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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

Open to Public
Inspection

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

A For the **2009** calendar year, or tax year beginning **JUL 1, 2009** and ending **JUN 30, 2010**

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization FOOD BANK OF WESTERN NEW YORK, INC.		D Employer identification number 22-2470820
		Doing Business As		E Telephone number (716) 852-1305
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 91 HOLT STREET		
		City or town, state or country, and ZIP + 4 BUFFALO, NY 14206-2293		
		F Name and address of principal officer MARYLOU BOROWIAK same as C above		
I Tax-exempt status: ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527		G Gross receipts \$ 19,000,369.		H(a) Is this a group return for affiliates? ☐ Yes ☒ No
J Website: ▶ WWW.FOODBANKWNY.ORG		H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions)		H(c) Group exemption number ▶
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation: 1982		M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE FOOD BANK OF WESTERN NEW YORK, INC. IS A NONPROFIT CORPORATION ESTABLISHED TO OBTAIN			
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	22	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22	
	5 Total number of employees (Part V, line 2a)	5	39	
	6 Total number of volunteers (estimate if necessary)	6	1829	
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	
	9 Program service revenue (Part VIII, line 2g)	15,243,986.	17,476,379.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,356,228.	1,337,541.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	41,651.	29,477.	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	70,827.	18,914,224.	
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	16,641,865.	13,863,804.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	15,036,262.		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,643,429.	1,802,522.	
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 587,745.	27,250.	24,294.	
Expenses	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,074,120.	1,342,154.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,608,603.	18,205,232.	
	19 Revenue less expenses. Subtract line 18 from line 12	33,262.	708,992.	
	Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
		21 Total liabilities (Part X, line 26)	7,498,047.	8,255,589.
		22 Net assets or fund balances. Subtract line 21 from line 20	732,353.	723,736.
			6,765,694.	7,531,853.

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer <i>Marylou Borowiak</i>		Date 11/2/10	
Type or print name and title MARYLOU BOROWIAK, PRESIDENT AND CEO				
Paid Preparer's Use Only	Preparer's signature <i>Thomas P. Doty</i>	Date 6/28/10	Check if self-employed ☐	Preparer's identifying number (see instructions) P00601313
	Firm's name (or yours if self-employed), address, and ZIP + 4 CHIAMPOU TRAVIS BESAW & KERSHNER LLP 45 BRYANT WOODS NORTH AMHERST, NY 14228			EIN ▶ 16-1468002
				Phone no. ▶ (716) 630-2400

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

2/16
14

Part III Statement of Program Service Accomplishments

- 1** Briefly describe the organization's mission
TO OBTAIN NUTRITIOUS FOOD AND SUPPORT FROM PUBLIC AND PRIVATE SOURCES AND EFFICIENTLY DISTRIBUTE THESE RESOURCES TO THE HUNGRY IN WESTERN NEW YORK THROUGH OUR MEMBER AGENCIES.
-
- 2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O
- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O
- 4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
-
- 4a** (Code:) (Expenses \$ **16,223,026.** including grants of \$ **15,036,262.**) (Revenue \$ **17,764,224.**)
MORE THAN 11 MILLION POUNDS OF FOOD AND GROCERY ITEMS DISTRIBUTED TO 338 CHARITABLE PROGRAMS WHICH PROVIDE SAME TO APPROXIMATELY 92,377 NEEDY INDIVIDUALS (APPROX. 36,109 HOUSEHOLDS) IN WESTERN NEW YORK.
-
- 4b** (Code:) (Expenses \$ **631,961.** including grants of \$ **0.**) (Revenue \$ **1,150,000.**)
AGENCY ASSISTANCE/OPERATIONS SUPPORT-FUNDS RECEIVED FROM NYS HPNAP, PRIVATE SOURCES AND FOOD BANK DESIGNATED BOARD FUNDS PROVIDE EQUIPMENT AND OPERATION ASSISTANCE TO AFFILIATED AGENCY PROGRAMS.
-
- 4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)
-
- 4d** Other program services. (Describe in Schedule O)
 (Expenses \$ including grants of \$) (Revenue \$)
-
- 4e** Total program service expenses ► \$ **16,854,987.**

