

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



As Amended Return of Organization Exempt From Income Tax

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

OMB No 1545 0047 2009

Department of the Treasury Internal Revenue Service

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

open to Fubile inspection

	For t	he 2009 calen	dar year,	or tax year begir	ning	<u> </u>	2009, a	nd endin	g			,		
		ıf applicable		C Name of organiz						D Employ	er Iden	tification	n Number	
	Ad	ddress change	Please use IRS label	Feeding A	merica Ta	mpa Bay, In	c.			59-2	<u> 211</u> 6	<u>576</u>		
	X N	ame change	or print or type.			nail is not delivered to s) Room/si	uite	E Telepho	ne num	ber		
	\blacksquare	itial return	See specific	4702 Trans	sport Dri	ve, Buildin	ıg 6			(813	3) 2	54-	1190	
	\blacksquare	ermination	Instruc- tions	City, town or co				IP code + 4						
	=	mended return		Tampa			FL 3	33605-	5940	G Gross re	eceints	\$ 20.	278,483	_
	$\overline{}$	pplication pending	F Name a	and address of princip	al officer			ī		a group retur			Yes	X No
	ш.,	ppeat.on pottering		a Rogers 4702 Tr		Tampa	मा. ३	33605		affiliates incl			Yes	No
ī	Tax	c-exempt statu			(insert no)	4947(a)(1)		527	If 'No,'	attach a list	(see in	struction	ns)	_
÷		•		dingamerica			<u> </u>		H(c) Group	exemption nu	ımber I	-		
K		n of organization	X Corpor		Association	Other ►	I vos		ion 198				micile FL	
	idl	Summa		ation Trust	Association	Other	= 100	ar or r ormat	1011 130		tate of	icgai uu	micie 12	
No Mo	1			anization's miss	ion or most sig	nificant activities	The	orga	nizati	on was	es	tabl	ished	
•	`					bute salvag						= ====		
ĕ				n serve the										
Activities & Governance														
o e	2	Check this bo	x ►	if the organization	on discontinued	l its operations or	dispose	d of more	e than 25	% of its as	sets.			
ر مع	3			bers of the gove							3	16		
စ္စ	4					ing body (Part VI,	line 1b))			4	16		
ŧ	5		•	yees (Part V, line	•						5	34		-
₹	6			eers (estimate if		lastrone (C) una	10				6	6,3	40	
•	I .	-				Icolumn (C), ine	12				7a 7b			0.
	B	ivet unirelated	business	taxable income	irom Form 990	7-1, IIIIe 34					70			
Revenue	_ ا									Prior Year			Current Ye	
j ē	ı		-	its (Part VIII, line	•				17	7,024,2		-	19,276,	
Ē	9	-		ue (Part VIII, line						584,9			5/9,	184.
-4 æ	10 11		-	art VIII, column (/		•					92.	 	00	3. 200.
	12					9c, 10c, and 11e) art VIII, column (A	N Jupo 1	12)	15	7,622,7	85.	-	19,953,	
<u>. </u>	13			ounts paid (Part			1), IIIIC	12)	+ '	,022,7	,	 	<u>.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u> </u>
	14			· · · · · · · · · · · · · · · · · · ·										
岀	l			members (Part I)			E 1	10)		660,2	74		016	779.
Z	l		-	• •		t IX, column (A),	iiries 5-i	10)		660,2	/4.		910,	113.
	l			ng fees (Part IX,		DEOF			6 - 3 C. 111	SOLITAN SURING	368000	2000000		
SECANNED	b	Total fundrais	sing exper	nses (Part IX, co	lumn (D), line	25YEULIV	<u> </u>	,469.	20 A	1	3.75%		212	
ďΪ	17	Other expens	ses (Part I	X, column (A), lı	nes 11a-11 <u>cd</u> , 1	1f-24f)		ol	15	5,599,0	79.	:	18,764,	065.
	18	Total expense	es Add Iır	nes 13-17 (must	equal PartiX	colများက (A _A , မျာဇ္ ဥ	5).	ŘΙ	16	5,259,3	53.	:	19,680,	844.
	19	Revenue less	expense	s Subtract line 1	8 from lipeப்	0C1 03 20	77	RS-OSC	1	1,363,4	17.		273,	090.
Assats or Balances						000=	الــــا		Begi	nning of Y	ear		End of Yea	ar
a a	20	Total assets	(Part X, In	ne 16)	ļ	UGDEN.	UT I	1		1,934,2			2,313,	
84	21	Total liabilitie	s (Part X,	, line 26)		The second second				87,1	40.		193,	609.
\$2	22	Net assets or	fund bala	ances Subtract I	ine 21 from line	e 20				L,847,1	.32.		2,120,	222.
Pa	TAIL		ure Blo						<u> </u>			•		
<u> </u>		Under penaltie	of periury.	I declare that I have	examined this return	n, including accompany er) is based on all infor	ına schedu	les and stat	tements, and	to the best o	of my kr	nowleda	e and belief, it	t is
		true, correct.	nd complete	Declaration of prepa	irer (other than offic	er) is based on all'infor	mation of	which prepa	rer has any	knowledge	1			
Sig	ın	 		16050	P					9/20	110			
He		Signature	of officer			•			Da	ate				
		▶ Patr	icia E	. Rogers					Exec	utive 1	Dire	ecto	r	
			rint name an											_
				<u> </u>			Dat	e	C	heck if	Ę	reparer	's identifying r	number
Pa	id			(u.)ou	CM			,	s	elf- mployed		see 111511	ructions)	
Pre	e-	Preparer's signature	► Tim	othy W. Do			9	1/21/4	ľ					
	rer's	Firm's name (ell & Pere		-		/ / *	-	-				
Us		yours if self-		East Kenn		ward Cuit	e 195	0		ın ►				
On	ııy	employed), address, and			eda ponte						101	31 1	221 241	1
Mar	, tha !	ZIP + 4	Tam		chown obove?	(see instructions		<u>-5865</u>	<u> </u>	hone no	(81	3) <u>2</u>	221-241 Yes	No
_				<u> </u>		`		n.c		TEE 40101	07/5			
ΒA	M POI	rnvacy Act a	ano raper	work Reduction	ACT NOTICE, SE	e the separate ins	structioi	115.		TEEA0101	07/20	J/U 9	Form 990	. (∠UUY)

