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Department of the Treasury

**Return of Organization Exempt From Income Tax** 

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

benefit trust or private foundation)

OMB No 1545-0047 Open to Public

		e service The organization may have to use a copy of this feture to satisfy state if								
			UN 30, 20	09						
B ca	heck if oplicable	Please use IRS	D Employer ider	ntification number						
_	7Address	label or								
$\vdash$	_change ∃Name	print or FOOD FOR OTHERS, INC.	[							
<u> </u>	Jchange ∃Initial	Doing Business As	54-1777157							
<u> </u>	return	See Number and street (or P.O. box if mail is not delivered to street address) Room/suite	1 — ·							
<u> </u>	Termin- ation	Instruc- 2938 PROSPERTTY AVENUE	70.	3-207-9173						
LX	Amende	Shy or torring state or obtaining, and are in	G Gross receipts \$	4,281,779.						
	Applica tion pending	FAIRFAX, VA 22031-2209	H(a) is this a grou	·						
	peroni	F Name and address of principal officer ROXANNE RICE	for affiliates?	Yes X No						
		SAME AS C ABOVE	H(b) Are all affiliates	s included? Yes No						
<u>1 T</u>	ax-exe	mpt status X 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or 527	If "No," attac	ch a list (see instructions)						
JV	Vebsite	E ► WWW.FOODFOROTHERS.ORG	H(c) Group exem	ption number 🕨						
K T	ype of c	rganization: X Corporation	of formation: 199	5 M State of legal domicile: VA						
		Summary								
6	1 E	nefly describe the organization's mission or most significant activities. TO PROVIDE	RELIEF TO	O POOR AND						
Activities & Governance	Ţ	INDERPRIVILEGED PERSONS AND FAMILIES.								
2	2	Check this box   If the organization discontinued its operations or disposed of more	than 25% of its as	sets						
Š	3 1	lumber of voting members of the governing body (Part VI, line 1a)		3   11						
ŏ	ł .	lumber of independent voting members of the governing body (Part VI, line 1b)	·	4 11						
တို		otal number of employees (Part V, line 2a)	i	5 11						
ij		otal number of volunteers (estimate if necessary)		6 1756						
흕		otal gross unrelated business revenue from Part VIII, line 12, column (C)		7a 4,500.						
ĕ		let unrelated business taxable income from Form-990-T-Ine-34	f	7b 3,049.						
	0 1	RECEIVED L	Prior Year	Current Year						
		Contributions and grants (Part VIII, line 1h)	3,228,66							
ine i	l	103	3,220,00	7. 4,130,411.						
Revenue		Togram control of the time and time and the time and time and the time and time and the time and time an	16 27	0 103						
Re		ivestment income (Fart viii, column (A), lines 3; 3, 3 and 70)	16,37							
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,03							
	I	otal revenue - add lines 8 through 11 (must equal Part Mil) column (A), line 12)	3,247,07	2. 4,250,865.						
	l .	Grants and similar amounts paid (Part IX, column (A), lines 1-3)								
		Benefits paid to or for members (Part IX, column (A), line 4)								
es	15 3	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	333,25	9. 396,983.						
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)								
άx	b i	otal fundraising expenses (Part IX, column (D), line 25)   67,715.								
ш	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,812,77							
	18	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,146,03	5. 3,975,424.						
		Revenue less expenses Subtract line 18 from line 12	101,03	7. 275,441.						
ces			Beginning of Year	End of Year						
Net Assets or Fund Balances	20	otal assets (Part X, line 16)	837,28							
ABS	21	otal liabilities (Part X, line 26)	43,34							
훒	22 1	Net assets or fund balances Subtract line 21 from line 20	793,93	1						
Pa	art II	Signature Block		<del> </del>						
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements,	and to the best of my kno	wledge 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	/	/						
Sigi	n l	* Kolonna lice	1/0/2	16/2010						
Her		Signature of officer	Date							
	<b>`</b>	ROXANNE RICE, EXECUTIVE DIRECTOR								
		Type or print name and title								
_		Loan Ich		reparer's identifying number						
Paid	<b>i</b>	rieparers A (1) C III	f (s	ee instructions)						
Prep	parer's		iployed >	1 0746740						
Use	Only	yours if Day SOMALLE DILE	EIN ► 4	1-0746749 J						
	1	self-employed), address, and 2000 SOUTH QUINCY ST., SUITE 150		702 000 5100						
_		ARLINGTON, VA 22206	Phone no.	<u>→ 703-998-5100</u>						
May	the IF	S discuss this return with the preparer shown above? (see instructions)	<del></del> -	X Yes No						
8320	01 12-18	LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate ins	tructions.	Form <b>990</b> (2008)						

	irt III Statement of Program Service Accomplishments (see instructions)	.5 / Page Z
1	Briefly describe the organization's mission:	ONG
	FOOD FOR OTHERS PROVIDES RELIEF TO POOR AND UNDERPRIVILEGED PERSONNELLED PROVIDED PR	
	AND FAMILIES LOCATED PRINCIPALLY IN NORTHERN VIRGINIA. FOOD FOR	
	OTHERS ALSO PROVIDES RELIEF TO CHURCHES AND OTHER ORGANIZATIONS	THAT
	OPERATE EXCLUSIVELY FOR SUCH CHARITABLE PURPOSES.	
2	Did the organization undertake any significant program services during the year which were not listed on	- <del>-</del>
	the prior Form 990 or 990-EZ?	Yes X 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?	Yes X No
	If "Yes", describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 3,805,675. including grants of \$ ) (Revenue \$	)
	DISTRIBUTED NEARLY 2.14 MILLION POUNDS OF FOOD TO 330,250 INDIVI	DUALS
	FACING HUNGER, PRIMARILY IN FAIRFAX AND ARLINGTON COUNTIES, AS W	VELL AS
	OTHER COMMUNITIES IN NORTHERN VIRGINIA.	
		-
 4b	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$	
40	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$	,
4c	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$	)
		<del> </del>
		<del></del>
4d		
	(Expenses \$ including grants of \$ ) (Revenue \$ )	<del></del> -
4e	Total program service expenses ▶ \$ 3,805,675, (Must equal Part IX, Line 25, column (B))	

Form 990 (2008) FOOD FOR OTHERS, INC.

