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Department of the Treasury

Internal Revenue Service

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)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

	<u> </u>	or the	2008 calendar year, or tax year beginning $JUL 1$, 2008 and ending	JUN 30, 2009					
١	B C	heck if	Please C Name of organization	D Employer identific	cation number				
	\Box	Addres change	s label or A TT A NTA COMMINITALY FOOD DANK						
		Name change	type	58-1	376648				
		Initial return Termin	See Number and street (or P 0 box if mail is not delivered to street address) Room/su						
	<u> </u>	ation Amend	Instruct 132 JOSEPH E LOWERY BLVD INW		992-9822				
	\vdash	return Application	City or town, state or country, and ZIP + 4	G Gross receipts \$	53,134,264.				
	_	Jtión pendin	F Name and address of principal officer:WILLIAM BOLLING	H(a) Is this a group re for affiliates?	Yes X No				
			SAME AS C ABOVE	H(b) Are all affiliates inc					
	I T	ax∙ex∈	empt status X 501(c) (3		list. (see instructions)				
			e: ► WWW.ACFB.ORG	n number					
,				ear of formation 1979 N	State of legal domicile GA				
ļ	Pa		Summary						
	9		Briefly describe the organization's mission or most significant activities: TO FIGHT	HUNGER BY EN	GAGING,				
	& Governance	-	EDUCATING, AND EMPOWERING OUR COMMUNITY. Check this box						
	ver		Check this box (If the organization discontinued its operations or disposed of models and the first the continued its operations or disposed of models (Part VI, line 1a)	ore than 25% or its assets	s. 17				
	ဖွ		Number of independent voting members of the governing body (Part VI, line 1b)	4	16				
_	امت		Total number of employees (Part V, line 2a)	5	105				
030	Activities		Total number of volunteers (estimate if necessary)	6	17846				
9 2010	Ę		Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.				
€		b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.				
	- 1			Prior Year	Current Year				
APR	a		Contributions and grants (Part VIII, Inc Ch)	43,034,243.	48,866,117.				
	Š		Program service revenue Part III ne 29)	120 460	502 716				
L. 1	<u>۾</u>		Investment income (Part VIII column (A), lines 3.4 and 7d)	138,460. -47,238.	-592,716. $-130,952.$				
Z		12	Other revenue (Part VIII, column (A), lifter 5, 6d, 86, 9c, 10c, and 11e) Total revenue - add thes 8,though 11 (must equal Part VIII, column (A), line 12)	43,125,465.	48,142,449.				
SCANNET	$\neg \uparrow$		Grants and similar adjoints paid (Part X, column (A), lines 1-3)	45/125/405	10/112/110.				
K			Benefits paid to or for members (Pairt X solumn (A), line 4)						
S	ရွ		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,445,357.	5,544,048.				
-	Sus	16a	Professional fundraising fees (Part IX, column (A), line 11e)	10,000.	13,600.				
	Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) 1,189,635.						
		17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	38,686,133.	40,794,851.				
			Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	43,141,490.	46,352,499.				
	-8	19	Revenue less expenses Subtract line 18 from line 12	-16,025.	1,789,950.				
	Net Assets or Fund Balances	20	Tatal assets (Oat V line 4C)	Beginning of Year 19,478,454.	End of Year 21, 202, 416.				
	Ass		Total assets (Part X, line 16) Total liabilities (Part X, line 26)	1,558,917.	1,217,182.				
	Net Lind		Net assets or fund balances. Subtract line 21 from line 20	17,919,537.	19,985,234.				
		rt II	Signature Block	2.702070					
	•		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowled	ge and belief, it is true, correct,				
			The Control of the Co	suge					
	Sigr		Harry & Rippin	4-1-20	010				
	Her	е	Signature of officer	Date					
			NANCY FLIPPIN, CHIEF FINANCIAL OFFICER Type or print name and title						
		_	Propagario N	Check If Prepare	er's identifying number				
	Paid			self- temployed > X	structions)				
		arer's	Firm's name (or SUSAN KENNEY CDA	EIN >					
	use	Only	self-employed), \$1085 THORNBURY WAY	-11.					
			ALPHARETTA, GEORGIA 30005-8788	Phone no 🕨 (770)751-6805				
	May	the II	RS discuss this return with the preparer shown above? (see instructions)		X Yes No				

FOR THE PAST SIX YEARS, PUBLIX SUPER MARKETS, INC. HAS CONTRACTED WITH ACFB TO PROCESS THEIR UNSALEABLE RECLAMATION ITEMS. AT THE END OF THE FISCAL YEAR, PUBLIX INITIATED PLANS TO DISCONTINUE THE PROGRAM DUE TO THEIR INTERNAL REORGANIZATION. ACFB'S RECLAMATION CENTER RECEIVED, SCANNED AND PROCESSED UNSALEABLE GROCERY PRODUCTS FROM PUBLIX RETAIL OUTLETS PRIMARILY IN THE GEORGIA MARKET AREA. AFTER INDIVIDUAL ITEMS WERE SORTED INTO VARIOUS CATEGORIES - AT THE VENDOR'S DISCRETION, SOME PRODUCT WAS TO BE DUMPED, SOME WAS EARMARKED FOR SALE TO SECONDARY MARKETS, AND SOME WAS RETURNED TO THE MANUFACTURER - AN AVERAGE OF

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

(Expenses \$ 1,278,856 • including grants of \$

) (Revenue \$

43,141,859. (Must equal Part IX, Line 25, column (B).) Total program service expenses ►\$

Form 990 (2008) ATLANTA COMMUNITY FOOD BANK

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?	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_		<u>X</u>
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; 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, VII, VIII, IX, or X as applicable	11	<u>X</u>	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was	_	17	
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	v
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		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			Х
45	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b_		
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 located outside the United States? If "Yes," complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		
	located outside the United States? If "Yes," complete Schedule F, Part III	16		х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	X	
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	X	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	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
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	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_		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	the darking at any time darking at any time darking at a	24d_		
25a	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
þ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		X
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		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> X</u>
		Form	മമവ ദ	2008)

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
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
c	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		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	_29	_X	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	ĺ		
	contributions? If "Yes," complete Schedule M	30		<u>X</u> _
31	Did the organization liquidate, terminate, or dissolve and cease operations?]
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			[
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u>X</u>	
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?	-		i
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X

Form 990 (2008) ATLANTA COMMUNITY FOOD BANK

Part V Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of US Information Returns. Enter 0- find applicable Enter the number of Form 8VG included in line 1a. Enter 0- find applicable 1b 0 0 Dit the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of form 8VG included in line 1a. Enter 0- find applicable 1b 0 0 Dit the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, itself for the calendar year ending with or within the year covered by this return. 2a 105 If at least one is reported on line 2b, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 2a X If yes, the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 2a X If yes, the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 2a X If yes, the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 2a X If yes, the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 2a X If yes, the sum of lines 1a and 2a is greater than 250, you may be required federal employment tax returns? Note: If the comparization contributions in message is a party to expendition on Schedule 0 3a X If yes, the did the name of the foregro country. (see instructions) 2a X If Yes, and cultimation and the comparization in the sum of the compariza	r (24	t V Statements negariting Other Ind Fillings and Tax Compliance			
US information Returns. Enter 0-f inct applicable Enter the number of Forms W20 included in the 1a. Enter 0-f inct applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to pinze winners? Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements. Iffed for the calendar year ending with or within the year covered by this return Iffed for the calendar year ending with or within the year covered by this return Iffed for the calendar year ending with or within the year covered by this return Iffed for the calendar year and 2a is greater than 250, you may be required to e-file than the time. If I was in the sum of lines 1a and 2a is greater than 250, you may be required to e-file than return. (see instructions) If I was in the sum of lines 1a and 2a is greater than 250, you may be required to e-file than the return. If I was in the sum of the same of the foreign country (such as a bank account, or other financial account) If I was in the calendar year, did the organization have an interest in, or a significant or other nutrion to were a financial accountry in a foreign country (such as a bank account, securities account, or other financial accountry) If I was in the sum of the foreign country (such as a bank account, securities account, or other financial accountry) If I was in the sum of the foreign country (such as a bank account, securities account, or other financial accountry) If I was in the sum of the foreign country (such as a bank account, securities account, or other financial accountry) If I was in the particular of the organization that it was or is a party to a prohibited tax shelter transaction? If was it you guestion 5 acro 5 bit of the organization that it was or is a party to a prohibited tax shelter transaction? If was it you guestion 5 acro 5 bit dish organization include with every solicitation an express statement that such contributions or gifts were not tax deduc				Yes	No
b Enter the number of Forms W2G included in lane 1a. Exter 0-1 finot applicable	та				
C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gaminling) winnings to prize winners? Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return In 10 5 If at least one is reported on line 23, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3b Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a X 3b If Yes, has it filed a Form 990-T for this year? If YNo, "provide an explanation in Schedule 0 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. 5b If Yes, and the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account. 5c See the instructions for exceptions and filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. 5c Was the organization a party to a prohibited tax shelter transaction? 5c If Yes, 1 or question 5a or 5b, did the organization file form 8885-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c If Yes, 1 or question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6c Did the organization solicit any contributions that were not tax deductible? 6c Did the organization provide goods or services in exchange for any quip for quo contributions or grifts were not tax deductible					
(gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, tiled for the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization fills all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? bit If Yes, 1 as it fled a Form 990-Ff for this year? If 7 tho." provide an explanation in Schedule O the 1 Yes, 1 and 1 the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. Evolution as a bank account, securities account, or other financial accountly over, a financial account in a foreign country. Evolution in the same of the foreign and interest the same of the foreign and interest that such contributions or distributions 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? 5b Us any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Yes, 1 ouestion 5 acr 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c If Yes, 1 ouestion 5 acr 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6c Did the organization shell may receive deductible contributions under section 170(c). 7b If Yes, 1 ouestion 5 acr 5b, did		The transfer of the second sec			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return If all east one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3b Did the organization have unrelated business gross income of \$1,000 or more dumy the year covered by this return? 3c If Yes, 'Instruction for exceptions and filing required to e-file this return. (see instructions) 3c If Yes, 'Instructions for exceptions and filing required to e-file this return. (see instructions) 3c If Yes, 'Instructions for exceptions and filing requirements for Form TD F 90 22.1, Report of Foreign Bank and Financial Accounts. 3c If Yes, 'Instructions for exceptions and filing requirements for Form TD F 90 22.1, Report of Foreign Bank and Financial Accounts. 3c If Yes, 'Industriation's for exceptions and filing requirements for Form TD F 90 22.1, Report of Foreign Bank and Financial Accounts. 3d If Yes, 'Industriation's for exceptions and filing requirements for Form TD F 90 22.1, Report of Foreign Bank and Financial Accounts. 3d If Yes, 'Industriation's for exceptions and filing requirements for Form TD F 90 22.1, Report of Foreign Bank and Financial Accounts. 3d If Yes, 'Industriation's for exceptions and filing requirements for Form TD F 90 22.1, Report of Foreign Bank and Financial Accounts. 3d If Yes, 'Industriation's foreign Country is the organization in that it was or is a party to a prohibited tax shelter transaction? 4d If Yes, 'Industriation's foreign End is the organization in that it was or is a party to a prohibited tax shelter transaction? 4d If Yes, 'Industriation's foreign End is the organization in that it was required to the Form 8282? 4d If Yes, 'Industriation and the vertical and the ver	Ç		4.0	x	
filed for the calendary year ending with or within the year covered by this return 1	2-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-10		
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Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3b Difference of the start of the control of the year of the control of the year, and the organization have an interest in. or a signature or other authority over, a financial account in a foreign country (see the organization have an interest in. or a signature or other authority over, a financial account in a foreign country (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 Was the organization or to 5b, did the organization file Form 8885-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5b If Yes, to question 5a or 5b, did the organization file Form 8885-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c Did the organization solicit any contributions that were not tax deductible? 5c Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7c X 7d If Yes, "Indicate the number of Forms 8282 filed during the year 6b If Yes," indicate the number of Forms 8282 filed during the year 7c If If Wes, "Indicate the number of Forms 8282 filed during the year 8c Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X 7d X 7f X 7d X 7d X 7e X 7d If the organization of qualified intellectual property, did the organization file Form 8282 arequired? 7d Contributions of cars, boats, arplaines, and other vehicles, did the organization file Form 198-C as required	h		26	x	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O ab	Ü	•			
the fit "yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4 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 (sew) has a bank account, securities account, or other financial account)? 5 bif "Yes," enter the name of the foreign country. ► 5 See the instructions for exceptions and filing requirements for Form TD F 90-22.1. Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization file Form 8865-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5 bif "Yes," to question 5 a or 5 b. did the organization file Form 8865-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5 ciff "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 ciff "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 ciff "Yes," did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7 ciff "Yes," did the organization notify the donor of the value of the goods or services provided? 7 biff "Yes," indicate the number of Forms 8282 filed during the year 6 bid the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 ciff yes, and include the number of Forms 8282 filed during the year 8 bid to granization. Juring the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 ciff yes, and the organization of qualified intellectual property, did the organization file Form 8899 as required? 7 ciff yes, and the organizations. Did the supporting organizations maintaining donor adv	За		3a		X
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b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: N/A a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	10	Section 501(c)(7) organizations. Enter: N/A	-		
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	а	Initiation fees and capital contributions included on Part VIII, line 12		1	[
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	40	· · · · · · · · · · · · · · · · · · ·			-
			12a		-
	Þ	IT is, enter the amount of tax-exempt interest received or accrued during the year N/A 12b	F	000	(0000)