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
• 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? <i>If "Yes," complete Schedule D, Part VII</i>		
• 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? <i>If "Yes," complete Schedule D, Part VIII</i>		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		
• 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? <i>If "Yes," complete Schedule D, Part X</i>		
12 Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	Yes	No
		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b 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? <i>If "Yes," complete Schedule F, Part I</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
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? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

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Part IV Checklist of Required Schedules (continued)

	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	X	
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		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		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 lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		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		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c 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		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		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		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		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		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		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		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did 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 W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b	If at least 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).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the 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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
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?		X
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		X
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter.		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter.		
11a	Gross income from members or shareholders.		
11b	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?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		

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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.

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body	22	
b Enter the number of voting members that are independent	22	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization		X
If "Yes" to line 15a or 15b, 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?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

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

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

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 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 **►**
EVELYN BASHER - 716-852-1305
91 HOLT STREET, BUFFALO, NY 14206-2293

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. Report compensation for the calendar year ending with or within the organization'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 employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 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 compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
E.W. DANN STEVENS, ESQ. CHAIR EMERITUS	1.00	X						0.	0.	0.
KEVIN J. CAVALIERI VICE CHAIR	1.00	X		X				0.	0.	0.
TIMOTHY BARTLETT DIRECTOR	1.00	X						0.	0.	0.
KARL OESTERLE DIRECTOR	1.00	X						0.	0.	0.
TERRY DUNFORD DIRECTOR	1.00	X						0.	0.	0.
FRANK CURCI DIRECTOR	1.00	X						0.	0.	0.
RALPH KUSHNER DIRECTOR	1.00	X						0.	0.	0.
ANN MCCARTHY DIRECTOR	1.00	X						0.	0.	0.
BILL SHEPARD SECRETARY	1.00	X		X				0.	0.	0.
JOHN F. DUNBAR, JR. CHAIR	1.00	X		X				0.	0.	0.
ALAN J. CONDO CHAIR EMERITUS	1.00	X						0.	0.	0.
VIREN SITWALA DIRECTOR	1.00	X						0.	0.	0.
GARY BLUESTEIN, ESQ DIRECTOR	1.00	X						0.	0.	0.
MICHAEL MANN TREASURER	1.00	X		X				0.	0.	0.
MAUREEN RASP-GLOSE DIRECTOR	1.00	X						0.	0.	0.
PETER J. RENKAS DIRECTOR	1.00	X						0.	0.	0.
DAVID TINCHER DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
HENRY SELF DIRECTOR	1.00	X						0.	0.	0.
KAREN BAILEY-JONES DIRECTOR	1.00	X						0.	0.	0.
TOM BERICAL, CPA DIRECTOR	1.00	X						0.	0.	0.
DONNA KLEIN DIRECTOR	1.00	X						0.	0.	0.
DEBRA WHITING DIRECTOR	1.00	X						0.	0.	0.
1b Total								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

