FM	3,871	0	3,871	0
16	Odessa WH - 50 drums	11/30/2015	100.00%	4,014	4,014	7.0	SL/GDS	FM	4,012	0	4,012	0
17	Odessa WH - Televisions	1/28/2016	100.00%	5,375	5,375	5.0	SL/GDS	FM	5,375	0	5,375	0
18	Odessa WH - Kitchen Equipme	1/28/2016	100.00%	3,084	3,084	5.0	SL/GDS	FM	3,084	0	3,084	0
19	Odessa Wal-Mart Truck - Com	7/13/2016	100.00%	5,096	5,096	5.0	SL/GDS	FM	5,095	0	5,095	0
20	Odessa - 2015 Ford Transit Va	8/23/2016	100.00%	16,426	16,426	5.0	SL/GDS	FM	16,426	0	16,426	0
21	Odessa Freezer - SNAP Ed	10/28/2015	100.00%	12,189	12,189	5.0	SL/GDS	FM	12,189	0	12,189	0
22	Odessa - Website creation	5/4/2016	100.00%	28,528	28,528	5.0	SL/GDS	FM	28,528	0	28,528	0
23	Odessa - scanner/pistol	5/18/2016	100.00%	2,234	2,234	5.0	SL/GDS	FM	2,234	0	2,234	0
24	Odessa - computer access sys	5/27/2016	100.00%	5,467	5,467	5.0	SL/GDS	FM	5,466	0	5,466	0
25	Odessa Facility - Office furnit	1/1/2016	100.00%	221,836	221,836	7.0	SL/GDS	FM	221,836	0	221,836	0
26	Odessa Facility - window shad	2/22/2016	100.00%	2,860	2,860	7.0	SL/GDS	FM	2,860	0	2,860	0
27	Odessa Facility 411 S. Pagew	5/30/2017	100.00%	52,166	52,166	39.0	SL/GDS	MM	8,530	1,338	9,868	1,338
28	Odessa 2017 Ford Transit Car	3/14/2017	100.00%	24,278	24,278	5.0	SL/GDS	FM	24,278	0	24,278	0
29	Odessa - Dell Poweredge serv	2/11/2017	100.00%	5,556	5,556	5.0	SL/GDS	FM	5,555	0	5,555	0
30	Odessa - Freezer, TVs, Refrig	1/29/2017	100.00%	3,859	3,859	5.0	SL/GDS	FM	3,859	0	3,859	0
31	Odessa -Port-a-coolers	6/28/2018	100.00%	8,000	8,000	7.0	SL/GDS	FM	6,096	1,143	7,239	761
32	Odessa - Mobile Radios	4/29/2018	100.00%	5,530	5,530	7.0	SL/GDS	FM	4,345	790	5,135	395
33	Odessa - Evaporative cooler	6/12/2018	100.00%	12,268	12,268	7.0	SL/GDS	FM	9,349	1,753	11,102	1,166
34	Odessa - Mobile Food Pantry 1	2/27/2018	100.00%	105,000	105,000	5.0	SL/GDS	FM	105,000	0	105,000	0
35	Odessa - 2017 Nissan Van	2/27/2018	100.00%	25,095	25,095	5.0	SL/GDS	FM	25,095	0	25,095	0
36	Odessa - 2018 Chevy Silvarad	7/31/2018	100.00%	56,685	56,685	5.0	SL/GDS	FM	56,685	0	56,685	0
37	Odessa - Freezer SW Compre	5/15/2018	100.00%	4,411	4,411	7.0	SL/GDS	FM	3,413	630	4,043	368
38	Odessa - Phone soundstation	9/30/2018	100.00%	6,249	6,249	7.0	SL/GDS	FM	4,539	893	5,432	817
39	Odessa - Breakroom furniture	7/27/2018	100.00%	12,423	12,423	7.0	SL/GDS	FM	9,319	1,775	11,094	1,329
40	Odessa 250g water softn,filtr s	9/29/2019	100.00%	7,250	7,250	7.0	SL/GDS	FM	4,230	1,036	5,266	1,036
41	Odessa WH racks	10/23/2018	100.00%	9,908	9,908	7.0	SL/GDS	FM	7,075	1,415	8,490	1,415
42	Odessa 3 pallet trucks	7/8/2019	100.00%	14,431	14,431	7.0	SL/GDS	FM	8,763	2,062	10,825	2,062
43	Odessa 2013 Utility Truck, Tra	1/18/2019	100.00%	44,271	44,271	5.0	SL/GDS	FM	42,057	2,214	44,271	0
44	Odessa Wraps for trucks	9/27/2019	100.00%	23,970	23,970	5.0	SL/GDS	FM	19,575	4,395	23,970	0