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the

	inenia nevelue code.)			
<u>Sec</u>	tion A. Governing Body and Management		-	
	E. A. M. C. B. C.		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,			
4	processes, or changes in Schedule O. See instructions	,		
	Enter the number of voting members of the governing body Enter the number of voting members that are independent 10 11 12 13 14 15 16 16 17 18 18 18 18 18 18 18 18 18	<u> </u>		
		2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			v
_	officer, director, trustee, or key employee?	2_		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			v
	of officers, directors or trustees, or key employees to a management company or other person?	3_	-	X
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	Does the organization have members or stockholders?	_6_	-	Δ_
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	7-		X
_	governing body? Asserted by the coverning body subject to approve by manhous startification or other parameter.	7a_	 	X
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
-	The governing body?	8a	Х	•
b	Each committee with authority to act on behalf of the governing body?	8b	X	\vdash
9a		9a	- 25	Х
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	94_	 	
-	and branches to ensure their operations are consistent with those of the organization?	9ь		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	30		
	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	10		
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	111		X
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а	The organization's CEO, Executive Director, or top management official?	15a	X	1
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			
	taxable entity during the year?	16a		<u>X</u>
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		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶GA			
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	e for		
	public inspection. Indicate how you make these available. Check all that apply.			
	X 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,	and fina	ancıal	
	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 of the person who possesses the books and records of the organization.	ation.	-	
	NANCY FLIPPIN - (404) 892-9822			
82200	732 JOSEPH E LOWERY BLVD NW, ATLANTA, GA 30318			
83200 12-18	08	Form	990	(2008)

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 not c	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	ļ			o, Ition	1		Reportable	Reportable	Estimated
Trains and Trais	hours	(c	heck				ly)	compensation	compensation	amount of
	per week	Individual trustee or director	T	Officer		Highest compensated emolowee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
WILLIAM BOLLING										
EX. DIRECTOR	60.00	X		Х	<u> </u>	X		150,700.	0.	0.
BOB FREEMAN										
DIRECTOR	0.10	X						0.	_0.	0.
RICHARD LEBER					1					
CHAIRMAN OF THE BOARD	1.30	X						0.	0.	0.
ROSE PERRY			1		1					
DIRECTOR	0.20	Х						0.	0.	0.
PHILIP NEIL TAGUE										
TREASURER	0.40	X						0.	0.	0.
CHIP PRESTEN			İ							
DIRECTOR	0.10	X				L		0.	0.	0.
PRECIOUS ANDERSON-SCOTT										
DIRECTOR	0.10	X	<u> </u>		L	_	L	0.	0.	0.
DAVID EIDSON					İ					
DIRECTOR	0.30	X		<u> </u>	<u> </u>	$oxed{oxed}$	<u> </u>	0.	0.	0.
MIKE KANE								_	_	_
DIRECTOR	0.30	X	ļ.,		_	<u> </u>	<u> </u>	0.	0.	0.
JOSEPH SISTO		l								
DIRECTOR	0.30	X	ļ	<u> </u>		ļ		0.	0.	0.
HILARY WILSON		١							•	
SECRETARY	0.30	X	<u> </u>		-		 	0.	0.	0.
DON HEROMAN	0.50									
VICE CHAIR	0.50	X	⊢	<u> </u>	↓ _	-	ļ	0.	0.	0.
JERE BRADY	0.00	١,,								
DIRECTOR	0.30	X	┼		-	-	-	0.	0.	0.
ALLEGRA LAWRENCE-HARVEY	0.10	v								_
DIRECTOR DAVID LEEDS	0.10	A	+-	-		-	-	0.	0.	0.
DIRECTOR	0.20	J							^	_
MARJY STAGMEIER	0.30	┝≏	+-	 	+-	+		0.	0.	0.
DIRECTOR	0.20	x							0.	_
ARLENE GLASER	0.20	╀┻	├-	-	+-	+	\vdash	0.	<u> </u>	0.
DIRECTOR	0.40	\ _v		ļ			{	0.	0.	0.
922007 12 19 09	1 0.40	Tν		L_		Ь.,	1		<u> </u>	Form 990 (2008)

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Part VII Section A. Officers, Directors, Tru		nplo	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
· (A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average hours	6	Position (check all that apply)					Reportable compensation	Reportable compensatio			stimate nount	
	per week	Individual trustee or director	institutional trustee		Key employee	Highest compensated		from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	i s	com fr org	other pensarom the anizated related	ation e ion ed
ROBERT JOHNSON			-	 	 	+-	-						
CHIEF OPERATING OFFICER	50.00			X				110,906.		0.			0.
NANCY FLIPPIN													
CFO	50.00	<u> </u>	ļ	X	_		L	88,045.		0.			0.
						ļ							
		-			 		十			-			
				<u> </u>			L						
		_	1	ļ	_	╁┈	├-						
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			ļ		<u> </u>	<u> </u>	L						
			-		-	┼	├	-					_
		ı											
		<u>L</u> .			<u> </u>	Ļ		240 (51			-		
1b Total 2 Total number of individuals (including those						•		349,651.	<u> </u>	0.			0.
2 Total number of individuals (including those compensation from the organization	e in Ta) who re	ceiv	rea i	HOLE	tna	an D	100,	oou in reportable		•			2
					-							Yes	No
3 Did the organization list any former officer,			e, ke	y er	nplo	yee,	or l	highest compensated er	mployee on				
line 1a? If "Yes," complete Schedule J for s					_4			h	4b		3		X
4 For any individual listed on line 1a, is the si and related organizations greater than \$15									the organization		4	х	
5 Did any person listed on line 1a receive or									ices rendered to		Ť		
the organization? If "Yes," complete Sched								<u> </u>			5		X
Section B. Independent Contractors 1 Complete this table for your five highest co					4				* 4.00.000 - f				
Complete this table for your five highest co the organization NONE	mpensated in	aep	enae	ent c	cont	ract	ors '	that received more than	\$100,000 of con	ipens	ation	rom	
(A)					-			(B)				C)	
Name and business	address							Description of s	services		compe	nsatio	n
													_
								_					
-													
2 Total number of independent contractors (in alcohor - Ab		4)								······································		
2 Total number of independent contractors (from the organization ►	including those	e in	I) W	no r	ece	ived	mo	re man \$100,000 in com	ipensation				
				_	_								

Part IX Statement of Functional Expenses

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

If other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

_	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).											
	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	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 U.S.											
	See Part IV, lines 15 and 16											
4	Benefits paid to or for members											
5	Compensation of current officers, directors,	ĺ			_							
	trustees, and key employees	363,405.	126,698.	198,334.	38,373.							
6	Compensation not included above, to disqualified											
	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)											
7	Other salaries and wages	4,264,765.	3,131,412.	741,149.	392,204.							
8	Pension plan contributions (include section 401(k)											
	and section 403(b) employer contributions)	73,017.	15,184.	31,177. 103,430.	26,656. 28,302.							
9	Other employee benefits	73,017. 549,434.	15,184. 417,702.	103,430.	28,302.							
10	Payroll taxes	293,427.	195,561.	67,208.	30,658.							
11	Fees for services (non-employees):											
а	Management											
þ	Legal	5,092.		5,092.								
С	Accounting	63,563.		63,563.								
d	Lobbying											
е	Professional fundraising services See Part IV, line 17	13,600.			13,600.							
f	Investment management fees	18,326.		18,326.								
g	Other	113,082.	97,113.	10,969.	5,000.							
12	Advertising and promotion											
13	Office expenses	807,321.	298,800.	134,812.	373,709.							
14	Information technology	73,271.	5,040.	68,231.								
15	Royalties											
16	Occupancy	572,272.	479,285.	88,482.	4,505. 2,364.							
17	Travel	26,832.	23,741.	727.	2,364.							
18	Payments of travel or entertainment expenses											
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings	48,286.	31,429.	15,434.	1,423.							
20	Interest											
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	652,193.	435,444.	216,749.								
23	Insurance											
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)											
а	FOOD DISTRIBUTED	30,556,644.	30,556,644.									
b	AGENCY EXPENSE	3,265,570.	3,263,570.	2,000.								
c	FOOD COSTS	2,703,734.	2,703,734.									
d	SCHOOL SUPPLIES DISTRIB	711,114.	711,114.									
e	PROJECT EXPENSES	493,826.	198,053.	78,115.	217,658.							
f	All other expenses	683,725.	451,335.	177,207.	55,183.							
25	Total functional expenses. Add lines 1 through 24f	46,352,499.	43,141,859.	2,021,005.	1,189,635							
26	Joint Costs. Check here ► X if following		<u>, </u>	` `	- -							
	SOP 98-2 Complete this line only if the organization											
	reported in column (B) joint costs from a combined											
	educational campaign and fundraising solicitation	·										

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1		· ·	(A) Beginning of year		(B) End of year
	ነ	Cook pagintareat harman	Degining of year	-	Life of year
	l .	Cash · non-interest-bearing	2,089,191.	2	1 027 056
	2	Savings and temporary cash investments	2,006,279.		4,027,956.
	3	Pledges and grants receivable, net	325,128.	3	1,438,884.
	4	Accounts receivable, net	323,120.	4	322,031.
	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	2 604 220	7	2 664 750
Assets	8	Inventories for sale or use	2,684,228.	8	2,664,759. 98,805.
-	9	Prepaid expenses and deferred charges	139,451.	9	90,005.
	1	Land, buildings, and equipment: cost basis 10a 13,398,907.			
	b	Less: accumulated depreciation Complete	10 220 006		0 020 250
		Part VI of Schedule D 10b 3,568,649.	10,230,806. 2,003,371.		9,830,258. 2,818,923.
	11	Investments - publicly traded securities	2,003,3/1.	11	2,010,923.
	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 16	Other assets. See Part IV, line 11	19,478,454.	15	21 202 416
	17	Total assets. Add lines 1 through 15 (must equal line 34)	1,524,421.	16	21,202,416. 1,204,786.
	18	Accounts payable and accrued expenses	1,324,421.	17	1,204,700.
	19	Grants payable Deferred revenue		18	
	20	·		19	
	21	Tax-exempt bond liabilities		20	
ţį	22	Escrow account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees,		21	
Liabilities		highest compensated employees, and disqualified persons. Complete Part II			
		of Schedule L		00	
	23	Secured mortgages and notes payable to unrelated third parties		22	
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D	34,496.	25	12,396.
	26	Total liabilities. Add lines 17 through 25	1,558,917.	26	1,217,182.
		Organizations that follow SFAS 117, check here ► X and complete	2/000/32/0	20	1/21//2021
es		lines 27 through 29, and lines 33 and 34.			
DC.	27	Unrestricted net assets	16,978,883.	27	18,181,393.
ala	28	Temporarily restricted net assets	850,654.	28	975,841.
D B	29	Permanently restricted net assets	90,000.	29	828,000.
Net Assets or Fund Balanc		Organizations that do not follow SFAS 117, check here and			
9	!	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	17,919,537.	33	19,985,234.
	34	Total liabilities and net assets/fund balances	19,478,454.	34	21,202,416.
Pai	rt XI	Financial Statements and Reporting			
			-		Yes No
1		ounting method used to prepare the Form 990: Cash X Accrual	Other		
2a		the organization's financial statements compiled or reviewed by an independent	accountant?		2a X
ь		the organization's financial statements audited by an independent accountant?			2b X
c		es" to lines 2a or 2b, does the organization have a committee that assumes respor		audīt,	
_		w, or compilation of its financial statements and selection of an independent acco			2c X
3a		result of a federal award, was the organization required to undergo an audit or audi	dits as set forth in the Sing	le Audit	
		and OMB Circular A-133?			3a X
		es," did the organization undergo the required audit or audits?			3ь Х
83201	1 12-18	-08			Form 990 (2008)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury 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