Part IV Checklist of Required Schedules

	·		Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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		<u>X</u> _
9	Did the organization report an amount in Part X, line 21, 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		<u>X</u>
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	Х	<u> </u>
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	<del> </del>
13	Is the organization a school as 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 U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			17
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	45		
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	40		
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 19		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	20		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H  Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and III	22		X
22	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
23	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	<u></u>		1
<b>4</b> 4d	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K			
	If "No", go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
_	pnor year? If "Yes," complete Schedule L, Part I	25b	1.	Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
-	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	<u> </u>	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	<u> </u>	X
		Form	990	(2008)

Form 990 (2008) FOOD FOR OTHERS, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
ь	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		Х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	_30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	:		
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701·2 and 301.7701·3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	ļ		1
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Form **990** (2008)

	990 (2008) FOOD FOR OTHERS, INC. 54-1777	<u> 157</u>	P	age 5				
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_				
	1 1		Yes	No				
1a	Enter the number reported in Box 3 of Form 1096, Arnual Summary and Transmittal of							
	U.S. Information Returns Enter 0- if not applicable							
	Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		ļ					
	(gambling) winnings to prize winners?	1c		<u> </u>				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			İ				
	filed for the calendar year ending with or within the year covered by this return 2a 11							
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_	X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a_	X	<u> </u>				
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	<u> </u>				
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: ▶	i		1				
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and							
	Financial Accounts							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?							
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited							
	Tax Shelter Transaction?	5c						
6a	Did the organization solicit any contributions that were not tax deductible?	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	ļ					
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		X				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		L				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		1	ļ				
	to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	ŀ	1	1				
	benefit contract?	7e	1	X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X				
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	<u> </u>				
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	<u> </u>	<b>├</b> ─				
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)		1					
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have	İ						
	excess business holdings at any time during the year?	8	<u> </u>					
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.							
а	· ·	9a	ļ	<u> </u>				
b	·	9b	-					
10	Section 501(c)(7) organizations. Enter N/A							
а	· ·	1						
b		-						
11	Section 501(c)(12) organizations. Enter: N/A							
а	Gross income from members or shareholders	]	1					

**b** Gross income from other sources (Do not net amounts due or paid to other sources against

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

amounts due or received from them)

12<u>a</u>

11b

Form 990 (2008) FOR OTHERS, INC. 54-1777157 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

			Yes	No			
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances.						
	processes, or changes in Schedule O. See instructions.						
1a	Enter the number of voting members of the governing body						
b	Enter the number of voting members that are independent  1b 11						
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	_		- 22			
•	of officers, directors or trustees, or key employees to a management company or other person?	3		Х			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X			
		6		X			
	<ul> <li>Does the organization have members or stockholders?</li> <li>Does the organization have members, stockholders, or other persons who may elect one or more members of the</li> </ul>						
/a	governing body?						
		7a		X			
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year						
	by the following	_					
	The governing body?	8a_	X				
	Each committee with authority to act on behalf of the governing body?	8b	X				
	Does the organization have local chapters, branches, or affiliates?	9a		X			
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,						
	and branches to ensure their operations are consistent with those of the organization?	9b					
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must						
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X				
11	Is there any officer, director or 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 in Schedule O	11		<u> X</u>			
ec	tion B. Policies						
			Yes	No			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give use						
	to conflicts?	12b	X				
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	ın Schedule O how this is done	12c	X				
13	Does the organization have a written whistleblower policy?	13	X				
14	Does 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	į					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	İ					
а	The organization's CEO, Executive Director, or top management official?	15a	X_				
b	Other officers or key employees of the organization?	15b		_X			
	Describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		İ				
	taxable entity during the year?	16a		X			
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's						
	exempt status with respect to such arrangements?	16b					
Sec	tion C. Disclosure	•					
17	List the states with which a copy of this Form 990 is required to be filed ▶VA						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for					
	public inspection. Indicate how you make these available. Check all that apply						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ncial				
	statements available to the public						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion:	•				
	ROXANNE RICE - 703-207-9173						

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees, highest compensated employees; and former such persons.