Form	990 (2009) Feeding America Tampa Bay, Inc. America	59-2	L1657	6	_ !	Page 2
Par	Statement of Program Service Accomplishments					
1	Briefly describe the organization's mission.					
	The organization was established to collect, warehouse and distri	bute				
	salvageable food to social agencies which serve the needy.					
	,					
2	Did the organization undertake any significant program services during the year which were not listed on the	nrior				
_	Form 990 or 990-EZ?	prior		Yes	x	No
	If 'Yes.' describe these new services on Schedule O		Ш	163	A	140
•		- 2		V	T.	Ma
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	5′	Ш	Yes	X	No
_	If 'Yes,' describe these changes on Schedule O					
4	Describe the exempt purpose achievements for each of the organization's three largest program services by and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and all	expenses ocations	to other	on 501 rs the	(c)(3)	
	expenses, and revenue, if any, for each program service reported	ocations		0, 1110	total	
					<u> </u>	01 \
4 a	(Code) (Expenses \$ 19,303,344. including grants of \$0.) (Re					
	Operate a food bank that receives, stores and distributes donated	food	<u>to</u> _			
	many charities that give/serve food to needy people.					
4t	(Code) (Expenses \$ 102,783. including grants of \$ 0.) (Re					
	Kids Cafe serves hot meals to young children identified as being					
	especially at risk. Meals are served in the late afternoon.					
						
40	: (Code) (Expenses \$ including grants of \$) (Re	evenue	\$)
		. _ =				
			:			
		- -				
						-
4 d	Other program services (Describe in Schedule O)					
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 19,406,127.					