Name of the organization

Employer identification number

			COMMUNITY F						58	<u> –1376</u>	<u>648</u>	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	.) (see ins	tructions)				
The organ			because it is: (Please ch									
1 🛄	A church, co	nvention of churche	s, or association of chur	ches desc	rıbed ın se	ction 170	(b)(1)(A)(i)					
2	A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3 🖳	A hospital or	a cooperative hospi	ital service organization (described	ın section	170(b)(1)	(A)(iii). (At	tach Sche	dule H.)			
4 🗔	A medical res	search organization	operated in conjunction	with a hos	pital descr	ibed in se	ction 170	(b)(1)(A)(ii	i). Enter th	e hospital'	s nam	e,
	city, and stat	e:										
5	An organizati	on operated for the	benefit of a college or us	niversity o	wned or op	erated by	a governi	mental unr	t described	n b		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6	A federal, sta	ate, or local governm	nent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).					
7 X		-	ceives a substantial part	of its supp	ort from a	governme	ntal unit c	or from the	general pu	ublic desci	ribed i	n
	section 170(b)(1)(A)(vi). (Comple	ete Part II.)									
8	-		section 170(b)(1)(A)(vi).		•							
9			ceives: (1) more than 33							-		
			nctions - subject to certa							-		
			axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization af	ter June 3	0, 197	5.
40 []		509(a)(2). (Complete	•									
10			perated exclusively to te	•	-				•			
11			perated exclusively for the									or
			ations described in secti				2). See se	ction 509(a)(3). Oned	K the box	tnat	
	a Type	· · · -	organization and compl	· · · · · · · · · · · · · · · · · · ·	re inrougn e III - Func					Tuna III. C	Wha.	
e 🗀	• •		at the organization is not			-	•	r more die		Type III • C		_
•			than one or more publicly									11
f			tten determination from		=				(a)(1) 01 30	5011011 509	(a)(z).	
•		rganization, check ti			ut it is u 1 y	pc 1, 1 ypc	11, 01 190	C 111				
g		-	organization accepted a	nv aift or c	ontribution	from any	of the foll	owing pers	sons?			
Ü			directly controls, either a								Yes	No
			upported organization?	•	,			(.)	, ,	11g(i)		
	(ii) A famıly	member of a perso	n described in (i) above?	?						11g(ii)		
	(iii) A 35% (controlled entity of a	a person described in (i)	or (II) abov	e?					11g(iii)		
h	Provide the f	ollowing information	about the organizations	s the organ	ization sup	oports.				<u> </u>		
		T				-					_	
(ı) Name	of supported	(iı) EIN	(iii) Type of		organization			(vi) is	the	(vii) Am	ount o	f
orga	anization		organization (described on lines 1-9		sted in your document?			organizatio (i) organiz U S	ed in the	sup		
			above or IRC section	<u> </u>								
			(see instructions))	Yes	No	Yes	No	Yes	No			
			 	 	 	-			-		_	
			v						1			
		**	 	 	 	<u> </u>			 		_	
				 	 		<u> </u>	 				
							ŀ					
				 	-			 	 			
Total												
LHA For F	Privacy Act ar	nd Paperwork Redu	uction Act Notice, see t	he Instruc	tions for F	Form 990.		Schedul	e A (Form	990 or 99	0-EZ)	2008

Part II Support Schiedule 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.)

Sec	ction A. Public Support		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
	Gifts, grants, contributions, and			(g/ =	1-7				
•	membership fees received. (Do not								
	include any "unusual grants.")	37322081.	43600579.	48226325.	43034243.	48128117.	220311345		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to	{				1			
	or expended on its behalf								
3	The value of services or facilities						}		
	furnished by a governmental unit to								
	the organization without charge	1		Ì					
4	Total. Add lines 1 · 3	37322081.	43600579.	48226325.	43034243.	48128117.	220311345		
	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)						16362936.		
6	Public Support. Subtract line 5 from line 4						203948409		
	ction B. Total Support								
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
7	Amounts from line 4	37322081.	43600579.	48226325.	43034243.	48128117.	220311345		
8	Gross income from interest,					1			
	dividends, payments received on								
	securities loans, rents, royalties			1					
	and income from similar sources	65,964.	105,967	169,442.	113,296.	116,933.	571,602.		
9	Net income from unrelated business								
	activities, whether or not the		İ						
	business is regularly carried on								
10	Other income. Do not include gain				İ				
	or loss from the sale of capital								
	assets (Explain in Part IV.)								
11	Total support. Add lines 7 through 10					<u></u>	220882947		
12	Gross receipts from related activities	, etc. (see instruct	ions)			12			
13	First five years. If the Form 990 is for	r the organization'	's first, second, the	ırd, fourth, or fifth t	tax year as a section	on 501(c)(3)			
	organization, check this box and sto						_		
Se	ction C. Computation of Pub	iic Support Pe	ercentage				00 20		
14	Public support percentage for 2008	• • • • • • • • • • • • • • • • • • • •		column (f))		14	92.33 %		
15	Public support percentage from 200					15	97.88 %		
16a	33 1/3% support test - 2008. If the	-			14 is 33 1/3% or i	more, check this b			
	stop here. The organization qualifies				45 00 400		▶ 🗓		
	33 1/3% support test - 2007. If the	=			d line 15 is 33 1/39	% or more, cneck t	Inis box		
47.	and stop here . The organization qua				40.40401		السما		
1/8	17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization								
						art iv now the orga	Inization		
	meets the "facts-and-circumstances	_	· ·		-	170 and line 15 :-	10% or		
•	10% -facts-and-circumstances tes		-						
	more, and if the organization meets to				-		▶ []		
1Ω	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								
-10	ute loundation. It the organizati	on did not check a	LOOK OIT HITE IS, I	υ <u>α, 100, 178, 07 17</u>			0 or 990-EZ) 2008		
					SCII	cane v from sa	U 01 000 LE/ 2000		

Pa	ert III Support Schedule for C	Organizations	Described in	Section 509(a	(Complete onl	v if you checked the bo	ox on line 9 of Part I)
Se	ction A. Public Support						
Cal	endar 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.")				1_		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities			-			
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 · 5			1			
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	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						
•	Add lines 7a and 7b						
_8	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support				· · · · · · · · · · · · · · · · · · ·		
Cal	endar 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						-
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975			ĺ			
	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)						
	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax vear as a sect	ion 501(c)(3) organiz	ration
	check this box and stop here		, 	-,	an your as a soon	on oo rojoj organiz	. ation,
Se	ction C. Computation of Publ	ic Support Pe	rcentage		<u> </u>		
	Public support percentage for 2008 (I			column (f))		15	
	Public support percentage from 2007			(//		16	%
Sec	ction D. Computation of Inves	stment Incom	e Percentage				
17	_				<u> </u>	17	%
18	•					18	
19a	33 1/3% support tests - 2008. If the				e 15 is more than		
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	ifies as a publicly	supported organi	zation	▶ □
t	33 1/3% support tests - 2007. If the						and
	line 18 is not more than 33 1/3%, che						▶ □
20	Private foundation. If the organization						
				_,, oncor t		chedule A (Form 99	0 or 000 E71 2000
					30	MODULE A (FUIII 88	V OI 380-EL] 2000

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

Inspection

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

_•	Section 501(c)(4), (5), or (6) organiz	ations: Complete Part III			
Nan	ne of organization			Empl	oyer identification number
	ATLANT	A COMMUNITY FOOD	BANK		58-1376648
Pŧ	art I-A To be completed	by all organizations exem	pt under section	501(c) and section 52	27 organizations.
	See the instructions for	Schedule C for details.		~	
1	Provide a description of the organ	nization's direct and indirect politic	al campaign activities		
2	Political expenditures			▶\$	
3	Volunteer hours				
_					
P		by all organizations exem	pt under section	501(c)(3).	
		Schedule C for details.			
1	Enter the amount of any excise ta			> \$	
2				5 ▶\$	
3		tion 4955 tax, did it file Form 4720	for this year?		Yes No
	a Was a correction made?				Yes No
	b If "Yes," describe in Part IV. art I-C To be completed	by all organizations exem	nt under section	501/a) except section	n 501(a)(3)
-		-	ipi ulluer section	501(c), except section	11 301(0)(3).
_		Schedule C for details.			
1	,,,,,,	, , ,	,		
	Enter the amount of the filing organization estimates	anization's funds contributed to of	mer organizations for s	_	
2	exempt function activities Total of direct and indirect exempt	at function expenditures. Add lines	1 and 2 and onter has		
3	Form 1120-POL, line 17b	or function expenditures. Add lines	s i and 2 and enter her		
4	Did the filing organization file For	m 1120-POL for this year?		•	Yes No
5		-	IN) of all section 527 n	olitical organizations to whic	
·		te if the amount was paid from the			
		a separate political organization,		•	
	If additional space is needed, pro		·		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	. ,		(-,	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization.
					If none, enter 0.
_			_		<u> </u>
					
_		 			
		.			

832041 12-18-08

LHA

Schedule C (Form 990 or 990-EZ) 2008

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

Schedule C (Form 990 or 990-EZ) 2008

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2008 ATLANTA COMMUNITY FOOD BANK 58-1376648 p