Check this box if the organization did n		y of	ficer			or, tr	uste	Ţ <del></del>		<u> </u>
(A) Name and Title	(B)		(C) Position					(D)	(E)	(F)
Name and Title	Average hours	l (c				i tapp	iv)	Reportable compensation	Reportable compensation	Estimated amount of
	per	H	1	T T	1	T	·,,	from	from related	other
	week	direct			1			the	organizations	compensation
	ĺ	10 99	Stee		ļ	nsafe		organization	(W-2/1099-MISC)	from the
		Itrus	a tr		oyee	ag .		(W-2/1099-MISC)		organization and related
		Individual trustee or director	Institutional trustee	Officer	emb	Highest compensated employee	mer			organizations
		ш	=	통	\$	¥.8	Ē			
DONALD WALLACE										
CHAIR	8.00	X	_	X	<u> </u>		<u> </u>	0.	0.	0.
STEVEN COLE									_	_
VICE CHAIR	1.00	X		X	ļ	<u> </u>		0.	0.	0.
CARMINE C. CARULLO										_
TREASURER	4.00	X	<u> </u>	X	ļ	—		0.	0.	0.
PHYLLIS KOHLMANN				l	İ					_
SECRETARY	4.00	X	<u> </u>	X	ļ	├	ļ	0.	0.	0.
JOHN BALDUS		l								_
DIRECTOR	2.00	X	<u> </u>	ļ	<del> </del>		ļ	0.	0.	0.
JAMES BOGART				l	1				_	
DIRECTOR	1.00	X	<u> </u>	<u> </u>	ļ	┼	<u> </u>	0.	0.	0.
MARY BULLOCK		l		İ						
DIRECTOR	4.00	X		<u> </u>	1	1-	-	0.	0.	0.
WILLIAM SCHNEIDER	1 00			ļ	İ		1		•	_
DIRECTOR	1.00	X	-	-	-	-		0.	0.	0.
ANNE SUTER ZIMMER	4 00	٦,							_	
DIRECTOR	4.00	X	├		╀╌	┼		0.	0.	0.
ANNIE TURNER	2 00	v			1		ŀ			
DIRECTOR CAROLANN WILSON	2.00	_	-	├─	╁	+	<del> </del>	0.	0.	0.
DIRECTOR	1.00	<u>.</u>					ļ	0.	0.	١ ,
ROXANNE RICE	1.00	^		<del>                                     </del>	$\vdash$	+	┢	0.	<u> </u>	0.
EXECUTIVE DIRECTOR	40.00			x			1	68,548.	0.	5,378.
EXECUTIVE DIRECTOR	40.00	-	$\vdash$	^	╁			00,340.		3,370.
		]			1		1			
		1	+	1	╁	1	<u> </u>	<del></del>		
			Ì	1			ŀ			
		H	$\vdash$	<u> </u>	1	+-	$\vdash$	<del> </del>		
		H	1	$\vdash$	+	$\vdash$	$\vdash$		<del></del>	<del></del>
		$\vdash$	1	+-	$\vdash$	+	$\vdash$			
			1							
					Ь.			<del></del>	<u> </u>	L

Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation

from the organization

	990 (2		FOR OTHER	RS, INC.			<u>54-1777</u>	157 Page 9
Par	t VIII	'  Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grant similar amounts not included above	1b	07,833. 51,551. 3,927,027.				313, 01 314
and		Noncash contributions included in lines  Total. Add lines 1a-1f	1a-1f \$	3,463,584.	4196411.			
Program Service Revenue	2 a b c			Business Code	4170411.			
Pag	d	<del></del>						<del></del>
P.	f	All other program service revei	nue				-	
		Total. Add lines 2a-2f		<b>•</b>				
	3 4 5	Investment income (including other similar amounts) Income from investment of tax Royalties		▶	9,183.			9,183.
	b	Gross Rents . Less rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less cost or other basis	(i) Securities	(ii) Other				
	С	and sales expenses Gain or (loss) Net gain or (loss)		. >	•			
Other Revenue		Gross income from fundraising including \$	of 1c) See	71,255.				
₹		Less: direct expenses	b_	30,914.	40 241			40 241
	9 a	Net income or (loss) from fund Gross income from gaming ac Part IV, line 19	· .		40,341.			40,341.
		Less direct expenses	b L					
1		Net income or (loss) from gam Gross sales of inventory, less	- r	<u> </u>				
	b	and allowances  Less: cost of goods sold	a b					
	c	Net income or (loss) from sale		. •				
	44 -	Miscellaneous Revenu		Business Code 541800	4,500.		4,500.	
İ		ADVERTISING INCOTHER INCOME	OME	900099	4,500.	<del> </del>	4,500.	430.
	C			200033				410°
		All other revenue						
	е	Total. Add lines 11a-11d		<b></b>	4,930.			
	12	Total Revenue. Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c, 9c, 10c	; and 11e	4250865.	0.	4,500.	49,954.
83200 02-02	-09 9							Form <b>990</b> (2008)