Pai	Checklist of Required Schedules	<u> </u>	<u>`</u>	ago e
			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	,	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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		х
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 similar funds or 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		<u>x</u>
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
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		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII		A 10 0 1	
	Point the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			;
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X	Potal	Mark.	
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	х	
12	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No		.	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		х
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 located outside the United States? If 'Yes,' complete Schedule F, Part III	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	х	

20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		_x
24 8	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(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		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		х
ŀ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 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		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		x
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		7.5	
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
(An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		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		х
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	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13) $^{\circ}$ 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? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O	38	x	
		_		

rar	t vigati Statements Regarding Other IRS Filings and Tax Compliance			
		·	Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	69	(1945.7) 200	
t	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	257/20
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a 34	e îkir		
2t	olf at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	فلافتعا	نفسنا	. 180ea)
3 <i>a</i>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
t	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	olf 'Yes,' enter the name of the foreign country		ings.	100
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	<u>inol</u>	i Žillii	7
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		x
t	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		х
C	or If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	<u>5c</u>		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		х
t	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).	4	1	
a	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
Ł	o If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		х
	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	() () ()		
•	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X.
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		ļ
ŀ	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	300 ME (/)	17 N/
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	£	E 23	
	a Did the organization make any taxable distributions under section 4966?	9a		х
	Did the organization make any distribution to a donor, donor advisor, or related person?	9b		х
	Section 501(c)(7) organizations. Enter		72.4	7.
a	Initiation fees and capital contributions included on Part VIII, line 12			
t	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
-	Gross income from other members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	<u> </u>
t	of Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		. ' 9.4	Sain 1

BAA

Form **990** (2009)

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A.	Governing	Body ar	id Man	ageme	nt												
									_								Yes	No
1 a	Enter the	number of vot	ıng membe	rs of the	governin	ig body	,					_	16				**************************************	
b	Enter the	number of vot	ıng membe	rs that a	re ındepe	endent						1 b	16			- 4,0		[· ·
2	Did any of officer, dir	fficer, director, rector, trustee	trustee, or or key emp	key emi	ployee ha	ave a fa	amıly	relation	ship oi	r a busine	ess rela	ations	hip wi	th any	other	2	<u> </u>	X
3	Did the or of officers	ganization del , directors or t	egate contr	ol over n	nanagem plovees to	ent dui	ties ci nagen	ustomar nent co	ıly per mpany	formed by	y or un	nder th	ne dire	ct sup	ervision	3		х
4		ganızatıon ma			•		-				•					4		X
	since the	prior Form 990	was filed?	,														
5	Did the or	ganization bed	come aware	during t	the year	of a ma	aterial	diversi	on of t	he organi	ızatıon'	's ass	ets?			5		<u>x</u>
6	Does the	organızatıon h	ave membe	ers or sto	ockholder	s?										6		X
7 a	Does the governing	organization h j body?	ave membe	ers, stock	kholders,	or othe	er per	sons wh	no may	elect on	e or m	ore m	embe	rs of th	ne	7a		x
b	Are any d	lecisions of the	governing	body su	bject to a	approva	al by r	nember	s, stoc	kholders,	, or oth	ier pei	rsons?	•		7b	I GOLDAN TANAN	X
8	Did the or the follow	rganization cor ring	ntemporane	ously do	cument t	he mee	etings	held or	writte	n actions	undert	taken	durıng	the ye	ear by			
а	The gover	rning body?														8a	х	
b	Each com	nmittee with au	ithority to a	ct on bel	nalf of the	e gover	rnıng l	body?								8ь		x
9	ls there a organizati	ny officer, dire ion's mailing a	ctor or trus ddress? <i>If</i>	tee, or ke	ey emplo ovide the	yee lis names	ted in	Part VI address	II, Sect	tion A, wh S <i>chedule</i>	ho canr <i>O</i>	not be	reach	ned at	the	9		x
Sec	tion B.	Policies	(This Se	ction B	reques	sts inf	forma	atıon a	about	policies	s not	requ	ured i	by the	e Intern	al		
Reve	enue Code)															1	
																· · ·	Yes	No
10 a	Does the	organization h	ave local c	napters,	branches	s, or aff	filiates	s ⁷								10 a	Х	-
	and branc	oes the organi ches to ensure	their opera	ations are	e consiste	ent with	n thos	e of the	organ	iization?						10 b		
		rganization pro							_	_	-	efore	filing t	he forr	m [?]	11	X	
		ın Schedule O	-		•		-				m 990						:	
		organization h					-	-								12a	Х	<u> </u>
	to conflict			,	, ,	•				•			J			12b	х	
	Schedule	organization re O how this is	done					force co	mpliar	nce with t	he poli	icy? If	f 'Yes,	descr	ibe in	12c	t	
		organization h			•	-				_						13	X	
		organization h								•						14	X	122 r.
		rocess for dete comparability (nclude e delibe	e a review eration ar	and a nd deci	ipprov ision?	al by i	ndepe	ndent	100	3 /2,	
	_	nization's CEO			-	nanage	ement	official								15a		
b		cers of key em		•		-11-1	- 0 4	.	A	>						15 b	X	Z25 WZ-1
		line 15a or 15	•	•			•			•								
16 a		ganization inv ing the vear?	est in, cont	ribute as	sets to, o	or parti	cipate	in a jo	ınt ven	iture or si	ımılar a	arrang	jemen	t with a	a taxable	16 a		X
h	If 'Yes ' h	as the organiz	ation adopt	ed a writ	lten nolic	v or nr	ocedu	re requi	ırına th	ne organiz	zation f	to eva	duate	its nari	ticination	11/3	194	
_	in joint ve	as the organizenture arranger	nents unde	r applica	ble feder	ral tax	law, a	ind take	n step	s to safe	guard t	the or	ganiza	tion's	exempt	166		*****
Sac		h respect to su Disclosure		ments												16b		<u> </u>
		tates with which		this For	m 990 ie	require	ed to 1	he filed	▶ 17	lorid								
	Section 6	104 requires a	n organizai	tion to m	ake its F	orms 1	023 (or 1024	ıf appl		_ -	 nd 990	– – –)-T (50	1(c)(3	s only) a	– – – - vaılable	for pu	nplic
	<u> </u>	n Indicate how website	· —	these av other's we		Uneck a		it apply Upon re										
19	Describe i statement	ın Schedule O ts avaılable to	whether (a the public	nd if so,	how) the	organ	ızatıoı	n makes	s its go	overning (docume	ents, d	conflic	t of ınt	erest poli	cy, and	financ	cial
20	State the	name, physica	al address,	and tele	phone nu	ımber d	of the	person	who po	ossesses	the bo	oks a	nd rec	ords o	f the orga	nızatıor	1	
•	Patric	ia E. Ro	gers_	4702	Trans	port :	<u>Dri</u> v	e_Ta	mpa		<u>F</u>	L_	33609	5-5940	(813)_:	254-	1190
														_		_		