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)) See the instructions

			a)		b)
		Yes	No	Am	ount
1 During the year, did the filing organization	on attempt to influence foreign, national, state or				
local legislation, including any attempt t	o influence public opinion on a legislative matter		‡		
or referendum, through the use of:			ł		
a Volunteers?			ļ	╛	
b Paid staff or management (include com	pensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?					
d Mailings to members, legislators, or the	public?				
e Publications, or published or broadcast	statements?				
f Grants to other organizations for lobbyi	ng purposes?				
g Direct contact with legislators, their star	ffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conv	rentions, speeches, lectures, or any other means?				
i Other activities? If "Yes," describe in Pa	art IV				
j Total lines 1c through 1i					
2a Did the activities in line 1 cause the org	anization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax inc					
	curred by organization managers under section 4912	.]		
	on 4912 tax, did it file Form 4720 for this year?		1	"	
	organizations exempt under section 501(c)	4), section	501(c)(5). or sec	tion
				-,,	
501(c)(6). See the instruction	ns for ochequie o for details				
	ns for ochequie of or details			Yes	1
501(c)(6). See the instruction			1	Yes	 '
501(c)(6). See the instruction Were substantially all (90% or more) du	es received nondeductible by members?		1 2	Yes	
Were substantially all (90% or more) du Did the organization make only in-house Did the organization agree to carryover art III-B To be completed by all 501(c)(6) if BOTH Part I	es received nondeductible by members? lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" C	4), section PR if Part II	2 3 501(c)(5), or sec	tion
Were substantially all (90% or more) du Did the organization make only in-house Did the organization agree to carryover art III-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See Sc	es received nondeductible by members? e lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule C instructions for details.	4), section R if Part II	501(c)(I-A, que	5), or sec	tion
Were substantially all (90% or more) due Did the organization make only in-house Did the organization agree to carryover art III-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See So Dues, assessments and similar amount	es received nondeductible by members? e lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule C instructions for details. s from members	R if Part II	2 3 501(c)(5), or sec	tion
Were substantially all (90% or more) due Did the organization make only in-house Did the organization agree to carryover art HI-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See So Dues, assessments and similar amount Section 162(e) non-deductible lobbying	es received nondeductible by members? e lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule C instructions for details. s from members and political expenditures (do not include amounts of political expenditures)	R if Part II	501(c)(I-A, que	5), or sec	tion
Were substantially all (90% or more) due Did the organization make only in-house Did the organization agree to carryover art III-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See So Dues, assessments and similar amount Section 162(e) non-deductible lobbying expenses for which the section 527(f	es received nondeductible by members? e lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule C instructions for details. s from members and political expenditures (do not include amounts of political expenditures)	R if Part II	2 3 501(c)(I-A, que	5), or sec	tion
Were substantially all (90% or more) due Did the organization make only in-house Did the organization agree to carryover art III-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See So Dues, assessments and similar amount Section 162(e) non-deductible lobbying expenses for which the section 527(f) a Current year	es received nondeductible by members? e lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule C instructions for details. s from members and political expenditures (do not include amounts of political expenditures)	R if Part II	2 3 501(c)(I-A, que	5), or sec	tion
Were substantially all (90% or more) due. Did the organization make only in-house. Did the organization agree to carryover. art III-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See Sci Dues, assessments and similar amount. Section 162(e) non-deductible lobbying expenses for which the section 527(f. a Current year b Carryover from last year	es received nondeductible by members? e lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule C instructions for details. s from members and political expenditures (do not include amounts of political expenditures)	R if Part II	2 3 501(c)(c) I-A, que	5), or sec	tion
Were substantially all (90% or more) due Did the organization make only in-house Did the organization agree to carryover art III-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See So Dues, assessments and similar amount Section 162(e) non-deductible lobbying expenses for which the section 527(f) a Current year b Carryover from last year c Total	es received nondeductible by members? a lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule C instructions for details. s from members and political expenditures (do not include amounts of political expenditures)	PR if Part II	2 3 501(c)(c) I-A, que	5), or sec	tion
Were substantially all (90% or more) due Did the organization make only in-house Did the organization agree to carryover art III-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See So Dues, assessments and similar amount Section 162(e) non-deductible lobbying expenses for which the section 527(f) a Current year b Carryover from last year c Total Aggregate amount reported in section 6	es received nondeductible by members? e lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule C instructions for details. s from members and political expenditures (do not include amounts of political expenditures) tax was paid).	OR if Part II	2 3 501(c)(c) I-A, que	5), or sec	tion
Were substantially all (90% or more) due Did the organization make only in-house Did the organization agree to carryover art III-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See So Dues, assessments and similar amount Section 162(e) non-deductible lobbying expenses for which the section 527(f) Current year Carryover from last year Total Aggregate amount reported in section 6 If notices were sent and the amount on	es received nondeductible by members? e lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule Cinstructions for details. Is from members and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures). 6033(e)(1)(A) notices of nondeductible section 162(e) dues line 2c exceeds the amount on line 3, what portion of the	PR if Part II	2 3 501(c)(c) I-A, que	5), or sec	tion
Were substantially all (90% or more) due Did the organization make only in-house Did the organization agree to carryover art III-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See Sc Dues, assessments and similar amount Section 162(e) non-deductible lobbying expenses for which the section 527(f) Current year Carryover from last year Total Aggregate amount reported in section 6 If notices were sent and the amount on does the organization agree to carryover	es received nondeductible by members? e lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule C instructions for details. s from members and political expenditures (do not include amounts of political expenditures) tax was paid).	PR if Part II	2 3 501(c)(I-A, que	5), or sec	tion
Were substantially all (90% or more) due Did the organization make only in-house Did the organization agree to carryover art III-B To be completed by all 501(c)(6) if BOTH Part I answered "Yes." See Sc Dues, assessments and similar amount Section 162(e) non-deductible lobbying expenses for which the section 527(f) Current year Carryover from last year Total Aggregate amount reported in section 6 If notices were sent and the amount on does the organization agree to carryove expenditure next year?	es received nondeductible by members? e lobbying expenditures of \$2,000 or less? lobbying and political expenditures from the prior year? organizations exempt under section 501(c)(II-A, questions 1 and 2 are answered "No" Chedule Cinstructions for details. Is from members and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures). 6033(e)(1)(A) notices of nondeductible section 162(e) dues line 2c exceeds the amount on line 3, what portion of the	PR if Part II	2 3 501(c)(c) I-A, que	5), or sec	tion

Schedule D

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

ATLANTA COMMUNITY FOOD BANK

Employer identification number

-	ATLANTA COMMUNITY I		38-13/0048
Par			ds or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		635
	-	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds may	be used only
	for charitable purposes and not for the benefit of the donor of		
Par	t II Conservation Easements. Complete if the org	anization answered "Yes" to Form 990	, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	leasure) Preservation of an i	nistorically important land area
	Protection of natural habitat	Preservation of cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified conse	ervation contribution in the form of a co	onservation easement on the last day
	of the tax year		p
			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 stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06	2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by t	the organization during the taxable
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	_
5	Does the organization have a written policy regarding the per	odic monitoring, inspection, violations,	and
	enforcement of the conservation easements it holds?		Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, ar	nd enforcing easements during the yea	r >
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing easements during the year $lacktriangle$	· \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 1	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expen	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ion's financial statements that describe	es the organization's accounting for
	conservation easements.		
Pai	till Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of p	oublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these i		
b	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, o	r research in furtherance of public serv	ice, provide the following amounts relating to
	these items		
	(i) Revenues included in 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 treating		cial gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		▶ \$
$LH\Delta$	For Privacy Act and Paperwork Reduction Act Notice see	the Instructions for Form 000	Schodula D (Form 990) 2008

832051 12-23-08

Schedule D (Form 990) 2008

Part VII Investments' - Other Securities.	See Form 990, Part X, lin	e 12.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua t or end-of-year mar	
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
	<u> </u>			,—. ———————————————————————————————————
				
				
	 			
				_
Total. (Col (b) should equal Form 990, Part X, col (B) line 12)	 			······································
Part VIII Investments - Program Related.	See Form 990 Part X III		······································	
	1	110 10.	(c) Method of valua	tion:
(a) Description of investment type	(b) Book value	Cos	t or end-of-year mar	
			 	
				
T 1:1 (0.1(1) 1.1 15 000 D 1.1 1/0) 1 10.1				
Total. (Col (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, line				<u></u>
	a) Description			(b) Book value
	-, 5000, 510			
				
	· · · · · · · · · · · · · · · · · · ·			
Total. (Column (b) should equal Form 990, Part X, col (B)				
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25.	(b) Amount		
		(b) Amount		
Federal income taxes CAPITAL LEASE OBLIGATION		12,396.		
CALITAL BLADE OBLIGATION		12,370.		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)	12,396.		
In Part XIV, provide the text of the footnote to the organ		ents that reports the ora	anization's liability fo	or uncertain tax positions

under FIN 48. 832053 12-23-08

Schedule D (Form 990) 2008 ATLANTA COMMUNITY FOOD BANK 58-13/6648 Page 5
Part XIV Supplemental Information (continued)
PERSONAL USE OF VEHICLE ON FORM 990 NOT ON FINANCIAL STATEMENTS: 2609.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
DIRECT BENEFIT EXPENSES INCLUDED IN FUNCTIONAL EXPENSES ON AUDIT
REPORT: 235700.
PART XIII, LINE 2D - OTHER ADJUSTMENTS:
DIRECT BENEFIT EXPENSES INCLUDED IN FUNCTIONAL EXPENSES ON AUDIT
REPORT: 235700.
PART XIII, LINE 4B - OTHER ADJUSTMENTS:
PERSONAL USE OF VEHICLE: 2609.
Schedule D (Form 990) 2008

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

Name of the organization

Employer identification number

ATLAN	TA COMMUNITY FOOD	BANK			58-1376	648
Part I Fundraising Activit	ies. Complete if the organization a	inswered "Ye	es' to	Form 990, Part IV, I	ine 17	
b If "Yes," list the ten highest paid	e X So f X So g X Sp	licitation of n licitation of g ecial fundrals ridual (includi vith profession pursuant to	on-good sing of onal f agree	overnment grants nment grants events fficers, directors, trus undraising services? ements under which	stees or X Yes the fundraiser is to	_
(i) Name of Individual or entity (fundraiser)	(ii) Activity	(iii) [fundra have cus or contri contribut	stody of 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
LW	DIRECT MAIL	Yes	No		_	
ROBBINS	SOLICITATION		<u>X</u>	1,442,020.	13,600.	1,428,420.
						_
Total 3 List all states in which the organic GA, MA	zation is registered or licensed to se	olicit funds o		1,442,020.		1,428,420.
						

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

Schedule G (Form 990 or 990-EZ) 2008

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, line 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other Events (d) Total Events GOLF (Add col. (a) through TOURNAMENT HUNGER WALK col. (c)) (total number) (event type) (event type) 139,979 571,167. 327,209. 1,038,355. Gross receipts 98,694 276,289 940,425. 565,442 Less: Charitable contributions 97,930. 41,285 50,920. 5,725 Gross revenue (line 1 minus line 2) 500. 500. 4 Cash prizes 43,220 402. 5,785. 49,407. Non-cash prizes Direct Expenses 1,500. 1,000. 2,500. 6 Rent/facility costs 67,667. 62,175. 53,451 183,293. Other direct expenses 235,700. Direct expense summary. Add lines 4 through 7 in column (d) -137,770.Net income summary. Combine lines 3 and 8 in column (d) Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (Add 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 No No No Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine lines 1 and 7 in column (d) No Yes 9 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? 9a 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

Schedule G (Form 990 or 990-EZ) 2008 ATLANTA COMMUNITY FOOD BANK 58-13	37664	8 Pa	age 3
		Yes	No
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility	<u>%</u>		
b An outside facility	%		
14 Provide 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?	15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount			
of gaming revenue retained by the third party > \$			
c If "Yes," enter name and address:			•
Name ►	_		
Address	_		
16 Gaming manager information:			
Name ▶	_		
Gaming manager compensation ▶ \$			
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?	17a	ļ	ļ
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		1	È

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

ATLANTA COMMUNITY FOOD BANK

Employer identification number 58-1376648

Travel for companions Yes 10 Yes 11 Yes 12 Yes 13 Yes 14 Yes 15 Yes 16	
Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items. Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence	
Travel for companions Payments for business use of personal residence	
Tax Indemnification and gross-up payments Health or social club dues or initiation fees	
Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	
b If line 1a is 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 officers, directors,	
trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's	
CEO/Executive Director. Check all that apply.	
Compensation committee Written employment contract	
Independent compensation consultant Independent compensation consultant Independent compensation consultant Independent compensation consultant	
Form 990 of other organizations X Approval by the board or compensation committee	
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a	
a Receive a severance payment or change of control payment?	<u>X</u>
	X
	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	
0.1.504/.)(0) 1.504/.)(0)	
Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.	
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	
contingent on the revenues of:	
h Anu valakad ana	<u>X</u>
b Any related organization? If "Yes," to line 5a or 5b, describe in Part III.	X
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:	
	v
- • •	$\frac{X}{X}$
If "Yes" to line 6a or 6b, describe in Part III	<u> </u>
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	
	Х
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	<u>^</u>
	Х
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 20	_

ATLANTA COMMUNITY FOOD BANK Schedule J (Form 990) 2008 Part # Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(0)	(D)	(E)	(F)
(A) Name	•	(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other compensation	Deferred compensation	Nontaxable benefits	Total of columns (B)(l)-(D)	Compensation reported in prior Form 990 or- Form 990-EZ
	8	150,700.		0	0	0	150,700.	0
WILLIAM BOLLING	(II)	0	0	0	0	0	0	0
	(3)							
	(3)							
	Ξ							
	(E)							
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				(Scheduk	Schedule J (Form 990) 2008

SCHEDULE M (Form 990)