45	Midland - Donated Pinon Land	9/3/2019	100.00%	119,010	119,010	0			0	0	0	0
46	Odessa TV for comm room	5/31/2019	100.00%	1,680	1,680	7.0	SL/GDS	FM	1,060	240	1,300	240
46	Odessa bldg security camera s	12/11/2020	100.00%	3,807	3,807	15.0	SL/GDS	FM	720	254	974	254
47	Fence around dumpsters	1/24/2020	100.00%	12,125	12,125	15.0	SL/GDS	FM	3,030	808	3,838	808
48	Odessa bldg security cameras	5/28/2020	100.00%	12,738	12,738	15.0	SL/GDS	FM	2,901	849	3,750	849
49	Odessa replacement solar pan	12/23/2019	100.00%	70,000	70,000	15.0	SL/GDS	FM	17,890	4,667	22,557	4,667
50	Odessa caliche for trash bins	4/24/2020	100.00%	7,300	7,300	15.0	SL/GDS	FM	1,704	487	2,191	487

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Item No.	Description of Property **** indicates DISPOSED	Date Placed in Service	Business Use %	Cost or Other Basis	Recovery Basis	Rec Period	Method	Con-vention Code	Prior Accum. Deprec., 179, Bonus	2023 Current Deprec.	2023 Accum. Deprec.	2024 Next Year Deprec.
51	Odessa warehouse-5 pallet ja	8/28/2020	100.00%	18,000	18,000	7.0	SL/GDS	FM	8,142	2,571	10,713	2,571
52	Odessa 2019 Ford Transit XL \	2/3/2020	100.00%	29,501	29,501	5.0	SL/GDS	FM	21,633	5,900	27,533	1,967
53	Odessa wrap for mobile pantry	1/28/2020	100.00%	5,995	5,995	5.0	SL/GDS	FM	4,496	1,199	5,695	300
54	Odessa 2020 Ford Transit Ca	5/4/2020	100.00%	44,775	44,775	5.0	SL/GDS	FM	30,596	8,955	39,551	5,224
55	Odessa 2020 Hino 268a Rush	6/22/2020	100.00%	118,592	118,592	5.0	SL/GDS	FM	79,060	23,718	102,778	15,812
56	Odessa 7x14 produce transpo	7/13/2020	100.00%	24,688	24,688	5.0	SL/GDS	FM	16,048	4,938	20,986	3,702
57	Odessa 2019 F150 4x2 Superc	8/25/2020	100.00%	34,854	34,854	5.0	SL/GDS	FM	22,075	6,971	29,046	5,808
58	Odessa Freezer/Cooler expan	12/30/2020	100.00%	847,620	847,620	15.0	SL/GDS	FM	160,106	56,508	216,614	56,508
59	Odessa outreach dsk, chrs, c	9/23/2020	100.00%	5,370	5,370	7.0	SL/GDS	FM	2,365	767	3,132	767
60	Midland Innovative Gardens	3/31/2022	100.00%	1,717,582	1,717,582	39.0	SL/GDS	MM	67,931	44,039	111,970	44,039
61	Odessa office furniture	10/26/2020	100.00%	5,369	5,369	7.0	SL/GDS	FM	2,301	767	3,068	767
62	Odessa office furniture	7/30/2021	100.00%	3,750	3,750	7.0	SL/GDS	FM	1,206	536	1,742	536
63	Art for Midland Garden	9/8/2021	100.00%	5,000	5,000	7.0	SL/GDS	FM	1,488	714	2,202	714
65	Odessa Utility portable shop bl	9/13/2021	100.00%	4,955	4,955	15.0	SL/GDS	FM	688	330	1,018	330
66	Odessa Mop sink	11/30/2020	100.00%	2,926	2,926	15.0	SL/GDS	FM	569	195	764	195
67	Odessa water softener system	5/11/2021	100.00%	13,050	13,050	15.0	SL/GDS	FM	2,103	870	2,973	870
68	Odessa Yale forklift (Medley)	1/8/2021	100.00%	34,923	34,923	5.0	SL/GDS	FM	19,208	6,985	26,193	6,985