- 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

- 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 0		

Part VIII 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	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	3,003,888.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	14472491.				
	g	Noncash contributions included in lines 1a-1f \$		11715575.				
	h	Total. Add lines 1a-1f		17476379.				
Program Service Revenue	2 a	SHARED MAINTENANCE FEE	Business Code 624200	788,679.	788,679.			
	b	PROGRAM FEES	624200	517,590.	517,590.			
	c							
	d							
	e							
	f	All other program service revenue	480000	31,272.	31,272.			
	g	Total. Add lines 2a-2f		1,337,541.				
	3	Investment income (including dividends, interest, and other similar amounts)		30,913.	30,913.			
4	Income from investment of tax-exempt bond proceeds							
5	Royalties							
Other Revenue	6 a	Gross Rents	(i) Real (ii) Personal					
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 42,579.					
	b	Less cost or other basis and sales expenses	44,015.					
	c	Gain or (loss)	<1,436.>					
	d	Net gain or (loss)		<1,436.>	<1,436.>			
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a 112,957.					
	b	Less direct expenses	b 42,130.					
	c	Net income or (loss) from fundraising events		70,827.		70,827.		
	9 a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities						
	10 a	Gross sales of inventory, less returns and allowances	a					
	b	Less cost of goods sold	b					
	c	Net income or (loss) from sales of inventory						
	Miscellaneous Revenue			Business Code				
	11 a							
	b							
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See instructions.		18914224.	1,367,018.	0.	70,827.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	15,036,262.	15,036,262.		
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, trustees, and key employees				
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	1,324,868.	733,178.	447,373.	144,317.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	121,266.	68,783.	40,965.	11,518.
9 Other employee benefits	258,973.	142,570.	90,536.	25,867.
10 Payroll taxes	97,415.	53,578.	34,095.	9,742.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	22,172.		22,172.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	24,294.			24,294.
f Investment management fees				
g Other	39,183.		39,183.	
12 Advertising and promotion				
13 Office expenses	59,551.	23,321.	11,369.	24,861.
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	13,417.	5,212.	5,229.	2,976.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	19,694.	15,891.	3,389.	414.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	263,803.	234,861.	28,942.	
23 Insurance	35,746.	33,856.	1,890.	
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.)				
a <u>IN-KIND GOODS</u>	241,929.	36,466.	2,700.	202,763.
b <u>UTILITIES</u>	106,815.	97,930.	5,664.	3,221.
c <u>REPACK, REPROCESS AND V</u>	97,162.	97,162.		
d <u>FUNDRAISING EXPENSE</u>	88,831.			88,831.
e <u>FREIGHT</u>	86,346.	86,346.		
f All other expenses	267,505.	189,571.	28,993.	48,941.
25 Total functional expenses Add lines 1 through 24f	18,205,232.	16,854,987.	762,500.	587,745.
26 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 campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	520,361.	1	1,116,413.
	2 Savings and temporary cash investments	2,965,246.	2	3,186,589.
	3 Pledges and grants receivable, net	152,699.	3	117,494.
	4 Accounts receivable, net	103,694.	4	121,387.
	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)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	1,413,174.	8	1,388,889.
	9 Prepaid expenses and deferred charges	20,216.	9	24,421.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,131,994.		
	b Less: accumulated depreciation	10b 2,484,917.	10c	1,647,077.
	11 Investments - publicly traded securities	278,181.	11	327,954.
	12 Investments - other securities. See Part IV, line 11	118,533.	12	176,132.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	153,364.	15	149,233.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	7,498,047.	16	8,255,589.
Liabilities	17 Accounts payable and accrued expenses	274,826.	17	248,668.
	18 Grants payable		18	
	19 Deferred revenue	304,163.	19	325,835.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	153,364.	25	149,233.
	26 Total liabilities. Add lines 17 through 25	732,353.	26	723,736.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	5,402,970.	27	6,069,998.
	28 Temporarily restricted net assets	1,362,724.	28	1,461,855.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	6,765,694.	33	7,531,853.
	34 Total liabilities and net assets/fund balances	7,498,047.	34	8,255,589.

Form 990 (2009)

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____

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?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2009)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

FOOD BANK OF WESTERN NEW YORK, INC.

Employer identification number

22-2470820

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g ☐ Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

h ☐ Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

[illegible]

Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13433417.	14522960.	15761496.	15243986.	17476379.	76438238.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	13433417.	14522960.	15761496.	15243986.	17476379.	76438238.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						76438238.

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	13433417.	14522960.	15761496.	15243986.	17476379.	76438238.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	61,801.	100,854.	122,590.	57,712.	30,913.	373,870.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	6,586.	7,402.	5,356.			19,344.
11 Total support. Add lines 7 through 10						76831452.
12 Gross receipts from related activities, etc. (see instructions)					12	2,513,741.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	99.49 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	99.48 %
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☒		
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐		
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐		
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐		

Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

FOOD BANK OF WESTERN NEW YORK, INC.