NonCash Contributions

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

ATLANTA COMMUNITY FOOD BANK

Employer identification number 58-1376648

Schedule M (Form 990) 2008

Par	t 1 Types of Property							
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported or Form 990, Part VIII, line				_
4	Art · Works of art			<u> </u>				
2	Art · Historical treasures		-					
3	Art · Fractional interests							
4	Books and publications	_						
5	Clothing and household goods	Х	-	124 35	9.COST PROVIDE	D BY	DO	NOR
6	Cars and other vehicles	X	 	84 38	4. INVOICE FOR I	VEW 1	וואי	CK
7	Boats and planes		 	04,30	4. INVOICE TOR I	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	110	<u> </u>
8	' '		-					
_	Intellectual property	Х	9	41,33				
9	Securities - Publicly traded		ļ	41,33			_	
10	Securities - Closely held stock	-						
11	Securities · Partnership, LLC, or							
40	trust interests		-	<u></u>				
12	Securities - Miscellaneous		-					
13	Qualified conservation contribution							
	(historic structures)		 					
14	Qualified conservation contribution (other) Real estate - Residential		 					-
15		<u> </u>	1					
16	Real estate · Commercial	·	 -	-			_	——
17	Real estate · Other		 				_	
18	Collectibles	X	17,198	31,181,03			~	
19	Food inventory		1/,190	31,101,03	0.			-
20	Drugs and medical supplies						_	
21	Taxidermy						_	
22	Historical artifacts							
23	Scientific specimens		 		- 			
24	Archeological artifacts	V		102 02	A THURSTON DOOM	DONG		
25	Other (ADVERTISING)	X	23		0.INVOICE FROM	DONC)K	
26	Other (TICKETS)	X	13		6.FACE VALUE			
27	Other (SPECIAL EVENT)	X	19		8. VALUE FROM DO	<u>JNOR</u>		
28	Other ► (COMPUTER EQUI)	X	2		6.MARKET VALUE			
29	Number of Forms 8283 received by the organi		-					
	for which the organization completed Form 82	83, Part IV,	Donee Acknow	vledgment	29			
	5						Yes	No
30a	During the year, did the organization receive b							į
	at least three years from the date of the initial	contribution	i, and which is	not required to be used	for exempt purposes for			
	the entire holding period?					30a		X
	If "Yes," describe the arrangement in Part II.							ĺ
31	Does the organization have a gift acceptance					31	<u>X</u>	
32a	Does the organization hire or use third parties	or related o	rganizations to	solicit, process, or sell r	oncash			
_	contributions?					32a		X
	If "Yes," describe in Part II							ĺ
33	If the organization did not report revenues in c	olumn (c) fo	or a type of pro	perty for which column (a	a) is checked,			Ė
	describe in Part II.					1		É

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

Schedule M (Form 990) 2004 TLANTA COMMUNITY FOOD BANK	<u>58-1376648</u>	Page 2
Part II Supplemental Information. Complete this part to provide the information required by Part I, III Also complete this part for any additional information.	nes 30b, 32b, and 33.	
PART I, OTHER TYPES OF PROPERTY:		
MARKETING MATERIALS		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 3		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 39789.		
(D) METHOD OF DETERMINING REVENUE: VALUE FROM DONOR		
BEVERAGE		
(A) CHECK IF APPLICABLE = X	····	
(B) NUMBER OF CONTRIBUTORS = 15		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 28024.		
(D) METHOD OF DETERMINING REVENUE: MARKET VALUE		
FOOD FOR EVENTS		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 12		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 25003.		
(D) METHOD OF DETERMINING REVENUE: MARKET VALUE		
MOBILE PHONES		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 1		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 10950.		
(D) METHOD OF DETERMINING REVENUE: INVOICE FROM DONOR		
OFFICE SUPPLIES		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 1		
832142 12-18-08 34	Schedule M (For	m 990) 2008

	08-13/6648	Page 2
Supplemental Information. Complete this part to provide the information required by Part I, lines Also complete this part for any additional information.	3 30b, 32b, and 33.	
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 10000.		
(D) METHOD OF DETERMINING REVENUE: INVOICE FROM DONOR		
GIFT CARD		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 25		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 9289.		
(D) METHOD OF DETERMINING REVENUE: FACE VALUE		
FURNITURE		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 1		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 1505.		
(D) METHOD OF DETERMINING REVENUE: VALUE FROM DONOR		
	 	
TABLES		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 1		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 1380.		
(D) METHOD OF DETERMINING REVENUE: COST FROM DONOR		
PRINTED MATERIALS		
(A) CHECK IF APPLICABLE = X		
(B) NUMBER OF CONTRIBUTORS = 2		
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 1300.		
(D) METHOD OF DETERMINING REVENUE: INVOICE FROM DONOR		
DECOR		
832142 12-18-08	Schedule M (For	m 990) 2008

Schedule M (Form 990) 2008 ATLANTA COMMUNITY FOOD BANK 58-1376648 Page 2
Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.
(A) CHECK IF APPLICABLE = X
(B) NUMBER OF CONTRIBUTORS = 1
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 528.
(D) METHOD OF DETERMINING REVENUE: MARKET VALUE
SCHEDULE M, LINE 32B: ATLANTA COMMUNITY FOOD BANK SHALL CLOSELY REVIEW
ALL GIFTS OF SIGNIFICANT RISK PRIOR TO ACCEPTANCE OF THE GIFT. ALL
SUCH GIFTS SHALL BE ACKNOWLEDGED WHEN RECEIVED, WITH WRITTEN NOTICE TO
THE DONOR THAT DUE TO THE NATURE OF THE GIFT AND ITS INHERENT RISKS,
REVIEW IS NECESSARY PRIOR TO FINAL ACCEPTANCE. SUCH GIFTS INCLUDE, BUT
ARE NOT NECESSARILY LIMITED TO, THE FOLLOWING:
NON-PUBLICLY TRADED SECURITIES
ALL GIFTS OF REAL PROPERTY
GIFTS OF PERSONAL PROPERTY IF NOT TO BE USED BY ATLANTA COMMUNITY FOOD
BANK
GIFTS OF REAL OR PERSONAL PROPERTY WITH DONOR RESTRICTIONS PERTAINING
TO DISPOSAL
ALL BARGAIN SALES OF PROPERTY
CASH GIFTS WITH SIGNIFICANT DONOR RESTRICTIONS AND
ALL GIFTS OF UNUSUAL ITEMS OR GIFTS OF QUESTIONABLE VALUE

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

ATLANTA COMMUNITY FOOD BANK

 $\begin{array}{c} \textbf{Employer identification number} \\ 58-1376648 \end{array}$

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:
AT YEAR END JUNE 30, 2009, PUBLIX TERMINATED THE CONTRACT THAT IT HELD
WITH THE ORGANIZATION FOR ITS RECLAMATION PROJECT. AS A RESULT, FUTURE
OPERATIONS WILL NOT INCLUDE REVENUES OR EXPENSES
ASSOCIATED WITH THIS ACTIVITY. MANY OF THE EMPLOYEES ASSOCIATED WITH
THIS ACTIVITY WERE TERMINATED, WHERE AS OTHERS THAT COULD BE REASSIGNED
WERE RETAINED IN ANOTHER CAPACITY. THIS WILL
HAVE A SIGNIFICANT IMPACT ON OPERATIONS IN THE FUTURE AS IT RELATES TO
THIS SPECIFIC ACTIVITY, BUT THE FULL IMPACT CAN NOT BE REASONABLY
ESTIMATED. HOWEVER, IT SHOULD NOT SIGNIFICANTLY IMPACT ANY
ASSETS OR LIABILITIES AND SHOULD NOT IMPACT THE ORGANIZATION'S ABILITY
TO CONTINUE OPERATIONS IN ALL OF ITS REMAINING ACTIVITIES.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS
HOUSEHOLD PRODUCTS, AN 8 % INCREASE OVER THE PRIOR FISCAL YEAR. OF THIS
NUMBER, 16,749,037 POUNDS WERE DISTRIBUTED TO 704 PARTNER AGENCIES IN
38 COUNTIES ACROSS METRO ATLANTA AND NORTH GEORGIA; ACFB ALSO SHARED
5,187,955 POUNDS OF PRODUCT WITH OTHER FOOD BANKS IN GEORGIA AND THE
SOUTHEAST. ACFB COLLECTED THIS PRODUCT FROM 247 DONORS IN THE GROCERY,
WHOLESALE AND HOSPITALITY INDUSTRIES, AND FROM THOUSANDS OF INDIVIDUALS
PARTICIPATING IN LOCAL FOOD DRIVES. NATIONAL DONATIONS CAME THROUGH
USDA COMMODITIES AND NATIONAL FOOD INDUSTRY DONATIONS COORDINATED
THROUGH FEEDING AMERICA (THE NATION'S LEADING HUNGER-RELIEF CHARITY
COMPRISED OF MORE THAN 200 MEMBER FOOD BANKS, INCLUDING ACFB). WE
WORKED CLOSELY WITH FEEDING AMERICA, OUR NATIONAL FOOD BANK NETWORK, IN
THE PRIOR FISCAL YEAR TO HELP PASS THE NUTRITION TITLE OF THE 2008 FARM
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008 832211 12-18-08

SCHEDULE O

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.

BILL. AS A RESULT OF THIS WORK, WE RECEIVED 3,304,366 POUNDS OF USDA

PRODUCT DURING THIS FISCAL YEAR, A 54% INCREASE OVER THE PRIOR YEAR.

2008
Open to Public Inspection

Name of the organization

ATLANTA COMMUNITY FOOD BANK

ARE PLANNED FOR FISCAL YEAR 2009-10.

Employer identification number 58-1376648

A SIGNIFICANT ACCOMPLISHMENT FOR THIS FISCAL YEAR WAS OUR WORK WITH

USDA IN THE PLANNING AND EARLY STAGES OF IMPLEMENTING MASS USDA

STIMULUS FOOD DISTRIBUTIONS. THE FIRST DISTRIBUTIONS OF 21,025 POUNDS

OF USDA STIMULUS PRODUCT TOOK PLACE IN BUTTS, GILMER, AND MORGAN

COUNTIES IN JUNE OF 2009. SEVERAL MORE MASS USDA STIMULUS DISTRIBUTIONS

ADDITIONALLY, THROUGH THE STATE NUTRITION ASSISTANCE PROGRAM (SNAP),

ACFB WAS ABLE TO PURCHASE AND DISTRIBUTE 3,324,506 POUNDS OF HIGH

NUTRITION FOOD ITEMS TO DESIGNATED PARTNER AGENCIES - 15% OF THE TOTAL

POUNDS DISTRIBUTED DURING FISCAL YEAR 2008-09. WHILE MOST OF ACFB'S

PRODUCTS ARE DONATED FROM WHOLESALERS, RETAILERS AND THE GENERAL

PUBLIC, ANNUAL SNAP FUNDS PROVIDED BY THE STATE OF GEORGIA ENABLED ACFB

AND SEVEN OTHER FOOD BANKS BELONGING TO THE GEORGIA FOOD BANK

ASSOCIATION TO SECURE HIGHLY NUTRITIOUS PRODUCTS THROUGHOUT THE YEAR TO

SUPPLEMENT REGULAR DONATIONS. THIS MAKES IT POSSIBLE FOR ACFB AND OTHER

FOOD BANKS ACROSS THE STATE OF GEORGIA TO CONSISTENTLY ENSURE A MIX OF

PRODUCT THAT IS HIGHER IN NUTRITIONAL VALUE THAN WE WOULD OTHERWISE BE

ABLE TO PROVIDE. SNAP PRODUCTS ARE RESTRICTED BY THE STATE OF GEORGIA

FOR DISTRIBUTION TO PARTNER AGENCIES SERVING HOUSEHOLDS WITH CHILDREN.