# Form 990 (2008) • FOOD FOR OTHERS, INC. Part IX 'Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must compl		not required to comple	te columns (B), (C), and	
	not include amounts reported on lines 6b, 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 governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the US		:		
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	72 026	24 745	21 420	17 740
_	trustees, and key employees	73,926.	34,745.	21,439.	17,742.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	220 026	1.61 400	42 004	24 442
7	Other salaries and wages	228,926.	161,400.	43,084.	24,442.
8	Pension plan contributions (include section 401(k)	7 5 4 7	4 070	1 (00	1 000
_	and section 403(b) employer contributions)	7,547.	4,879.	1,608.	1,060.
9	Other employee benefits	32,722.	32,594.	128.	7 076
10	Payroll taxes	53,862.	34,187.	11,799.	7,876.
11	Fees for services (non-employees):				
a	Management			-	
b	Legal .	7,700.		7,700.	
C	Accounting	7,700.		7,700.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	959.		050	
g	Other	939.		959.	
12	Advertising and promotion	20,176.	11 506	6 000	2 510
13	Office expenses	10,504.	11,586.	6,080.	2,510.
14	Information technology	10,504.	6,748.	2,315.	1,441.
15	Royalties	20 266	27 240	1 512	1 512
16	Occupancy	30,266. 19,279.	27,240. 18,434.	1,513.	1,513.
17	Travel	19,2/9.	10,434.	288.	557.
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials		-		
19	Conferences, conventions, and meetings				
20	Interest Payments to efficience				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization Insurance	15,498.	9,866.	3,289.	2,343.
23	Other expenses. Itemize expenses not covered	15,450.	9,000.	3,209.	2,343.
24	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below.)	2 457 074	2 457 074		<del></del>
a	FOOD	3,457,974.	3,457,974.		
Ь	FUNDRAISING	7,749.	4 207		7,749.
C	EQUIPMENT REPAIRS	4,261.	4,207.	33.	21.
d	OTHER BAD DEPT	3,681.	1,815.	1,405.	461.
e	BAD DEBT	394.		394.	<del> </del>
f	All other expenses	2 075 404	2 005 655	100.004	68 845
<u>25</u>	Total functional expenses. Add lines 1 through 24f	3,975,424.	3,805,675.	102,034.	67,715.
26	Joint Costs Check here I If following	į			
	SOP 98-2. Complete this line only if the organization	Ì			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Pa		Balance Sheet FOOD FOR OTHERS, INC.		<u> </u>	777157	- 1 6	.gc •
			(A) Beginning of year		(B) End of	year	
	1	Cash - non-interest-bearing		1			
	2	Savings and temporary cash investments	624,762.	2		7,4	
	3	Pledges and grants receivable, net	82,572.	3	11	1,1	<u>. 59</u>
	4	Accounts receivable, net	2,003.	4			
	5	Receivables from current and former officers, directors, trustees, key					
		employees, or other related parties. Complete Part II of Schedule L.		5			
	6	Receivables from other disqualified persons (as defined under section					
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete					
		Part II of Schedule L		_6_			
ets	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use	97,028.	8		8,6	
	9	Prepaid expenses and deferred charges	10,490.	9	1	0,8	<u> </u>
	1	Land, buildings, and equipment: cost basis 10a 112,741.	<u>-</u>				
	b	Less: accumulated depreciation. Complete	00.400		_		
		Part VI of Schedule D 10b 91,041.	20,430.		2	1,7	<u> / 0 0</u>
	11	Investments · publicly traded securities		11			
	12	Investments · other securities. See Part IV, line 11		12			
	13	Investments · program-related. See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	027 205	15	1 00	0 0	112
	16	Total assets. Add lines 1 through 15 (must equal line 34)	837,285.	16	1,09		
	17	Accounts payable and accrued expenses	19,894.	17		0,5	<u> </u>
	18	Grants payable	23,452.	18			
	19	Deferred revenue	23,452.	19			
	20	Tax-exempt bond liabilities  Escrow account liability Complete Part IV of Schedule D		20	········		
Liabilities	21	Payables to current and former officers, directors, trustees, key employees,		21			
ij	22	highest compensated employees, and disqualified persons. Complete Part II					
Lia	1	of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third parties		23			
	24	Unsecured notes and loans payable		24			
	25	Other liabilities Complete Part X of Schedule D		25			
	26	Total liabilities. Add lines 17 through 25	43,346.		3	0,5	533
		Organizations that follow SFAS 117, check here	10,70201				<u>, , , , , , , , , , , , , , , , , , , </u>
S		lines 27 through 29, and lines 33 and 34.					
nce	27	Unrestricted net assets	711,760.	27	95	6,8	344
Net Assets or Fund Balances	28	Temporarily restricted net assets	82,179.	28		2,5	
<u> </u>	29	Permanently restricted net assets		29	·		
Ę	ļ	Organizations that do not follow SFAS 117, check here  and					
٥		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds		30			
ASS	31	Paid-in or capital surplus, or land, building, or equipment fund		31			
et (	32	Retained earnings, endowment, accumulated income, or other funds		32			
Z	33	Total net assets or fund balances	793,939.	33	1,06		
	34	Total liabilities and net assets/fund balances	837,285.	34	1,09	9,9	<u> </u>
Pa	rt XI	Financial Statements and Reporting				Voc	No
1	Acc	ounting method used to prepare the Form 990: Cash X Accrual	Other			- 65	+ 140
י 2a		e the organization's financial statements compiled or reviewed by an independent			2a		<u> </u> x
		e the organization's financial statements audited by an independent accountant?	• • • • • • • • • • • • • • • • • • • •		2b	x	+-,
		'es" to lines 2a or 2b, does the organization have a committee that assumes response		e audit	25	1	+
~	., •	organization navo a committee that accumes respective				l	1

#### SCHEDULE A. (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

**Public Charity Status and Public Support** 

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2008

			<u>OR OTHERS, IN</u>						<u>54</u>	<u>-1777</u>	<u> 157</u>	
Part I	Reason	for Public Char	ity Status (All organiz	ations mus	st complet	e this part	: ) (see inst	ructions)				
he orga	anization is not	a private foundation	because it is: (Please ch	eck only o	ne organiz	ation)						
1	A church, co	nvention of churche	s, or association of churc	ches descr	nbed in se	ction 170	(b)(1)(A)(ı)					
2	٦		70(b)(1)(A)(ii). (Attach Sc									
3	7		ital service organization of		n section	170(b)(1)(	(A)(iii). (Att	ach Sche	dule H.)			
4	¬ '		operated in conjunction						-	e bosoital	's name	<b>.</b>
· L_	city, and stat	-	• • • • • • • • • • • • • • • • • • • •		<b>_</b>		0	(~)( ·)(· ·)(···	.,. <u></u>	o noopha.	0 1141111	<b>-</b> ,
5	¬ ''		benefit of a college or ur	niversity ov	vned or or	erated by	a governr	nental unit	describer	d in		
J	- •	(b)(1)(A)(iv). (Compl	•	motority of		oratoa by	a govern	nonta: ann	. 00001100	<i>-</i>		
6	٦		nent or governmental unit	described	t in contin	n 170/h)/1	HV AVGA					
7 🗓	7	-						r from the	goneral n	ublio doco	nbod in	
<i>/</i> LA		-	ceives a substantial part	oi its supp	on nom a	governme	antai uriit u	i nom me	general po	ubiic desc	nbea i	}
• —	7	(b)(1)(A)(vi). (Comple		(Camplata	Dort II \							
8  -	٠ .	•	section 170(b)(1)(A)(vi).		-		L					
9	=		ceives. (1) more than 33							_		
		•	nctions - subject to certa	-		•			• •	•		
			axable income (less sect	ion 511 ta	x) from bu	sinesses a	acquirea b	y tne orga	nization at	ter June 3	197	5
	<b>-</b>	509(a)(2). (Complete	•									
10	~ ·		perated exclusively to te					-	-			
11	_	•	perated exclusively for the		•		•	•	•	•		or
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that											
	describes the type of supporting organization and complete lines 11e through 11h.  a Type I b Type II c Type III · Functionally integrated d Type III · Other											
	a L Type		,,	• •		-	_			Type III • (		
e L	_ , .	•	at the organization is not		•	•	•					ו
_		_	than one or more publicly		•				9(a)(1) or se	ection 509	3(a)(2)	
f			tten determination from t	the IRS tha	atitisa ly	pe I, Type	II, or Type	9 111				
	5	organization, check t		_		_						
g	_		organization accepted ar			-		•				
			directly controls, either al	one or tog	ether with	persons o	lescribed i	n (ii) and (i	iii) below,	<u></u>	Yes	No
	_	- •	supported organization?							11g(i)		
		•	n described in (i) above?		_					11g(ii)		
			a person described in (i) o					•		11g(iii)	L	
h	Provide the	following information	about the organizations	the organ	ization sup	oports.						
(ı) Nar	ne of supported	(ii) EIN	(iiı) Type of	(iv) Is the o	organization	(v) Did you	notify the	(vi) ls	the	(yii) An	nount of	
	rganization	(	organization (described on lines 1-9		sted in your	organizat	ion in cot.	organizátio (i) organiz	on in col. ed in the		port	
			above or IRC section		document?		r support?	U.S.	.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
			<u> </u>									<del></del>
	<del> </del>		-	-								
											··	
T-4 *												
<u> Total</u>			1	1	ì	<u></u>	L	1	<u> </u>			