As Amended

Form 990 (2009) Feeding America Tampa Bay, Inc.

BAA

59-2116576

Page 7

Form 990 (2009)

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- 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	compens	ate an	y cı	ırrer	nt of	ficer, (direc	tor, or trustee.		
(A)	(B) (c) Average Position (check all that apply)							(D)	(E)	(F)
Name and Title	Average hours per week	or director	institutional trustee		a Key employee	pp High est מאתקפרוsated at employee	S Forner	Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Patricia E. Rogers										
Executive Director	40.00	х		X				81,000.	0.	0.
Myrlene Harden Company Financial Officer	40.00			х				54,987.	0.	0.
See Attached										
<u>N/A</u>	0.00	х						0.	0.	0.
										,
	-									
	:									

TEEA0107 11/10/09

Forn	990(2009) Feeding America Tampa Bay	y, In	c.							<u>59-211657</u>	
Pa	rt VIII Section A. Officers, Directors, Trus	tees, k	(ey	En	ıplo	ye	es,	an	d Highest Con	pensated Emp	loyees (cont.)
	(A)	(B)				c)			(D)	(E)	(F)
	Name and Title	Average hours per week		_	Check Officer				Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation
		nours per week	ividual t	Institutional trustee	cer	Key employee	Highest compensat employee	mer	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
			rustee	trustee		yee	npensat				o garinzation o
				L"			e e				
<u>-</u> - ·				_							
·		-									
	- 	=									
						-			:	- v · · · · · · · · · · · · · · · · ·	
		-								-	
						 					