OVERALL, ACFB PRODUCT RECEIPTS INCREASED 10% DURING FISCAL YEAR

2008-09, WITH POUNDS RECEIVED FROM FOOD DRIVES BEING UP 41% OVER THE

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Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990

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2008
Open to Public Inspection

Name of the organization

ATLANTA COMMUNITY FOOD BANK

Employer identification number 58-1376648

PREVIOUS YEAR, AND DONATED PRODUCE POUNDS INCREASING BY 64%. WE WERE
ABLE TO MAINTAIN, AND EVEN INCREASE, FOOD DONATIONS DURING A RECESSION
AND A TIME OF MANY CHANGES IN FOOD INDUSTRY TRENDS:
MANY CORPORATIONS IN THE FOOD INDUSTRY CEASING OPERATIONS
MANY OTHER FOOD CORPORATIONS BEING BOUGHT OUT OR MERGING WITH OTHERS
A TIGHTENING UP OF PROCESSES TO REDUCE LOSSES WITH NEW PROCEDURES AND
EMPLOYEE INCENTIVES MEANING LESS EXCESS PRODUCT TO BE DONATED TO FOOD
BANKS
WE ATTRIBUTE OUR ABILITY TO SUSTAIN FOOD AND PRODUCT RECEIPTS DURING
SUCH A VOLATILE TIME TO SEVERAL FACTORS:
WE BEGAN SHIFTING TO MORE RETAIL STORE DONATIONS AS A NEW CORE SOURCE
OF PRODUCT
WE EXPANDED THE NUMBERS OF PUBLIX AND KROGER RETAIL PICK UPS,
AND ADDED SAM'S CLUB, TARGET AND OTHER RETAILERS ON AS NEW RETAIL
DONORS.
WE BROUGHT IN A NEW FOOD PROCUREMENT STAFF MEMBER TO FOCUS STRICTLY ON
OUR FOOD DONORS MAKING VISITS TO DONORS, FOSTERING RELATIONSHIPS WITH
DONORS, ANALYZING DONORS WHO HAD LAPSED, BEING AN ADVOCATE FOR DONORS,
AND IMPROVING DONOR RECORDS.
WE IMPLEMENTED A NEW FOOD INDUSTRY ADVISORY COUNCIL COMPRISED OF
INDUSTRY REPRESENTATIVES TO MEET QUARTERLY AND HELP US UNDERSTAND
TRENDS IN THE INDUSTRY AND GENERATE LEADS FOR POTENTIAL NEW FOOD AND
PRODUCT DONORS.
WE WERE ABLE TO DOUBLE OUR FOOD AND PRODUCT PURCHASES FROM MORE THAN
250,000 POUNDS IN FISCAL YEAR 2007-08 TO 510,016 POUNDS IN FISCAL YEAR
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2008 Open to Public Inspection

Name of the organization

ATLANTA COMMUNITY FOOD BANK

Employer identification number 58–1376648

MILIMIA COMMITTION BRANK 33 10,0010
2008-09 THANKS TO GRANTS RECEIVED EARMARKED SPECIFICALLY FOR FOOD
PURCHASES DURING THE DOWNTURN IN THE ECONOMY. THESE PURCHASES WERE IN
ADDITION TO OUR PURCHASES FROM STATE NUTRITION ASSISTANCE PROGRAM
(SNAP) GRANT FUNDING.
PRODUCT RESCUE CENTER
ALL FOOD DONATED FROM SALVAGE CENTERS AND FOOD DRIVES MUST BE
INSPECTED, SORTED AND BOXED BEFORE IT CAN BE DISTRIBUTED TO OUR PARTNER
AGENCIES. ACFB NEEDS ON AVERAGE 1,000 PEOPLE TO VOLUNTEER EACH MONTH AT
OUR PRODUCT RESCUE CENTER (PRC) TO ENSURE THIS HAPPENS. PRC VOLUNTEERS
PROCESSED A TOTAL OF 3,555,235 POUNDS OF FOOD AND HOUSEHOLD ITEMS
DURING FISCAL YEAR 2008-09. KEY ACCOMPLISHMENTS FOR THE PRODUCT RESCUE
CENTER SPECIFIC TO FISCAL YEAR 2008-09 INCLUDED COMPLETING OUR YEAR-END
INVENTORY AUDIT WITH 100% ACCURACY IN RECORD TIME; REPLACING AN
OUTDATED, UNUSABLE FORKLIFT WITH A DONATED FORKLIFT THAT FINALLY
ENABLES US TO ACCESS ALL OF OUR PRODUCT RACKING; AND INCORPORATING MINI
"HUNGER 101" COMPONENTS TO EDUCATE OUR VOLUNTEERS ON HUNGER AND POVERTY
DURING THE BREAK TIME OF THEIR VOLUNTEER SHIFTS.
TRANSPORTATION
ACFB WOULD NOT HAVE BEEN ABLE TO DISTRIBUTE THE MILLIONS OF POUNDS OF
FOOD IT DID IN FISCAL YEAR 2008-09, AND ENSURE MORE HUNGRY PEOPLE WERE
FED, WITHOUT A STRONG TRANSPORTATION DEPARTMENT. OUR FLEET OF NINE
TRUCKS SAFELY PICKS UP PRODUCT FROM DONORS AND DELIVERS IT BACK TO OUR
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Department of the Treasury Internal Revenue Service Supplemental Information to Form 990

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ATLANTA COMMUNITY FOOD BANK

MAIN FACILITY AND A NUMBER OF OUR PARTNER AGENCIES (BOTH URBAN AND
RURAL) WHO OPT TO HAVE THEIR PRODUCT DELIVERED RATHER THAN PICK IT UP
AT OUR FACILITY. ACFB'S DELIVERY PROGRAM HAS, IN FACT, BEEN A MAJOR
HIGHLIGHT FOR THE FISCAL YEAR. WE HAVE MADE IT POSSIBLE FOR MANY OF
OUR PARTNER AGENCIES TO RECEIVE AND DISTRIBUTE A MUCH HIGHER VOLUME OF
PRODUCT TO THEIR CLIENTS DURING FISCAL YEAR 2008-09, PRODUCT
DISTRIBUTION INCREASED BY 84% FOR OUR NINE REMOTE/RURAL DELIVERY
LOCATIONS: BREMEN, CARTERSVILLE, DALTON, GAINESVILLE, GRIFFIN, MORGAN
COUNTY, NEWTON COUNTY, ROME AND WALTON COUNTY. INTOWN PARTNER AGENCIES
RECEIVING DELIVERIES WERE ABLE TO INCREASE PRODUCT DISTRIBUTION BY 52%.
BECAUSE OF THE INCREASE IN ACFB'S NUMBER OF PICK-UPS FROM RETAIL
STORES, OUR DRIVERS HAVE BEEN TRAINED IN SAFE FOOD HANDLING TO ENSURE
SUCCESS IN PROVIDING QUALITY FOOD FOR OUR PARTNER AGENCIES. WE
ANTICIPATE A SIGNIFICANT INCREASE IN RETAIL PICK-UPS IN THE NEXT FISCAL
YEAR.
SEE SCHEDULE O PAGE 46 FOR CONTINUATION
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS
INCLUDING THE FORMATION OF COMMITTEES TO ADDRESS OUR FOUR PRIMARY GOALS
1) THE PROMOTION OF THE VOLUNTEER INCOME TAX ASSISTANCE PROGRAM (VITA)
IN ATLANTA AREA, THE CREATION OF A STATE EITC COALITION, THE INCLUSION
OF MORE ASSET-BUILDING SERVICES WITHIN VITA SITES, AND CONTINUOUS
QUALITY IMPROVEMENT AT OUR VITA SITES. THE ACCOMPLISHMENTS OF THE VITA
CAMPAIGN WERE MANY, ESPECIALLY CONSIDERING THE FACT THAT FISCAL YEAR
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Name of the organization

ATLANTA COMMUNITY FOOD BANK	58-1376648
2008-09 WAS ONLY THE SECOND YEAR FOR APC MANAGING VITA:	
APC COORDINATED 46 VITA SITES IN 10 METRO COUNTIES.	
WE UTILIZED MORE THAN 400 VOLUNTEERS WHO GAVE OVER 1	6,000 HOURS OF
SERVICE	
THESE VOLUNTEERS HELPED 13,236 PEOPLE FILE THEIR TAX	ES, A 30% INCREASE
IN THE NUMBER OF TAX RETURNS COMPLETED AT VITA SITES COMP.	ARED TO OUR
FIRST YEAR.	
THIS BROUGHT \$16.7 MILLION IN TAX REFUNDS INTO THE E	CONOMY, A 54%
INCREASE OVER THE FIRST YEAR.	
ADDITIONALLY, APC HELPED INDIVIDUALS APPLY FOR FOOD STAMP	S AT HOTELS,
MALLS, SOCIAL SERVICE AGENCIES, CHURCHES, COMMUNITY CENTE	RS, APARTMENT
COMPLEXES, AIRPORTS, HEALTH FAIRS, DEPARTMENT STORES, AND	SENIOR LIVING
FACILITIES; AND 24 ACFB PARTNER AGENCIES WERE ENLISTED AN	D TRAINED TO
SCREEN CLIENTS FOR BENEFITS.	
THROUGH ACFB'S INTERACTIVE HUNGER 101 PROJECT, THE ISSUES	OF HUNGER,
FOOD INSECURITY AND POVERTY ARE ADDRESSED ON THE NATIONAL	, STATE AND
LOCAL LEVELS. THE PURPOSE OF HUNGER 101 IS TO BUILD COMMU	NITY AWARENESS
ON THESE DIFFICULT ISSUES AND FURTHER ACFB'S MISSION TO F	IGHT HUNGER BY
ENGAGING, EDUCATING AND EMPOWERING OUR COMMUNITY. DURING	FISCAL YEAR
2008-09, 110 HUNGER 101 WORKSHOPS AND PRESENTATIONS WERE	GIVEN TO MORE
THAN 2,500 INDIVIDUALS FROM PRE AND ELEMENTARY SCHOOLS, M	IDDLE AND HIGH
SCHOOLS, COLLEGES AND UNIVERSITIES, AS WELL AS FAITH, CIV	IC AND
CORPORATE GROUPS A 35% INCREASE COMPARED TO 81 WORKSHOPS	GIVEN LAST
FISCAL YEAR. IN ADDITION, 40 "FEAST OR FAMINE" FOOD SECUR	ITY BOARD
GAMES WERE DISTRIBUTED TO CHURCHES, CONGREGATIONS, 4H CLU LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	

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Name of the organization

ATLANTA COMMUNITY FOOD BANK

Employer identification number 58-1376648

TROOPS, SCHOOLS AND FOOD BANKS IN THE FOLLOWING STATES: ALASKA,

COLORADO, GEORGIA, ILLINOIS, KENTUCKY MASSACHUSETTS, NEW YORK, NORTH

CAROLINA, PENNSYLVANIA, TEXAS AND UTAH. "FEAST OR FAMINE" INTRODUCES

KIDS TO THE DISCUSSION OF POVERTY AND HUNGER, AND THE CHALLENGES FACED

BY MANY WORKING FAMILIES ACROSS THE UNITED STATES. CREATED BY HUNGER

101 IN 2003, HUNDREDS OF GAMES HAVE BEEN DISTRIBUTED THROUGHOUT THE

U.S. OVER THE YEARS AS AN EDUCATION AND OUTREACH TOOL.

KEY ACCOMPLISHMENTS FOR HUNGER 101 SPECIFIC TO FISCAL YEAR 2008-09 INCLUDED THE IMPLEMENTATION OF OUR MOST SUCCESSFUL YOUTH LEADERSHIP SUMMIT ON HUNGER AND POVERTY TO DATE, WITH 17 STUDENTS FROM 13 METRO ATLANTA HIGH SCHOOLS PARTICIPATING IN THE THIRD ANNUAL WEEKLONG EVENT. STUDENTS MET WITH POLICY LEADERS, TOURED THE STATE CAPITAL, AND VOLUNTEERED AT ACFB PARTNER AGENCIES GEORGIA AVE. COOPERATIVE: REFUGEE, RESETTLEMENT AND IMMIGRATION SERVICES OF ATLANTA; SAMARITAN HOUSE AND ATLANTA CHILDREN'S SHELTER. THIS WAS THE FIRST YEAR THAT A SPECIAL YOUTH SUMMIT BLOG WAS CREATED; EACH DAY STUDENTS AND STAFF POSTED THEIR THOUGHTS, RESPONSES TO THE DAY'S EXPERIENCES, AND PHOTOS TO A DAILY BLOG. THIS CREATED A MOVING NARRATIVE OF A TRANSFORMATIVE EXPERIENCE, AND CREATED A TERRIFIC OPPORTUNITY TO SHARE THE SUMMIT WITH THE LARGER COMMUNITY. IN ADDITION TO THE YOUTH SUMMIT, OTHER KEY ACCOMPLISHMENTS INCLUDED THE LAUNCH OF THE FIRST-EVER "TRAIN THE TRAINER" INITIATIVE TO MOVE HUNGER 101 PAST ITS "ONE-PERSON PROJECT" STATUS, EXPAND EFFORTS AND REACH MORE PEOPLE; AND THE CREATION OF A NEW HUNGER 101 POWERPOINT PRESENTATION THAT ENABLES THOSE WHO WISH TO EDUCATE THEIR COMMUNITIES

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TO DO SO WITHOUT SCHEDULING A FULL HUNGER 101 WORKSHOP.