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

Schedule A (Form 990 or 990-EZ) 2008 FOOD FOR OTHERS, INC. 54-1777:

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

	(Complete - all of control - all -	d the hey on line F	7 or 0 of D 11	`			•
Sec	(Complete only if you checked tion A. Public Support	a trie pox on line 5	, r, or o or Part ()				<del></del>
	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and	(a) 2004	(6) 2000	(0) 2000	(4) 2007	(0) 2000	(1) (0.0.
'	membership fees received (Do not						
	include any "unusual grants.")	3,428,997	3,413,439.	3,977,820,	3,228,667.	4,196,411,	18,245,334.
2	Tax revenues levied for the organ-	3,420,331.	3,413,433,	3,377,020.	3,220,007.	1,120,111	
2	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
J	furnished by a governmental unit to						
	the organization without charge	130,935.	139,745.	152,300.	171,746.	283,232.	877,958.
4	Total. Add lines 1 · 3	3 559 932	3,553,184,	4 130 120	3,400,413,	4 479 643	19,123,292,
	The portion of total contributions			-,,-			<u> </u>
Ū	by each person (other than a						
	governmental unit or publicly						
	supported organization) included	[					
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)					•	
6	Public Support Subtract line 5 from line 4						19,123,292.
	tion B. Total Support					···	
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	3,559,932,	3,553,184,	4,130,120,	3,400,413.	4,479,643.	19,123,292.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	]					
	and income from similar sources	1,430.	6,399.	15,130.	16,374.	9,183.	48,516.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carned on			3,352.		3,307.	6,659.
10	Other income. Do not include gain						
	or loss from the sale of capital		0 500	2 22	0 001	420	14 450
	assets (Explain in Part IV)		8,703.	3,288.	2,031.	430.	14,452.
	Total support. Add lines 7 through 10		<u> </u>				19 192 919.
	Gross receipts from related activities					12	417,946.
13	First five years. If the Form 990 is for		s tirst, secona, thir	a, tourtn, or tittn to	ax year as a section	n 501(c)(3)	▶□
Se	organization, check this box and sto ction C. Computation of Pub		rcentage				
	Public support percentage for 2008			column (f))	•	14	99.64 %
	Public support percentage from 200			\ <i>''</i>		15	99.74 %
	33 1/3% support test - 2008. If the			n line 13, and line	14 is 33 1/3% or r	nore, check this bo	ox and
	stop here. The organization qualifies						$\triangleright X$
ì	33 1/3% support test - 2007. If the	organization did no	ot check a box on	line 13 or 16a, and	line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qua						▶□
17:	10% -facts-and-circumstances tes	st - 2008. If the org	ganization did not i	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fa						
	meets the "facts-and-circumstances	test The organiza	ation qualifies as a	publicly supporte	d organization		ightharpoons
ŀ	10% -facts-and-circumstances te	st - 2007. If the org	ganization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets						e
	organization meets the "facts-and-cir	rcumstances" test.	. The organization	qualifies as a publ	icly supported org	anization	. ▶□
18	Private foundation. If the organizati	on did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	b, check this box	and see instruction	ns 🕨 🛄

Schedule A (Form 990 or 990-EZ) 2008 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I. Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total, Add lines 1 · 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9. 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b ... 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005(c) 2006(d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 % Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 % 19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

#### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

Employer identification number

Schedule D (Form 990) 2008

		NC.		<u>54-1777157</u>
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fu	ınds or A	ccounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6		
		(a) Donor advised funds	(1	b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)		_	
	Aggregate grants from (during year)			
3				<del></del>
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	<u> </u>	aovised tun	
	are the organization's property, subject to the organization's	=		L Yes L No
6	Did the organization inform all grantees, donors, and donor a	• •	•	· — —
_	for charitable purposes and not for the benefit of the donor			
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 9	990, Part IV,	line 7
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).		
	Preservation of land for public use (e.g., recreation or	oleasure) Preservation of a	an historicall	y important land area
	Protection of natural habitat	Preservation of	certified hist	oric structure
	Preservation of open space			
2	Complete lines 2a-2d if the organization held a qualified con	servation contribution in the form of a	a conservation	on easement on the last day
	of the tax year.			
	·			Held at the End of the Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements		•	2b
c	Number of conservation easements on a certified historic st	ructure included in (a)	•	2c
d	Number of conservation easements included in (c) acquired	<b>,</b> ,	•	2d
3	Number of conservation easements modified, transferred, re		hy the organ	<u></u>
J	year >	neased, extinguished, or terminated i	by the organ	ization during the taxable
4	Number of states where property subject to conservation ea	sement is located		
5	Does the organization have a written policy regarding the pe		oc and	
3		nodic monitoring, inspection, violatic	iis, aiu	Yes No
^	enforcement of the conservation easements it holds?	and enforcing economists diving the i		└── Yes
6	Staff or volunteer hours devoted to monitoring, inspecting, a			
7	Amount of expenses incurred in monitoring, inspecting, and			<u>.</u>
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section	n 170(n)(4)(E	
	and section 170(h)(4)(B)(i)?			. Yes L No
9	In Part XIV, describe how the organization reports conserva			
	include, if applicable, the text of the footnote to the organization	ition's financial statements that desc	ribes the org	ganization's accounting for
	conservation easements	6 A - 1 1 1 - 1 - 1 - 1 - 1 - 1	041	O'ceite Assault
Pa	t III Organizations Maintaining Collections		or Other :	Similar Assets.
	Complete if the organization answered "Yes" to Form	1 990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116, n	ot to report in its revenue statement a	and balance	sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance	of public sei	rvice, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	rtems.		
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and	balance she	et works of art, historical treasures,
	or other similar assets held for public exhibition, education,	or research in furtherance of public s	ervice, provi	de the following amounts relating to
	these items	•		3
	(i) Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$
	(i.) Assets included in Form COO. Bort V	•	•	► \$ ► \$
2	•		ancial coic	
2	If the organization received or held works of art, historical tr		ıaı ıcıaı gairi,	provide
	the following amounts required to be reported under SFAS	ro reating to these πems		<b>.</b>
a	Revenues included in Form 990, Part VIII, line 1		•	<b>\$</b>
b	Assets included in Form 990, Part X	•		<b>&gt;</b> \$

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		COTHERS,							77157	
Par	t III. Organizations Maintaining C	ollections of A	rt, Hist	orical Tre	<u>easures, c</u>	or Oth	er Simila	r Asse	ts (continu	ued)
3	Using the organization's accession and other	records, check any	of the fo	llowing tha	t are a signif	icant us	e of its colle	ection ite	ms (check	all
	that apply):									
а	Public exhibition	d	ı 🔲 L	oan or excl	hange progra	ams				
b	Scholarly research	е								
С	Preservation for future generations			-						· · · · · · · · · · · · · · · · · · ·
4	Provide a description of the organization's co	llections and explai	n how th	ev further th	he organizati	on's exe	emot purpo	se in Par	1 XIV	
5	During the year, did the organization solicit or	·		•	•			JO 1111 Q	. /	
3	to be sold to raise funds rather than to be ma				-	CI SIIIIII	i assets		Yes	□ No
Par	t IV Trust, Escrow and Custodial							000 D		No No
Fai	reported an amount on Form 990, Part		Comple	ete ii organi.	zation answi	ereu re	s to rom	990, Par	t IV, lifte 9,	Of
	<del></del>		d							<del></del>
та	Is the organization an agent, trustee, custodia	an or other intermed	plary for c	nontribution	is or other as	sets no	i incluaea		٦.,	<b>—</b>
	on Form 990, Part X?							L	Yes	∟_ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the fo	ollowing to	able				<u> </u>		
									Amount	
С	Beginning balance						1c			<del></del>
d	Additions during the year						1d			
е	Distributions during the year				•••		1e			
f	Ending balance						1f			
<b>2</b> a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete if	organization answer	ered "Yes	to Form 9	990, Part IV,	ine 10.				
		(a) Current year	(b) Pr	or year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
	Investment earnings or losses					-				
٦	Grants or scholarships		-		<del></del>					
	Other expenditures for facilities		<del></del>							
e	· · · · · · · · · · · · · · · · · · ·									
	and programs	· ·								
	Administrative expenses	<del>-</del>								
g	End of year balance		l		l					
2	Provide the estimated percentage of the year									
а	Board designated or quasi-endowment		%							
þ	Permanent endowment									
С		6								
3a	Are there endowment funds not in the posses	ssion of the organiz	ation tha	t are held a	ind administe	ered for	the organız	ation	_	
	by								Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	listed as required of	on Sched	ule R?					3b	
4	Describe in Part XIV the intended uses of the	organization's ende	owment f	unds						
Par	t VI Investments - Land, Building	s, and Equipm	ent. Se	e Form 990	, Part X, line	10				
•	Description of investment	(a) Cost or o	other	(b) Cost	or other	(c) [	Depreciatio	n	(d) Book	value
	,	basis (investi	L	` '	(other)	(-, -			(2)	
12	Land	<del></del>	•		· · · · · ·					
	Buildings	-								
	Leasehold improvements					_			_	
	•	<del></del>		11	2,741.		91,0	11	21	,700.
	Equipment			1,1	.4.141.		3 I , U	± + •		, 100.
	Other  Add lines 1a-1e (Column (d) should equal Fo	000 C V 1		10(-) ·		L			21	.700.
I Otal	i waa iines tarte 11 Julimn Idl Should edual Fo	un ssu Part X Mil	omn (K) j	ure (UIC))						700.