69	Odessa forklift (NJ Mailin)	4/8/2021	100.00%	41,477	41,477	5.0	SL/GDS	FM	20,738	8,295	29,033	8,295
70	Odessa mule with trailer	12/2/2020	100.00%	13,986	13,986	5.0	SL/GDS	FM	7,925	2,797	10,722	2,797
71	Odessa 2018 Ford Transit w/w	3/2/2021	100.00%	14,550	14,550	5.0	SL/GDS	FM	7,517	2,910	10,427	2,910
72	Odessa Nissan Transit Wrap	3/5/2021	100.00%	2,895	2,895	5.0	SL/GDS	FM	1,496	579	2,075	579
73	Odessa 2022 Volvo D13 HD Ti	4/28/2021	100.00%	143,431	143,431	5.0	SL/GDS	FM	71,715	28,686	100,401	28,686
74	Odessa Penske Trailer with wr	5/13/2021	100.00%	52,695	52,695	5.0	SL/GDS	FM	25,469	10,539	36,008	10,539
75	Odessa 2018 Ford Escape	5/24/2021	100.00%	11,632	11,632	5.0	SL/GDS	FM	5,621	2,326	7,947	2,326
76	Odessa cargo trailer	8/9/2021	100.00%	11,170	11,170	5.0	SL/GDS	FM	4,840	2,234	7,074	2,234
77	Odessa donated ring	12/23/2020	100.00%	9,069	9,069	0			0	0	0	0
78	Odessa security cameras	3/9/2022	100.00%	10,214	10,214	15.0	SL/GDS	FM	1,078	681	1,759	681
79	Odessa office window - bldg in	2/22/2022	100.00%	3,240	3,240	15.0	SL/GDS	FM	360	216	576	216
80	Midland bldg cabinets	4/11/2022	100.00%	5,562	5,562	15.0	SL/GDS	FM	556	371	927	371
81	Odessa A/C units 2nd floor offi	7/14/2022	100.00%	25,088	25,088	15.0	SL/GDS	FM	2,091	1,673	3,764	1,673
82	Odessa WH pushback racks	12/1/2021	100.00%	145,500	145,500	7.0	SL/GDS	FM	38,107	20,786	58,893	20,786
83	Odessa pallet jack	6/7/2022	100.00%	3,000	3,000	7.0	SL/GDS	FM	572	429	1,001	429
84	Odessa utility trailer	3/30/2022	100.00%	11,954	11,954	5.0	SL/GDS	FM	3,786	2,391	6,177	2,391
85	Odessa Two 7x16 cooler trans	6/14/2022	100.00%	88,671	88,671	5.0	SL/GDS	FM	23,645	17,734	41,379	17,734
86	Odessa product distribution tru	8/8/2022	100.00%	84,250	84,250	5.0	SL/GDS	FM	19,658	16,850	36,508	16,850
87	Odessa - Ford truck (Wadley)	8/25/2022	100.00%	43,500	43,500	5.0	SL/GDS	FM	10,150	8,700	18,850	8,700
88	Odessa 2022 Ford F350	9/12/2022	100.00%	54,850	54,850	5.0	SL/GDS	FM	11,884	10,970	22,854	10,970
89	Odessa 3-Dell Latitude laptops	9/11/2022	100.00%	5,090	5,090	5.0	SL/GDS	FM	1,103	1,018	2,121	1,018
90	Odessa 7-Apple Ipad	9/28/2022	100.00%	3,420	3,420	5.0	SL/GDS	FM	741	684	1,425	684
91	Odessa - Warehouse office fur	11/3/2021	100.00%	9,402	9,402	7.0	SL/GDS	FM	2,574	1,343	3,917	1,343
92	Midland - art for Innov Gardens	9/15/2022	100.00%	80,000	80,000	7.0	SL/GDS	FM	12,381	11,429	23,810	11,429
93	Odessa - roller shades	9/21/2022	100.00%	2,858	2,858	7.0	SL/GDS	FM	442	408	850	408
94	Odessa- CIP expansion	9/30/2022	100.00%	1,039,754	1,039,754	0			0	0	0	0
95	Midland - concrete steps	3/6/2023	100.00%	9,250	9,250	15.0	SL/GDS	FM	360	617	977	617
96	Midland sign	4/13/2023	100.00%	7,700	7,700	15.0	SL/GDS	FM	257	513	770	513
97	Mdland - 5 ton HVAC	9/27/2023	100.00%	18,970	18,970	15.0	SL/GDS	FM	105	1,265	1,370	1,265