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Name of the organization

ATLANTA COMMUNITY FOOD BANK

Employer identification number 58-1376648

ADVOCACY UNDERSTANDING THAT HUNGER AND POVERTY ARE PROFOUNDLY IMPACTED BY PUBLIC POLICY, ACFB WORKS TO PROVIDE THE COMMUNITY AND OUR POLICY-MAKERS WITH OVER THE YEARS, OUR ADVOCACY EFFORTS HAVE RELEVANT INFORMATION. CREATED AND MAINTAINED STATE FUNDING FOR SNAP (SEE SECTION ON STATE NUTRITION ASSISTANCE PROGRAM NEAR THE TOP OF THIS REPORT), COUNTY FUNDING FOR HUMAN SERVICES, AND NATIONAL SUPPORT FOR NUTRITION PROGRAMS IN FARM BILL REAUTHORIZATION, MAKING SUCH PROGRAMS AS THE FOOD STAMP PROGRAM MORE ACCESSIBLE TO PEOPLE IN NEED. KEY ACCOMPLISHMENTS IN THE AREA OF ADVOCACY SPECIFIC TO FISCAL YEAR 2008-09 INCLUDED ADVOCATING FOR RETAINING AND INCREASING THE FUNDING FOR THE EIGHT FOOD BANKS ACROSS THE STATE - AND FOR TAX ADVANTAGES FOR FOOD BANKS, AND NONPROFITS IN GENERAL - BEFORE THE GEORGIA GENERAL ASSEMBLY. OF COURSE, ACFB WORKED ON MANY OTHER LEGISLATIVE INITIATIVES WHICH WOULD HAVE EITHER POSITIVELY OR NEGATIVELY IMPACTED NONPROFIT ENTITIES. ONE OF THE MOST SIGNIFICANT ADVOCACY ENDEAVORS WAS SUCCESSFULLY ADVOCATING FOR THE RETENTION THE \$6 MILLION PROVIDED IN THE DEPARTMENT OF HUMAN RESOURCES' BUDGET FOR THE EIGHT FOOD BANKS' SNAP CONTRACT. IN ADDITION, HB 1110 WAS PASSED IN 2008 THROUGH THE EFFORTS OF REP. CHUCK MARTIN (R-ALPHARETTA). THE BILL EXTENDS A STATE SALES AND USE TAX EXEMPTION THROUGH JUNE 30, 2010 TO "QUALIFIED FOOD BANKS" WHEN THE BANKS PURCHASE ELIGIBLE FOOD AND BEVERAGES. PERDUE SIGNED HB 1110 INTO LAW ON MAY 14, 2008 AS ACT NUMBER 785, AND

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Schedule O (Form 990) 2008

IT TOOK EFFECT ON JULY 1,

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Employer identification number 58-1376648

ATLANTA COMMUNITY FOOD BANK

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS 452,408 POUNDS OF QUALITY GROCERY ITEMS WERE DONATED MONTHLY BACK TO ACFB FOR ADDITIONAL QUALITY CHECK AND EVENTUAL DISTRIBUTION THROUGH OUR PRODUCT RESCUE CENTER. DURING FISCAL YEAR 2008-09 5,428,905 POUNDS OF PRODUCT (VS. 5,462,165 THE PRIOR FISCAL YEAR) WERE RECEIVED, 5,142,051 (VS. 4,838,342) POUNDS, AN INCREASE OF 6% WERE SCANNED, AND 2,207,390 (VS. 1,914,690) POUNDS, AN INCREASE OF 15%, WERE KEPT FOR TRANSFER INTO PRODUCT RESCUE CENTER INVENTORY. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: THE MISSION OF ACFB'S KIDS IN NEED PROJECT IS TO PROVIDE LEARNING SUPPLIES FOR STUDENTS WHOSE ACADEMIC SUCCESS IS THREATENED BY POVERTY. IN OUR 4,200 SQUARE FOOT RETAIL SPACE, TEACHERS "SHOP" FOR BRAND NEW FREE SCHOOL SUPPLIES. TEACHER VISITS INCREASED TO A TOTAL OF 3,927 VISITS FROM 196 OF THE 250 SCHOOLS ELIGIBLE TO RECEIVE KIDS IN NEED PRODUCT. THIS RESULTED IN 373,116 POUNDS OF SUPPLIES BEING DISTRIBUTED TO 2,761 TEACHERS. MOST IMPORTANTLY 247,114 STUDENTS BENEFITED FROM PRODUCTS LIKE BINDERS, PAPER, NOTEBOOKS, PENS & PENCILS, BACKPACKS AND ART SUPPLIES, AN INCREASE OF 5% OVER THE PREVIOUS ACADEMIC YEAR. ADDITION, 53 ACFB PARTNER AGENCIES RECEIVED 37,249 POUNDS OF SUPPLIES FOR THEIR PROGRAMS FOR CHILDREN. SUPPLIES WERE ALSO DISTRIBUTED TO MORE THAN 800 TEACHERS AT A SUCCESSFUL BACK-TO-SCHOOL CELEBRATION IN CONJUNCTION WITH THE SPALDING/GRIFFIN SCHOOLS AND NORCOM, INC.

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2008
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Name of the organization

ATLANTA COMMUNITY FOOD BANK

ANOTHER SUCCESS FOR THE YEAR INCLUDED THE INTRODUCTION OF NEW HANDHELD
DEVICES FOR OUR ATLANTA'S TABLE PREPARED FOOD RESCUE PROJECT DRIVERS TO
RECORD PICK-UPS AND DELIVERIES OF FOOD DONATIONS. THIS WAS AN
EXCELLENT EXAMPLE OF PUTTING OUR STRATEGIC GOAL OF CONTINUOUS
IMPROVEMENT INTO ACTION. INCORPORATING THIS NEW TECHNOLOGY WILL REDUCE
PAPER WASTE AND STREAMLINE PROCEDURES. WE ANTICIPATE IT WILL ENABLE US
TO DECREASE ADMINISTRATIVE TRACKING TIME BY APPROXIMATELY 1,000 HOURS A
YEAR. DURING FISCAL YEAR 2008-09, ATLANTA'S TABLE DISTRIBUTED 389,900
POUNDS OF PREPARED AND/OR PERISHABLE FOOD TO PARTICIPATING AGENCIES, AN
INCREASE OF 12% OVER LAST YEAR. ADDITIONALLY, MEAT DISTRIBUTION TO
PARTNER AGENCIES NEARLY DOUBLED, GOING FROM DISTRIBUTION OF 53,848
POUNDS OF MEAT IN FISCAL YEAR 2007-08 TO 105,941 POUNDS OF MEAT IN
FISCAL YEAR 2008-09.
EXPENSES \$ 1278856. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 10: MEMBERS OF THE FINANCE COMMITTEE
WERE GIVEN A FULL COPY OF THE 990; A MEETING WAS HELD WITH THE FINANCE
COMMITTEE, THE CFO, AND THE AUDITOR TO REVIEW THE REPORT IN DETAIL. THE
FINANCE COMMITTEE THEN MADE A PRESENTATION AND RECOMMENDATION TO THE FULL
BOARD TO ACCEPT THE 990. AFTER THIS, THE 990 WAS FILED
FORM 990, PART VI, SECTION B, LINE 12C: ANNUALLY, ALL MEMBERS OF THE BOARD
ARE ASKED TO REVIEW THE POLICY AND UPDATE THEIR INFORMATION. ANY POTENTIAL
CONFLICTS ARE REPORTED TO THE CHAIR OF THE BOARD SO THAT MEMBERS WITH
CONFLICTS ARE NOT ALLOWED TO PARTICIPATE IN THE VOTE.
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Department of the Treasury Internal Revenue Service

Name of the organization

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Inspection

ATLANTA COMMUNITY FOOD BANK

FORM 990, PART VI, SECTION B, LINE 15: EXECUTIVE DIRECTOR COMPENSATION IS
REVIEWED BY THE EXEC COMMITTEE OF THE BOARD AND ANY CHANGES IN COMPENSATION
ARE AUTHORIZED BY THIS COMMITTEE AND COMMUNICATED IN WRITING TO THE CFO.
ALL COMPENSATION, INCLUDING ED COMPENSATION, IS MONITORED BY HR DIR, COO,
AND CFO. COMPARATIVE COMPENSATION SURVEYS ARE OBTAINED FROM FEEDING
AMERICA, THE GEORGIA CENTER FOR NONPROFITS, AND THE NONPROFIT TIMES.
SALARY RANGES ARE COMPARED TO THESE SURVEYS TO INSURE THAT COMPENSATION IS
IN LINE WITH OTHER LIKE ORGANIZATIONS.
IN JULY 2009, AN HR COMMITTEE OF THE BOARD WAS ESTABLISHED; ONE OF ITS
RESPONSIBILITIES WILL BE TO PROVIDE ADDITIONAL REVIEW AND OVERSIGHT OF OUR
COMPENSATION MANAGEMENT SYSTEM.
FORM 990, PART VI, SECTION C, LINE 19: 990S AND ANNUAL REPORT ARE
PUBLISHED ON OUR WEBSITE; CONFLICT OF INTEREST POLICY IS NOT PUBLISHED;
OTHER GOVERNING DOCUMENTS (I.E. BYLAWS, ETC) ARE NOT CURRENTLY AVAILABLE
FOR PUBLIC INSPECTION BUT WOULD BE PROVIDED UPON REQUEST
PART XI LINE 2C
THIS PROCEDURE HAS BEEN IN PLACE FOR A NUMBER OF YEARS.
SCHEDULE G, PART I, LINE 2B, COLUMN (V): FIRM IS PAID ON A MONTHLY BASIS
FOR DIRECT MAIL SOLICITATION
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Name of the organization

ATLANTA COMMUNITY FOOD BANK

FIRST LARGEST PROGRAM SERVICE ACCOMPLISHMENT
CONTINUED FROM PG 39
COMMUNITY GARDENS
THE COMMUNITY GARDENS PROJECT OF ACFB HELPS PLAN AND ORGANIZE GARDENS
TO HELP BUILD STRONGER COMMUNITIES ONE GARDEN AT A TIME. WITH MORE THAN
140 COMMUNITY, THERAPY, EDUCATION AND DONATION GARDENS IN THE METRO
ATLANTA AREA, THE EFFORT IS AN ONGOING, YEAR-ROUND PROJECT THAT
EMPOWERS PEOPLE TO SUPPLEMENT THEIR FOOD SUPPLY BY GROWING IT
THEMSELVES AND/OR SHARING SOME OF THEIR ABUNDANCE WITH OTHERS. DURING
FISCAL YEAR 2008-09, THERE WERE 22 GARDENS THAT WERE EITHER BRAND NEW
EFFORTS, EXPANDED OR WERE RESTARTED AFTER BEING ABANDONED. TWO NEW
REFUGEE/IMMIGRANT GARDENS WERE STARTED AND TWO MORE WERE IN PROCESS AT
THE END OF THE YEAR.
KEY ACCOMPLISHMENTS FOR COMMUNITY GARDENS SPECIFIC TO FISCAL YEAR
2008-09 INCLUDED PUTTING 4,000 VOLUNTEER HOURS INTO AREA COMMUNITY
GARDENS AND EXPANDING INTO HALL, CHEROKEE, GWINNETT AND NEWTON
COUNTIES. ADDITIONALLY, PLANT-A-ROW-FOR-THE- HUNGRY INCREASED
DONATIONS BY 60% FOR A TOTAL OF 49,977 POUNDS EVEN THOUGH OUR MAJOR
PLANT A ROW PARTNER, THE ATLANTA JOURNAL AND CONSTITUTION (AJC), LOST
THE ABILITY TO PRINT FEATURE STORIES DUE TO REORGANIZING. THE AJC WAS,
HOWEVER, ABLE TO INCORPORATE PRO BONO ADS FOR THE CAMPAIGN WHICH
UNDOUBTEDLY ADDED TO ITS SUCCESS.