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 FOOD FOR O	THERS, INC.	54	<u>4-1777157</u> Page <b>3</b>
Part VII Investments - Other Securities. S	ee Form 990, Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of valu	
(including name of security)		Cost or end-of-year ma	irket value
Financial derivatives and other financial products			
Closely-held equity interests			<del></del>
Other			
	" -		
	-		
	<del> </del>	<u></u>	<del></del>
	<del>-</del>		·
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)	<u>-                                    </u>		
Part VIII Investments - Program Related.	See Form 990, Part X, line 13		<del></del>
(a) Description of investment type	(b) Book value	(c) Method of valu	
		Cost or end-of-year ma	irket value
		***	
		- · · · · · · · · · · · · · · · · · · ·	
Tatal (Col /h) should squal Form 000, Port V, col /P) line 12 \			
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, fin	0.15		
	i) Description	-	(b) Book value
	y Description		(B) Book Value
***************************************			
	<del></del>		
			<u> </u>
	(1.1.1.)		
Total. (Column (b) should equal Form 990, Part X, col (B)			•
Part X Other Liabilities. See Form 990, Part X	K, fine 25.		
(a) Description of liability	(b)	Amount	
Federal income taxes			
	<del></del>		
Total. (Column (b) should equal Form 990, Part X, col (B)	line 25.) ▶		
In Part XIV provide the text of the footpote to the organi	zation's financial statements the	reports the erganization's liability	for uncortain tay positions

	dule D (Form 990) 2008 FOOD FOR OTHERS, INC.		54-1	777157 Page	<del>3 4</del>
Par	t XI' Reconciliation of Change in Net Assets from Form 990 to Financial State	ements		<del>-:</del>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		4,250,865	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		3,975,424	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		275,441	<u>l.</u>
4	Net unrealized gains (losses) on investments	4	_		
5	Donated services and use of facilities	5			
6	Investment expenses	6			
7	Prior period adjustments	7			
8	Other (Describe in Part XIV)	8		<del></del>	
9	Total adjustments (net) Add lines 4-8	9			<u>0.</u>
10_	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	2 - 4	275,441	<u>1.</u>
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Rever	iue per i		4 524 004	
1	Total revenue, gains, and other support per audited financial statements		1	4,534,098	<u>s.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				
а	Net unrealized gains on investments , 2a		-		
b	Donated services and use of facilities	3,233	4		
С	Recoveries of prior year grants		4		
d	Other (Describe in Part XIV)		4		_
е	Add lines 2a through 2d	•	2e	283,23	
3	Subtract line 2e from line 1		3	<u>4,250,86</u>	<u>5.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		]		
b	Other (Describe in Part XIV)		4		
С	Add lines 4a and 4b		4c		<u>o.</u>
_5_	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		5	4,250,86	<u>5.</u>
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses pe	r Retur		
1	Total expenses and losses per audited financial statements		1 1	<u>4,258,65</u>	<u>7.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1 1		
а	Donated services and use of facilities 2a 28	<u>3,233</u>	.		
b	Prior year adjustments 2b		1		
С	Losses reported on Form 990, Part IX, line 25		<b>↓</b>		
d	Other (Describe in Part XIV)		]		
е	Add lines 2a through 2d	-	2e	283,23	
3	Subtract line 2e from line 1		3	3,975,42	<u>4.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		_		
b	Other (Describe in Part XIV)		<u> </u>		
С	Add lines 4a and 4b		4c		0.
_5_	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		5	3,975,42	<u>4.</u>
	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	art IV, lines	1b and 2	b, Part V, line 4; Pa	rt —
_					

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Supplemental Information Regarding Fundraising or Gaming Activities** 

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

2008

Open To Public Inspection

Schedule G (Form 990 or 990-EZ) 2008

rame of the organization FOOD FO	OR OTHERS, INC.				54-1777	ntification number
	Complete if the organization answer	ered "Y	es" to	Form 990, Part IV, li		
b If "Yes," list the ten highest paid inc	e Solicitat f Solicitat g Special or oral agreement with any individual Part VII) or entity in connection with p	tion of i tion of o fundra (includ professi uant to	non-govern govern sing of ling of onal f agree	overnment grants nment grants events fficers, directors, trus fundraising services? ements under which	Yes	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundra have cu or cont contribu	stody rol of	(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			
Total  3 List all states in which the organizat	ion is registered or licensed to solicit	funds c	or has	been notified it is ex	empt from registrat	on or licensing
<del> </del>			<del></del>			
						·
		-				
		<del>-</del>				
<del></del>					-	<del></del>

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Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, Ine 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other Events (d) Total Events NONE (Add col (a) through 2009 GOLF 2008 GOLF col (c)) (total number) (event type) (event type) Revenue 40,400. 30,855 71,255. Gross receipts 2 Less: Charitable contributions 40,400. 30,855 71,255. Gross revenue (line 1 minus line 2) Cash prizes 40 321 361. Non-cash prizes Direct Expenses Rent/facility costs 15,487 15,066 30,553. Other direct expenses Direct expense summary Add lines 4 through 7 in column (d) 30,914) 40,341. 9 Net income summary Combine lines 3 and 8 in column (d) Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, Ine 6a. (d) Total gaming (Add (b) Pull tabs/Instant Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Non-cash prizes Rent/facility costs Other direct expenses % Yes Yes Yes % Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary Combine lines 1 and 7 in column (d) Yes No Enter the state(s) in which the organization operates gaming activities a Is the organization licensed to operate gaming activities in each of these states? b If "No," Explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," Explain: Does the organization operate gaming activities with nonmembers? 11 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?