98	Odessa-Heart Sine AED 350p	6/5/2023	100.00%	4,380	4,380	7.0	SL/GDS	FM	209	626	835	626
99	Odessa - 16' trailer wrap refrig	10/19/2022	100.00%	6,500	6,500	5.0	SL/GDS	FM	1,300	1,300	2,600	1,300
100	Odessa 2022 Ford Expedition	11/10/2022	100.00%	61,531	61,531	5.0	SL/GDS	FM	11,281	12,306	23,587	12,306
101	Odessa 2023 Ford E350 Truck	2/8/2023	100.00%	38,575	38,575	5.0	SL/GDS	FM	5,143	7,715	12,858	7,715
102	Odessa Thermo King Trlr Cove	4/18/2023	100.00%	5,424	5,424	5.0	SL/GDS	FM	542	1,085	1,627	1,085

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103	Odessa 2020 Ford van major r	8/30/2023	100.00%	2,754	2,754	5.0	SL/GDS	FM	92	551	643	551
104	Midland - Apple Ipad 10.2 in	10/31/2022	100.00%	1,602	1,602	5.0	SL/GDS	FM	320	320	640	320
105	Midland MS Surf Lptp St 14.4 t	10/31/2022	100.00%	3,318	3,318	5.0	SL/GDS	FM	664	664	1,328	664
106	Odessa - Artwork WFTB Garde	10/19/2022	100.00%	15,000	15,000	7.0	SL/GDS	FM	2,143	2,143	4,286	2,143
107	Odessa Flagship lateral files	12/15/2022	100.00%	3,146	3,146	7.0	SL/GDS	FM	375	449	824	449
108	Midland office furniture	8/8/2023	100.00%	7,625	7,625	7.0	SL/GDS	FM	182	1,089	1,271	1,089
109	Midland Lego sculpture	12/6/2022	100.00%	29,900	29,900	15.0	SL/GDS	FM	1,661	1,993	3,654	1,993
110	Odessa CIP expansion	9/30/2023	100.00%	4,413,164	4,413,164	0			0	0	0	0
111	MidCo facility 1601 Westcliff	9/30/2023	100.00%	3,852,180	3,852,180	32.0	SL/GDS	MQ4	15,048	120,381	135,429	120,381
112	MidCo donated land and prope	9/30/2023	100.00%	885,000	885,000	0			0	0	0	0
113	MidCo Office furniture	9/30/2023	100.00%	2,486	2,486	1.0	SL/GDS	FM	207	2,279	2,486	0
114	MidCo Stove, washer, dryer, o	9/30/2023	100.00%	364	364	1.0	SL/GDS	FM	30	334	364	0
115	MidCo Kitchen stainless steel t	9/30/2023	100.00%	223	223	1.0	SL/GDS	FM	19	204	223	0
116	MidCo Stainless steel demo ta	9/30/2023	100.00%	143	143	1.0	SL/GDS	FM	12	131	143	0
117	MidCo Freezers(2), fridge, tvs	9/30/2023	100.00%	155	155	1.0	SL/GDS	FM	13	142	155	0
118	MidCo Phone system	9/30/2023	100.00%	488	488	1.0	SL/GDS	FM	41	447	488	0
119	MidCo Forklift	9/30/2023	100.00%	2,185	2,185	1.0	SL/GDS	FM	182	2,003	2,185	0
120	MidCo Bldg impr seal coat floo	9/30/2023	100.00%	15,885	15,885	10.0	SL/GDS	FM	132	1,588	1,721	1,589
121	MidCo Furn & fixt pantry to offi	9/30/2023	100.00%	4,017	4,017	2.0	SL/GDS	FM	167	2,008	2,176	1,841
122	MidCo 2018 Nissan Rogue	9/30/2023	100.00%	0	0	1.0	SL/GDS	FM	0	0	0	0
123	MidCo Bldg impr louver, pantry	9/30/2023	100.00%	47,862	47,862	10.0	SL/GDS	FM	399	4,786	5,185	4,786
124	MidCo Security system upgrad	9/30/2023	100.00%	6,663	6,663	10.0	SL/GDS	FM	56	666	722	666
125	Odessa CIP expansion	9/30/2024	100.00%	6,832,051	6,832,051	0			0	0	0	0
126	Ice maker	5/3/2024	100.00%	5,959	5,959	7.0	SL/GDS	FM	0	355	355	851
127	Fire alarms	6/11/2024	100.00%	1,920	1,920	7.0	SL/GDS	FM	0	91	91	274