								-			
			_		-					-	
	Total							_	135,987.	0.	0
2	Total number of individuals (including but not limited from the organization 0	to thos	e lisi	ted	abov	/e) \	who	rece	eived more than \$	100,000 in reportab	le compensation
		-									Yes No
3	Did the organization list any former officer, director on line 1a? <i>If 'Yes,' complete Schedule J for such in</i>	dıvıdual		-		-					3 X
4	For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th individual	ortable an \$150	com 0,000	ipen)? //	satıı f'Ye	on a	and o omp	otne elete	r compensation fro Schedule J for su	om ch	4 X
5	Did any person listed on line 1a receive or accrue correndered to the organization? If 'Yes,' complete School	mpensa edule J	ation for s	froi	m ar per	ny u s <i>on</i>	nrel	ated	organization for s	ervices	5 X
Sect	ion B. Independent Contractors										
1	Complete this table for your five highest compensate compensation from the organization	d indep	ende	ent o	conti	ract	ors t	that 	received more tha	n \$100,000 of	
	(A) Name and business addres	s							(B) Description () of Services	(C) Compensation
											
2	Total number of independent contractors (including t	nut not l	ımıte	ed to	tho	ا می	ister	d ah	ove) who received	more than	
_	\$100,000 in compensation from the organization			.u ((10	.JU 1	.5151	u uu	oro, and received	oro didii	

Pai	t∜l	II Statement of Revenue		_			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
RANTS	b	Federated campaigns 1a Membership dues 1b	7,990.				
ONS, GIFTS, G SIMILAR AM	d e	Fundraising events Related organizations Government grants (contributions) 1e	28,741.				
CONTRIBUTI	g	·	19,157,979. 18,526,615.	19,276,547.			
-B			Business Code	£	The state of the s	A A A	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
-VEN	2a	Shared maintenance fees	811000	579,184.	579,184.		0.
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	b d e						
PROG		All other program service revenue Total. Add lines 2a-2f	<u> </u>	579,184.			
	3 4 5	Investment income (including dividends other similar amounts) Income from investment of tax-exempt	•	3.	3.	0.	0.
	6a b	Royalties (i) Real Gross Rents Less rental expenses Rental income or (loss)	(II) Personal				
	7a b	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(ii) Other				
		Gain or (loss)		<u> </u>	<u> </u>	2	<u> </u>
OTHER REVENUE	8a	Net gain or (loss) Gross income from fundraising events (not including \$ 81,837. of contributions reported on line 1c) See Part IV, line 18 Less direct expenses	a 219,437. b 177,896.				
6		Net income or (loss) from fundraising e		41,541.	41,541.	0.	0.
	9a	Gross income from gaming activities See Part IV, line 19	a 98,584.		Port Age		建
		Less direct expenses	b 46,877.	<u></u>		The Allen	
	С	Net income or (loss) from gaming active	rities -	51,707.	51,707.	0.	0.
		Gross sales of inventory, less returns and allowances Less cost of goods sold	a 104,068. b 99,776.				
		Net income or (loss) from sales of inve		4,292.	4,292.	0.	0.
		Miscellaneous Revenue	Business Code		<i>i.</i>	£. 24	
	11 a	Other revenue	445100	660.	660.	0.	0.
	b						
	С				·		
	d	All other revenue					
		Total. Add lines 11a-11d	•	660.	 		· 3" §
	12	Total revenue. See instructions	<u> </u>	19,953,934.	677,387.	0.	<u> </u>

	990 (2009) Feeding America Tamp			59-211	L 6576 Page 1
rar	t IX Statement of Functional Expen	ses 3) and 501(c)(4) organiz	ations must complete a	Il columns.	
	All other organizations must com				d (D).
Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to 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			Ton Company Marine	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	135,987.	107,294.	19,990.	8,703
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	685,437.	540,228.	100,985.	44,224
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	36,264.	28,587.	5,340.	2,337
10	Payroll taxes	59,091.	46,581.	8,704.	3,806
11	Fees for services (non-employees)				
а	Management				
	Legal				
	: Accounting				
	Lobbying			.505887#	
	Prof fundraising svcs See Part IV, In 17		6 There I The	Physical Control	
	Investment management fees				
_	Other	4,097.	3,229.	603.	265
	Advertising and promotion				
13	Office expenses	173,965.	144,760.	23,204.	6,001
14	Information technology	45,820.	44,596.	979.	245
15	Royalties	207 421	212 225	12 405	ļ
16	Occupancy	225,431.	212,026.	13,405.	0
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials	7,193.	372.	5,457.	1,364
19	Conferences, conventions, and meetings				
20	Interest	802.	0.	802.	0
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	40,389.	39,225.	1,164.	C
23	Insurance	1,296.	1,037.	207.	52
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			aroa a a a a a a a a a a a a a a a a a a	
_	below)	25 122	20 143	3 001	000
	Membership_dues Outilities	25,132. 34,203.	20,143. 32,171.	3,991. 2,032.	998
	Transportation	134,576.	134,576.	0.	0
	Donated goods distributed	18,044,428.	18,044,428.	0.	0
f	All other expenses	_ 26,733.	6,874.	5,385.	14,474
25	Total functional expenses. Add lines 1 through 24f	19,680,844.	19,406,127.	192,248.	82,469
	Joint costs. Check here ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	, ,	, = : 3, == : 1		
ΔΔ	campaign and fundraising solicitation	<u> </u>	<u> </u>		Form 990 (200