Employer identification number

22-2470820

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(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 writing that the assets held in donor advised 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 advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

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

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► _____ %

b Permanent endowment ► _____ %

c Term endowment ► _____ %

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

(i) unrelated organizations

(ii) related organizations

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

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

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		88,887.		88,887.
b Buildings		2,589,058.	1,389,093.	1,199,965.
c Leasehold improvements				
d Equipment		1,454,049.	1,095,824.	358,225.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,647,077.

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ►		

Part VIII Investments - Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ►	

Part X Other Liabilities. See Form 990, Part X, line 25

1 (a) Description of liability	(b) Amount
Federal income taxes	
DUE TO OTHER FUNDS	149,233.
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ►	149,233.

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	18,914,224.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	18,205,232.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	708,992.
4	Net unrealized gains (losses) on investments	4	57,167.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	57,167.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	766,159.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	19,013,521.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	57,167.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	42,130.
e	Add lines 2a through 2d	2e	99,297.
3	Subtract line 2e from line 1	3	18,914,224.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	18,914,224.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	18,247,362.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	42,130.
e	Add lines 2a through 2d	2e	42,130.
3	Subtract line 2e from line 1	3	18,205,232.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	18,205,232.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XII, LINE 2D - SPECIAL EVENT EXPENSES - \$42,130

PART XIII, LINE 2D - SPECIAL EVENT EXPENSES - \$42,130

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No. 1545-0047

2009

Open To Public Inspection

Name of the organization

FOOD BANK OF WESTERN NEW YORK, INC.

Employer identification number
22-2470820

Part I

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

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

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

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes☐ No

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

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
PROMOTIONS ETC., LLC	RAISE FUNDS FOR AND COORDINATE A S		X	96,715.	24,294.	72,421.
Total				96,715.	24,294.	72,421.

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

NY

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

Schedule G (Form 990 or 990-EZ) 2009

Part II 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 (add col. (a) through col (c))
		SWEET CHARITY (event type)	(event type)	None (total number)	
Revenue	1 Gross receipts	112,957.			112,957.
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)	112,957.			112,957.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	42,130.			42,130.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(42,130.)
	11 Net income summary. Combine line 3, column (d), and line 10				70,827.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

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

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?

b If "No," explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

	Yes	No
9a		
10a		
11		
12		

13 Indicate the percentage of gaming activity operated in**a** The organization's facility**13a** %**b** An outside facility**13b** %**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?**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 of the third party:

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****b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Name of the organization

Employer identification number
22-2470820

FOOD BANK OF WESTERN NEW YORK, INC.

Part I	General Information on Grants and Assistance
--------	--

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash	(f) Method of valuation (book, FMV, appraisal)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
--	---------	-------------------------------	--------------------------	------------------------	--	--	------------------------------------

[illegible]

22 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

Schedule I (Form 990) 2009

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

2009

Open to Public
Inspection

► Complete if the organizations answered "Yes" on Form
990, Part IV, lines 29 or 30.
► Attach to Form 990.

Name of the organization

FOOD BANK OF WESTERN NEW YORK, INC.

Employer identification number

22-2470820

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	924	11,473,646.	COST
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>ADVERTISING/O</u>)	X	1	136,104.	COST
26 Other ► (<u>MISCELLANEOUS</u>)	X	237	44,825.	COST
27 Other ► (<u>FOOD BAGS</u>)	X	1	36,000.	COST
28 Other ► (<u>MEDIA SERVICE</u>)	X	1	25,000.	COST

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

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for
at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for
the entire holding period?

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II

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

Yes No

30a		X
31	X	
32a		X
33		

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

Schedule M (Form 990) 2009

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.

Part I, Other Types of Property:

ITEMS FOR AUCTION EVENT

(a) Check if applicable = X

(b) Number of Contributors = 1

(c) Revenue Reported on Form 990, Part VIII \$ 16242.