Schedule G (Form 990 or 990-EZ) 2008 FOOD FOR OTHERS, INC. 54-177	715	7 Pa	age <b>3</b>
13 Indicate the percentage of gaming activity operated in a The organization's facility b An outside facility  13b  6  17b  19b  19b  19b  19b  19b  19b  19b		Yes	No
Address   15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	<b>1</b> 5a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization properties and the organization properties and the organization properties and the organization properties are also and the organization properties are also and the organization properties are also and the organization properties are also and the organization properties are also and the organization properties are also are also are also are also are also are also are also are also are			
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?	17a		
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$			

Schedule G (Form 990 or 990-EZ) 2008

#### SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

#### **NonCash Contributions**

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

Inspection

Name of the organization

FOOD FOR OTHERS, INC. Employer identification number

54-1777157 Part I Types of Property (b) (c) (d) (a) Check if Number of Revenues reported on Method of determining Form 990, Part VIII, line 1g applicable contributions revenues Art - Works of art 2 Art · Historical treasures 3 Art - Fractional interests Books and publications 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes Intellectual property 8 4,200.FAIR VALUE X Securities - Publicly traded 9 Securities - Closely held stock 10 Securities · Partnership, LLC, or 11 trust interests Securities · Miscellaneous 12 Qualified conservation contribution 13 (historic structures) Qualified conservation contribution (other) 14 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate Other Collectibles 18 999,999 3,462,485. AVE WHOLESALE COST Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 X 1,100.FAIR VALUE ( COMPUTERS Other > 25 Other > 26 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgment 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for X the entire holding period? 30a b If "Yes," describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

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If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) 2008

32a

X

33

contributions?

b If "Yes," describe in Part II

Schedule M	(Form	<u>990) 20</u>	008 <u> </u>	<u>''OOI</u>	<u>) FO</u>	R O'	PHER	<u>S, I</u>	NC.						<u>54-17</u>	<u>7715</u>	<u> 7                                     </u>	Page 2
Part II	Supp Also d	omple	ental I	nfori art for	mation	n. Cor	nplete i	this part	to provi	de the i	nformatio	on requir	ed by Pa	t I, line:	30b, 32	b, and 3	33	
SCHEDU	LE 1	И, <u>F</u>	ART	I,	COL	UMN	(B)	: FO	OD C	ONTI	RIBUT	IONS	ARE	MEA	SURED	BY	THE	
NUMBER	OF	POU	NDS	COI	MTRI	BUT	ED.	THE	ORG	ANIZ	ZATIO	N RE	CEIVE	D 2	,191,	446		
POUNDS	OF	DON	IATEI	FO	<u> </u>	FOR	THE	YEA	R EN	DED	JUNE	30,	2009	), A'	r an	AVER	RAGE	
WHOLES	ALE	COS	T OF	? \$:	L.58	PE	R PC	UND.										
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		···-																
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832142 12-18-08

Schedule M (Form 990) 2008

#### **SCHEDULE Q** (Form 990)

Department of the Treasury Internal Revenue Service

832211 12-18-08

## **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Name	of	the	orgai	nization
1141110	v		O QQ	114atiOi I

**Employer identification number** 

Schedule O (Form 990) 2008

FOOD FOR OTHERS, INC.	54-1///15/
FORM 990, PART VI, SECTION A, LINE 10: THE 990 WAS REVIEWED	BY MANAGEMENT,
BY THE AUDIT COMMITTEE, THEN BY THE FULL BOARD OF DIRECTORS	PRIOR TO
FILING.	
FORM 990, PART VI, SECTION B, LINE 12C: EACH BOARD MEMBER M	UST SIGN THE
CONFLICT OF INTERET POLICY EACH YEAR. IF POTENTIAL CONFLIC	TS ARISE, THE
ENTIRE BOARD REVIEWS THE SITUATION AND DETERMINES WHETHER A	CONFLICT
EXISTS. IF SO, THE MEMBER WITH THE CONFLICT IS BARRED FROM	VOTING ON
MATTERS PERTAINING TO THE SUBJECT OF THE CONFLICT.	
FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE DIRECT	OR'S
COMPENSATION WAS DETERMINED BY THE EXECUTIVE COMMITTEE, THE	N RECOMMENDED TO
THE FULL BOARD OF DIRECTORS FOR APPROVAL. THE EXECUTIVE CO	
SEVERAL SOURCES FOR COMPARABLE COMPENSATION OF EXECUTIVE DI	
RELIED HEAVILY ON THE NONPROFIT TIMES 2009 NONPROFIT ORGANI	
COMPENSATIONS & BENEFITS SURVEY, AS WELL AS A SURVEY OF LOC	
NONPROFITS THROUGH THEIR 990'S ON GUIDESTAR. THE PROCESS L	
REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY D	
CONTEMPORANEOUS SUBSTANTIATION IN 2008.	
DODY 000 DADE UT GROWTON G LINE 10 MUD BODY 000 TO AVAI	I ADI D ON MUD
FORM 990, PART VI, SECTION C, LINE 18: THE FORM 990 IS AVAI	
ORGANIZATION'S WEBSITE AND ANOTHER ORGANIZATION'S WEBSITE F	
INSPECTION. HOWEVER, THE FORM 1023 IS AVAILABLE UPON REQUES	Т.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S C	ONFLICT OF
LOW SO, THE VI, DECITOR C, BIRE IS. THE ORGANIZATION S.C.	OHI DICI OF

INTEREST POLICY, GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE

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### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization FOOD FOR OTHERS, INC.	Employer identification number 54-1777157
UPON REQUEST.	
FORM 990, PART XI, LINE 2C	
RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR	
FORM 990, PART VI, SECTION A, LINE 1	
EXECUTIVE COMMITTEE	
THE ORGANIZATION HAS AN EXECUTIVE COMMITTEE COMPRISED OF	THE FOUR
OFFICERS ON THE BOARD OF DIRECTORS. BETWEEN MEETINGS OF	THE BOARD OF
DIRECTORS, ON-GOING OVERSIGHT OF THE AFFAIRS OF THE ORGAL	NIZATION MAY BE
CONDUCTED BY THE EXECUTIVE COMMITTEE.	
	<u>-</u>

1

FOOTNOTES

STATEMENT

THE RETURN IS BEING AMENDED TO SHOW THE ADVERTISING INCOME WHICH WAS NOT REFLECTED IN THE ORIGINAL RETURN.