			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	789,429.	1	656,521.
	2	Savings and temporary cash investments	104,575.	2	140,662
	3	Pledges and grants receivable, net	35,000.	3	5,000
	4	Accounts receivable, net	- ,	4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))		13 × 12 ,	Magazin Marini 1903
_		and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
Š	7	Notes and loans receivable, net		7_	
A S E T S	8	Inventories for sale or use	878,083.	8_	1,267,021
S	9	Prepaid expenses and deferred charges	10,477.	9_	12,331
	10 a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 500,321.			
	b	Less: accumulated depreciation. 10b 277,525.	101,916.	10 c	222,796
	11	Investments — publicly-traded securities		11	
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11	· · · · · · · · · · · · · · · · · · ·	13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	14,792.	15	9,500
	16	Total assets Add lines 1 through 15 (must equal line 34)	1,934,272.	16	2,313,831
	17	Accounts payable and accrued expenses	1,239.	17	100,400
	18	Grants payable		18	
	19	Deferred revenue		19	
L	20	Tax-exempt bond liabilities		20	
À B	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
L	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II	但是 我 看着他		
i		of Schedule L		22	
E S	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	32,850.	24	10,000
	25	Other liabilities Complete Part X of Schedule D	53,051.	25	83,209
	26	Total liabilities. Add lines 17 through 25	87,140.	26	193,609
N E T		Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34.			
A	27	Unrestricted net assets	1,078,702.	27	1,614,173
<u>S</u>	28	Temporarily restricted net assets	768,430.	28	491,049
Ī	29	Permanently restricted net assets	·	29	15,000
R F.		Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 30 through 34.			
FUND	30	Capital stock or trust principal, or current funds	A334-1	30	
	31	Paid-in or capital surplus, or land, building, and equipment fund		31	_
Ã	32	Retained earnings, endowment, accumulated income, or other funds	-	32	-
Ņ	33	Total net assets or fund balances.	1,847,132.	33	2,120,222
BALANCES	34	Total liabilities and net assets/fund balances	1,934,272.	34	2,313,831
3A		Total nationes and het assets/fully balances	1,732,414.	, , , ,	Form 990 (2009

TEEA0111 01/30/10

As Amended

form 990 (2009) Feeding America Tampa Bay, Inc.	39-21103/0	Г	age 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other	1.34 ×		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.	**************************************		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		х
b Were the organization's financial statements audited by an independent accountant?	2 b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?	ght of the audit,	x_	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n and a second		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were consolidated basis, separate basis, or both	re issued on a		
X Separate basis Consolidated basis Both consolidated and separate basis		13.99	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	in the Single	ļ	x
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ne required audit		

BAA

Form **990** (2009)

Additional Information

Amended Form 990, Return of Organization Exempt From Income Tax

The Form 990, Return of Organization Exempt From Income Tax, for 2009 has been amended on Page 1, Line 3, and on Page 6, Line 1a, to change the number of voting members of the governing body from 17 to 16.

In addition, the number of voting members that are not independent on Page 1, Line 4, and on Page 6, Line 1b, was changed from 0 to 16.

There are no other changes to the amounts reported on this Form 990.