(d) Method of determining revenue: COST

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

FOOD BANK OF WESTERN NEW YORK, INC.

Employer identification number

22-2470820

Form 990, Part I, Line 1, Description of Organization Mission:

NUTRITIOUS FOOD AND SUPPORT FROM PUBLIC AND PRIVATE SOURCES AND
EFFICIENTLY DISTRIBUTE THESE RESOURCES TO THE HUNGRY IN WESTERN NEW
YORK THROUGH OUR MEMBER AGENCIES.

Form 990, Part VI, Section A, line 7a: THE BOARD OF DIRECTORS MEMBERS ARE
ALLOWED TO ELECT OTHER INDIVIDUALS TO THE BOARD.

Form 990, Part VI, Section A, line 7b: ALL DECISIONS MADE BY THE BOARD OF
DIRECTORS ARE SUBJECT TO APPROVAL BY A VOTE OF THE BOARD MEMBERS.

Form 990, Part VI, Section B, line 11: THE BOARD WILL RECEIVE NOTICE PRIOR
TO THEIR NEXT MEETING THAT FORM 990 IS AVAILABLE FOR REVIEW. THE BOARD WILL
DISCUSS THE ORGANIZATIONS FORM 990 THE NEXT TIME THEY MEET. BOTH ELECTRONIC
AND PAPER COPIES OF FORM 990 ARE AVAILABLE TO THE BOARD MEMBERS.

Form 990, Part VI, Section B, Line 12c: THE CONFLICT OF INTEREST POLICY IS
REVIEWED ANNUALLY BY THE BOARD TO ENSURE COMPLIANCE. ALL BOARD MEMBERS SIGN
THE CONFLICT OF INTEREST POLICY EACH FISCAL YEAR.

Form 990, Part VI, Section B, Line 15a: THE SALARY OF THE CEO IS REVIEWED
AND APPROVED BY THE BOARD OF DIRECTORS ANNUALLY. APPROPRIATE SALARY IS
DETERMINED USING SALARY DATA FROM SIMILAR ORGANIZATIONS AND INDUSTRY
BENCHMARKS.

Form 990, Part VI, Section C, Line 19: THE ORGANIZATION WILL PROVIDE THE

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

Schedule O (Form 990) 2009

932211
02-03-10

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

FOOD BANK OF WESTERN NEW YORK, INC.

Employer identification number
22-2470820

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 2C:

THE OVERSIGHT PROCESS AND THE SELECTION PROCESS HAS NOT CHANGED FROM
THE PRIOR YEAR.

FOOD BANK OF WESTERN NEW YORK FOOD AND GRANT PROGRAMS

A. AGENCY ASSISTANCE PROGRAM

This program provides member agencies with purchased nutritional food and access to refrigerators, freezers, and food preparation and storage equipment to better serve the needs of their clients. This allows member agencies to store more perishable items and greatly increases their ability to provide more nutritional meals to the needy.

B. BANKING ON WELLNESS

This provides children in afternoon snack programs with nutrition education and physical exercise in an entertaining and informational way. It engages children in healthy and fun activities while providing them with child-friendly information on nutrition. The purpose of this program is to encourage consumption of more fruits and vegetables and increased age-appropriate physical activity.

C. BUFFALO NEWS NEEDIEST

A collaboration of *The Buffalo News*, United Way and the Food Bank uses these funds to purchase year-end holiday meal items. This food is given to needy Western New Yorkers through participating agencies.

D. CO-OP

Through the Agency Co-operative Buying Program, agencies may purchase cases of specific food items to supplement their other food sources. This offers agencies the convenience of "one stop" shopping at prices generally comparable to wholesale levels. Co-op also offers some non-food items.

E. DONATED PRODUCT

Donations of food and other items are provided to food banks by farmers, packers, manufacturers, wholesalers, and others in the food industry. Community groups also conduct food drives.