128	Stand and flange for lego art	7/9/2024	100.00%	25,370	25,370	15.0	SL/GDS	HY	0	845	845	1,692
129	Walll pack, bubls	12/5/2023	100.00%	3,240	3,240	15.0	SL/GDS	HY	0	108	108	216
130	Berring replacemnt in WH	4/19/2024	100.00%	7,400	7,400	15.0	SL/GDS	HY	0	246	246	494
131	Loading deck fencing	4/30/2024	100.00%	10,100	10,100	15.0	SL/GDS	HY	0	336	336	674
132	Wiring 6 falcons 2 receivers	8/26/2024	100.00%	8,688	8,688	15.0	SL/GDS	HY	0	289	289	579
133	Forklift improvements	3/24/2024	100.00%	4,512	4,512	7.0	SL/GDS	HY	0	322	322	645
134	2023 Ford Transit	11/27/2023	100.00%	54,324	54,324	5.0	SL/GDS	HY	0	5,432	5,432	10,865
135	Truck wraps	11/28/2023	100.00%	4,495	4,495	5.0	SL/GDS	HY	0	450	450	899
136	Truck wraps (Oxy)	2/28/2024	100.00%	4,495	4,495	5.0	SL/GDS	HY	0	450	450	899
137	48 Truck Wrap	6/20/2024	100.00%	37,425	37,425	5.0	SL/GDS	HY	0	3,742	3,743	7,485
138	53 Ridgid Trailer wrap	9/18/2024	100.00%	19,495	19,495	5.0	SL/GDS	HY	0	1,950	1,950	3,899
139	Smoker pit with trailer	9/19/2024	100.00%	20,342	20,342	5.0	SL/GDS	HY	0	2,034	2,034	4,068
140	Odessa expansin wiring	6/17/2024	100.00%	22,180	22,180	15.0	SL/GDS	HY	0	739	739	1,479
141	Wifi 6 smart wireless access pr	6/19/2024	100.00%	8,750	8,750	7.0	SL/GDS	HY	0	625	625	1,250
142	Volunteer center furniture	3/5/2024	100.00%	31,674	31,674	7.0	SL/GDS	HY	0	2,262	2,262	4,526
143	5 desks	3/20/2024	100.00%	1,900	1,900	7.0	SL/GDS	HY	0	136	136	272
144	Outreach office furniture	3/25/2024	100.00%	14,800	14,800	7.0	SL/GDS	HY	0	1,057	1,057	2,115
145	Cedar benches	4/3/2024	100.00%	9,144	9,144	7.0	SL/GDS	HY	0	653	653	1,307
146	Office furniture	4/23/2024	100.00%	4,860	4,860	7.0	SL/GDS	HY	0	347	347	694
147	Odessa expansion office equip	4/28/2024	100.00%	9,575	9,575	7.0	SL/GDS	HY	0	684	684	1,368
148	Odessa expansion office equip	6/6/2024	100.00%	7,750	7,750	7.0	SL/GDS	HY	0	553	553	1,107
149	Office furniture	7/23/2024	100.00%	6,293	6,293	7.0	SL/GDS	HY	0	449	449	899
150	Midland location furniture	7/28/2024	100.00%	5,925	5,925	7.0	SL/GDS	HY	0	423	423	847
151	Volunteer center furniture	8/26/2024	100.00%	15,945	15,945	7.0	SL/GDS	HY	0	1,138	1,138	2,279
152	Office furniture	8/30/2024	100.00%	24,580	24,580	7.0	SL/GDS	HY	0	1,755	1,755	3,512

Detail Report - 990

9/30/2024

WEST TEXAS FOOD BANK 75-2057692												
Item No.	Description of Property **** indicates DISPOSED	Date Placed in Service	Business Use %	Cost or Other Basis	Recovery Basis	Rec Period	Method	Con-vention Code	Prior Accum. Deprec., 179, Bonus	2023 Current Deprec.	2023 Accum. Deprec.	2024 Next Year Deprec.
	SubTotals			33,792,914	33,792,914				3,897,742	822,390	4,720,135	
	Less: Disposed Assets			(0)	(0)				(0)	(0)	(0)	
	Ending Totals			33,792,914	33,792,914				3,897,742	822,390	4,720,135	816,783