America's Second Harvest [*] ##### of Tampa Bay
Board of Directors

Walter U. Baker
Signium International North America
Wachovia Center
100 South Ashley Dr., Ste. 800
Tampa, FL 33602
(813) 866-7600
fax (813) 866-8856
wbaker@signium.com
Fundraising Committee

Mark Johnson
Sodexo Healthcare Services
9224 Highland Ridge Way
Tampa, FL 33647
(813) 621-2558 ex. 223 / (813) 944-8092
cell (813) 294-6495
mark.johnson@sodexousa.com
Operations Committee

Board of Directors

CHAIRMAN
Glenn McKenzie
J.O. DeLotto & Sons, Inc.
924 E. Busch Blvd.
Tampa, FL 33612-8598
(813) 935-2191
fax (813) 935-2456
gmckenzie@delotto.com
Executive Committee
Fundraising Committee

Richard Blau
GrayRobinson, P.A.
201 North Franklin Street, Suite 2200
P.O. Box 3324 (33601-3324)
Tampa, Florida 33602
(866) 382-5132
fax (813) 273-5145
Richard.Blau@gray-robinson.com

Suzanne B. Murchland
Tampa Bay Rays
One Tropicana Drive
St. Petersburg, FL 33705
(727) 825-3145
cell (727) 410-7931
sMurchland@raysbaseball.com

VICE-CHAIRMAN Melissa L. Powell

Northwestern Mutual Financial
Network
1511 N. Westshore Blvd., Ste. 500
Tampa, FL 33607
(813) 875-2005 / cell (813) 244-4700
fax (813) 871-5488
melissa.powell@nmfn.com
Executive Committee
Fundraising Committee – Chair

Allison E. Campbell Hill Ward Henderson 3700 Bank of America Plaza 101 E. Kennedy Blvd. Tampa, Florida 33602-5195 (813) 221-3900 fax (813) 221-2900 acampbell@hwhlaw.com

Jenna R. Nelson Sykes Enterprises, Inc. 400 North Ashley Dr., St. 2800 Tampa, FL 33602 (813) 233-2146 jenna.nelson@sykes.com Board Development Committee

IMMEDIATE PAST-CHAIRMAN Mike Vail

Sweetbay Supermarket
3801 Sugar Palm Drive
Tampa, FL 33619
(813) 620-1139 ex. 204
fax (813) 626-9550
mtvail@sweetbaysupermarket.com
Executive Committee

Dalton Cross
MetLife
18210 Crane Nest Drive
Tampa, Florida 33647
(813) 983-6089
dcross@metlife.com
Finance Committee

Christine Smith
Mosaic Fertilizer
8813 Highway 41 South
Riverview, FL 33578
(813) 671-6144
fax (813) 671-6187
christine.smith@mosaicco.com

SECRETARY Connie Detrick

Operations Committee

Detrick Consulting 3419 W. Lykes Ave. Tampa, FL 33609 (813) 871-6363 fax (813) 354-9493 connie.detrick@verizon.net Executive Committee Steven Heiser, AIA
Harvard Jolly, Inc.
5201 W. Kennedy Blvd., Ste. 515
Tampa, FL 33609
(813) 286-8206
fax (813) 287-1830
s.heiser@harvardjolly.com

Operations Committee

Chuck Sykes
Sykes Enterprises, Inc.
400 North Ashley Dr., St. 2800
Tampa, FL 33602
(813) 233-2162
fax (813) 209-4472
chuck.sykes@sykes com
Board Development Committee
Fundraising Committee

TREASURER

Jay A. Hlavay
Sweetbay Supermarket
3801 Sugar Palm Drive
Tampa, FL 33619
(813) 620-1139 ex. 444
fax (813) 627-9766
jhlavay@sweetbaysupermarket.com
Finance Committee

Drew E. Hobby
KPMG LLP
100 N. Tampa St., Ste. 1700
Tampa, FL 33602-5145
(813) 301-2228
fax (813) 902-6081
dhobby@kpmg.com
Operations Committee

Executive Director
Patricia Rogers
America's Second Harvest of Tampa Bay
4702 Transport Dr., Bldg. 6
Tampa, FL 33605-5940
(813) 254-1190 ex. 217
fax (813) 258-5802
progers@a2htampabay.org