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Name of the organization

GEORGIA MOUNTAIN FOOD BANK

ATLANTA COMMUNITY FOOD BANK

IN PART DUE TO THE SUCCESS OF OUR DELIVERIES TO THE GAINESVILLE AREA,
WE PLAYED A KEY ROLE IN THE LAUNCH OF A NEW FOOD BANK SERVING THE
GAINESVILLE AREA. THE GEORGIA MOUNTAIN FOOD BANK (GMFB) BECAME AN
AFFILIATE OF ACFB, AND IN FISCAL YEAR 2008-09, WE HELPED GMFB
OFFICIALLY BEGIN COLLECTING SURPLUS FOOD AND GROCERY PRODUCTS FOR
DISTRIBUTION TO NONPROFIT PARTNER AGENCIES SERVING THE HUNGRY IN THE
GEORGIA MOUNTAIN REGION, INCLUDING DAWSON, FORSYTH, HALL, LUMPKIN AND
UNION COUNTIES. IN FISCAL YEAR 2008/09 GMFB DISTRIBUTED 7,646 POUNDS OF
FOOD AND GROCERY PRODUCTIN ADDITION TO FOOD THAT WAS DISTRIBUTED
THROUGH ACFB PRODUCT DELIVERIES TO GAINESVILLE - 357,590 POUNDS IN
2008-09 COMPARED TO 277,875 POUNDS IN 2007-08, A 28% INCREASE.
HIGHLIGHTS FOR GMFB DURING THIS YEAR INCLUDED SECURING AN IN-KIND
DONATION OF WAREHOUSE SPACE, DEVELOPING POLICIES AND PROCEDURES FOR THE
GMFB BOARD OF DIRECTORS, AND ADDING 12 NEW PARTNER AGENCIES LOCATED IN
THE FIVE COUNTY SERVICE AREA, FOR A TOTAL OF 26 AGENCIES BEING SERVED.
ACFB PARTNER AGENCIES
IN FISCAL YEAR 2008-09, ACFB DISTRIBUTED 16,749,037 POUNDS OF FOOD AND
GROCERY PRODUCTS TO ITS PARTNER AGENCIES WITH FOOD AND MEAL PROGRAMS -
AN INCREASE OF 12% OVER THE PRIOR YEAR. MORE THAN HALF OF ACFB PARTNER
AGENCIES ARE FAITH-BASED ORGANIZATIONS REPRESENTING A VARIETY OF FAITH
TRADITIONS. MANY OF THESE AGENCIES OPERATE FOOD PANTRIES THAT SERVE THE
WORKING POOR. APPROXIMATELY HALF OF ACFB PARTNER AGENCIES OFFER ON-SITE
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ATLANTA COMMUNITY FOOD BANK

FEEDING PROGRAMS. PARTNER AGENCIES PROVIDING ON-SITE MEALS INCLUDE
HOMELESS SHELTERS, COMMUNITY KITCHENS, SUMMER CAMPS, AFTER-SCHOOL
PROGRAMS, DAYCARE CENTERS, SENIOR CITIZEN CENTERS, REHABILITATION
FACILITIES, AND MORE. AN AVERAGE OF 1,523,241 PEOPLE WERE SERVED AT
ON-SITE PROGRAMS AND APPROXIMATELY 1,483,869 HOUSEHOLDS RECEIVED FOOD
ASSISTANCE THROUGH ACFB PARTNER AGENCIES IN FISCAL YEAR 2008-09. THE
AVERAGE NUMBER OF PEOPLE SERVED MONTHLY THROUGH OUR PARTNER AGENCIES
WAS 250,590.
KEY ACCOMPLISHMENTS FOR ACFB'S WORK WITH PARTNER AGENCIES SPECIFIC TO
FISCAL YEAR 2008-09 INCLUDED COMPLETING A HUNGER SURVEY COMPRISED OF 50
SITE VISITS AND 415 CLIENT INTERVIEWS TO DETERMINE AGENCY CAPACITY AND
NEEDS DURING THE ECONOMIC DOWNTURN. TRENDS REPORTED IN THE SURVEY
INCLUDED MUCH HIGHER DEMAND OVERALL AND LARGE NUMBERS OF "NEW" CLIENTS
WHO HAVE NEVER BEFORE HAD TO SEEK FOOD ASSISTANCE. MOST AGENCIES
REPORTED THAT THEY HAVE BEEN ABLE TO MEET THE CHALLENGE, THOUGH THERE
ARE MORE DEMANDS ON THEIR FINANCES AND FOOD PANTRY SPACE. ANOTHER KEY
ACCOMPLISHMENT IN AGENCY RELATIONS INCLUDED STREAMLINING AND EXPEDITING
OUR APPLICATIONS PROCESS WITH NEW RECORDING PROCEDURES AND MORE TEAM
MEMBERS CONDUCTING INITIAL INTERVIEWS.
VOLUNTEERISM AT ACFB
VOLUNTEERS FROM ALL SEGMENTS OF OUR COMMUNITY (CORPORATE, INDIVIDUALS,
FAITH-BASED, SCHOOLS, CIVIC GROUPS, GOVERNMENT AND COURT-APPOINTED
COMMUNITY SERVICE VOLUNTEERS) MAKE A HUGE CONTRIBUTION TO THE WORK OF
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

AUT VILLE COMMINATA EOOD BANK

Employer identification number 58-1376648

AIDMIN COMMITTION DANK
THE FOOD BANK. IN 2008-09, APPROXIMATELY 21,983 (14,818 -
DISTRIBUTION; 2,665 - HUNGER 101 EDUCATION; 3,989 - ADVOCACY-ATLANTA
PROSPERITY CAMPAIGN; 70 - HUNGER WALK; 441 - EVENTS & PROMOTIONS)
VOLUNTEER VISITS - A 14% INCREASE OVER 19,133 VISITS LAST FISCAL YEAR.
THESE VOLUNTEERS CONTRIBUTED OVER 72,021 HOURS OF LABOR TO THE VARIOUS
PROGRAMS RELATED TO OUR CORE BUSINESS WITH THE BULK OF THOSE HOURS
UTILIZED IN OUR PRODUCT RESCUE CENTER. THIS IS A 22% INCREASE OVER THE
59,186 HOURS OF LABOR CONTRIBUTED BY THIS SECTION OF VOLUNTEERS LAST
FISCAL YEAR. AN ADDITIONAL 15,554 HOURS OF VOLUNTEER SERVICES WERE
CONTRIBUTED THROUGHOUT THE REST OF THE ORGANIZATION FROM OFFICE
ASSISTANCE TO HELPING IN THE COMMUNITY GARDENING PROGRAM. THIS SECTION
OF VOLUNTEER HOURS WENT DOWN SLIGHTLY (BY 7%) COMPARED TO THE 16,785
HOURS CONTRIBUTED LAST FISCAL YEAR COLLECTIVELY, THE FINANCIAL IMPACT
OF ACFB VOLUNTEER EFFORTS WAS \$788,179 WHEN CALCULATED AT \$9.00 PER
HOUR, AN OVERALL 15% INCREASE COMPARED TO LAST FISCAL YEAR'S \$683,743
IMPACT.
KEY ACCOMPLISHMENTS IN ACFB'S VOLUNTEER DEPARTMENT SPECIFIC TO FISCAL
YEAR 2008-09 INCLUDED FINALIZING AND UTILIZING AN ONLINE SCHEDULING
SYSTEM FOR PRC SHIFTS THROUGH VOLUNTEERHUB.COM, AND CREATING MORE
PERSONALIZED VOLUNTEER RECOGNITION OPPORTUNITIES WITH OUR VOLUNTEER
APPRECIATION LUNCH SERIES. WE BEGAN INVITING SELECTED VOLUNTEERS AND
THE STAFF MEMBERS WHO WORK MOST CLOSELY WITH THEM TO LUNCH IN ACFB'S
INDUSTRIAL KITCHEN - IT'S BEEN A GREAT OPPORTUNITY TO SHOW OUR

ACFB'S VOLUNTEER DEPARTMENT HAS BEEN BLESSED WITH AN ABUNDANCE OF

APPRECIATION IN A SMALL GROUP SETTING. AMIDST HARSH ECONOMIC TIMES,

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 832211 12-18-08

Schedule O (Form 990) 2008

(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

ATLANTA COMMUNITY FOOD BANK

Employer identification number
58-1376648

ADDITIONAL VOLUNTEERS, SEVERAL OF WHOM LOST JOBS AND WANTED TO GIVE OF
THEIR TIME AND TALENT WHILE THEY WERE OUT OF WORK AND SEARCHING FOR
THEIR NEXT JOB. WE HAVE ALSO ENJOYED GREAT SUCCESS IN THE PAST FISCAL
YEAR WITH OUR AMBASSADOR VOLUNTEER PROGRAM - THESE EXTRAORDINARY
VOLUNTEERS HAVE TAKEN THE INITIATIVE TO GO THROUGH A SPECIAL
ORIENTATION TO LEARN MORE ABOUT ACFB SO THEY CAN REPRESENT US AT
VOLUNTEER FAIRS AND OTHER OUTSIDE OPPORTUNITIES.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

Open to Public Inspection

OMB No 1545-0047

Employer identification number 58-1376648

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

ATLANTA COMMUNITY FOOD BANK

Direct controlling Direct controlling entity entity End-of-year assets 28,334. 1,507,485. status (if section Public charity 501(c)(3)) Œ Total Income **Exempt Code** section 9 <u>e</u> Legal domicile (state or Legal domicile (state or foreign country) foreign country) GEORGIA Primary activity Primary activity <u>@</u> LESSOR Identification of Related Tax-Exempt Organizations Identification of Disregarded Entities Name, address, and EIN Name, address, and EIN of related organization of disregarded entity 970 JEFFERSON LLC - 58-1376648 30318 970 JEFFERSON ST. ATLANTA, GA Parti Part ⊞

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

Schedule R (Form 990) 2008

Page 2

Schedule R (Form 990) 2008 ATLANTA COMMUNITY FOOD BANK

Part III Identification of Related Organizations Taxable as a Partnership

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II. III. or IV		Yes	٥ ک
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		<u> </u>	ŀ
a Receipt of (i) interest (ii) annuties (iii) royalties (iv) rent from a controlled entity		1a	
b Gift, grant, or capital contribution to other organization(s)		1b	
c Gift, grant, or capital contribution from other organization(s)		10	
d Loans or loan guarantees to or for other organization(s)		14	1
e Loans or loan guarantees by other organization(s)		16	•
		`	-
f Sale of assets to other organization(s)		14	٠
g Purchase of assets from other organization(s)		19	
		+	
i Lease of facilities, equipment, or other assets to other organization(s)		ij.	
j Lease of facilities, equipment, or other assets from other organization(s)		1;	
k Performance of services or membership or fundraising solicitations for other organization(s)		¥	
I Performance of services or membership or fundraising solicitations by other organization(s)		11	
m Sharing of facilities, equipment, mailing lists, or other assets		1 3	I
n Sharing of paid employees		1n	
			1
o Reimbursement paid to other organization for expenses		10	
p Reimbursement paid by other organization for expenses		1p	1
			1
q Other transfer of cash or property to other organization(s)		19	
r Other transfer of cash or property from other organization(s)		1.	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	saction thresholds.		
₹)	(8)	Q	
Name of other organization(s)	Transaction	Amount involved	
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(4)			-
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(9)			I
832163 12-23-08 55	Schedul	Schedule R (Form 990) 2008	ෂ

Schedule R (Form 990) 2008 ATLANTA COMMUNITY FOOD BANK

Part VI Unrelated Organizations Taxable as a Partnership

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

(A)	(B)	(0)	(Q)	(E)	Ð	(5)	£
Name, address, and EIN	Primary activity	Legal domicile	Are all partners section 501(c)(3)	-	Dispropor- tionate	Code V-UBI	General or managing
of entity		(state or foreign country)	Yes No	year assets		of Schedule K-1 (Form 1065)	Yes No
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