Food banks are required by law to distribute donated products only to "infants, elderly or needy" people, and distribution must be without charge to the ultimate consumer. Because of the costs involved with acquiring and distributing donated foods, however, the law allows food banks to ask agencies for a shared maintenance contribution. Although Feeding America caps such contributions at 19 cents/pound, the Food Bank of WNY is currently asking for 14 cents/pound. These contributions help to pay the costs of operating the Food Bank including staff, utilities, freezers, trucks, incoming freight, etc. While agencies are urged and expected to contribute shared maintenance, inability to do so does not stand in the way of access to donated foods.

F. ECDSS (ERIE COUNTY DEPARTMENT OF SOCIAL SERVICES)

The ECDSS Program is designed to meet the needs of low-income clients of the Erie County Department of Social Services. It was started in 1992 as a joint venture between ECDSS and the Food Bank and has now become an ongoing program.

The Food Bank provides certain selected pantries with extra food and with grocery store certificates funded by ECDSS. The foods comprise a nutritionally complete package for the number of days specified by the ECDSS caseworker, who may also specify whether a certificate is needed for such items as special dietary foods, infant formula, diapers, etc. The ECDSS caseworker refers the needy client to one of the participating pantries.

G. EFSP/FEMA (EMERGENCY FOOD & SHELTER PROGRAM/FEDERAL EMERGENCY MANAGEMENT AGENCY)

Since 1983, the Food Bank has been the recipient of annual EFSP/FEMA grants which enable purchase of additional food to affiliated agencies in Buffalo and Erie County. This federally funded grant is administered nationally by the United Way of America and is distributed through the local United Way.

EFSP/FEMA funds are used to purchase food items not normally donated in quantity, particularly lean protein items, fruits, and certain ethnic items. Some of the EFSP/FEMA funds awarded to agencies assist them in making their shared maintenance contributions, and EFSP/FEMA funds may also be used to subsidize the cost of Value Added Donated Product.

H. EMERGENCY INFANT FORMULA & AND BABY FOOD EXPANSION PROGRAM

The purpose of the Emergency Infant Formula & Baby Food Expansion Program is to meet the emergency needs of infants by providing them with a supply of infant formula, stage 1 baby food and baby care items. These items are distributed to emergency food providers that in turn service individuals suffering because of delays in receiving public assistance and/or W.I.C. assistance.

I. FOOD EXPRESS

This program enables us to distribute perishable food directly to clients of our member agencies through the use of our two fully refrigerated trucks. Many of our sites do not have enough storage space to house large amounts of produce and other perishable foods for an extended period of time. This gives agencies the opportunity to offer their clients highly nutritious food items much more quickly.

J. THE GARDEN PROJECT

This consists of several garden beds on the Food Bank's premises which are maintained by volunteers, agencies, and neighbors throughout the growing season. The gardens are used to grow nutritious produce and to educate individuals about the importance of eating fruits and vegetables by teaching them about gardening and nutrition.

K. HPNAP (HUNGER PREVENTION NUTRITION ASSISTANCE PROGRAM)

The New York State Department of Health, Bureau of Nutrition provides funds to assist in the feeding of homeless and destitute populations. Agencies provide the state with monthly data on their food distribution, clientele, service sites and locations.

Like EFSP/FEMA, HPNAP funds are used to purchase items not found in donated inventory and to pay a portion of the agency's shared maintenance accounts at the Food Bank.

By funding a registered dietitian at the Food Bank, HPNAP provides nutrition assistance and education to the agencies. HPNAP also underwrites the distribution of sanitation and food safety supplies to emergency food providers at no charge. These supplies include thermometers, disposable gloves, disposable aprons, alcohol wipes, germicidal soaps, and soap dispensers. The Food Bank registered dietitian also conducts workshops and trains providers in proper food handling practices to avoid food contamination.

HPNAP also offers limited annual funds for:

1. Operations Support - assists emergency food providers by covering portions of their operating costs such as staff, utilities, rent, transportation, etc.
2. Capital Equipment - enables emergency food providers to purchase equipment needed to

enhance their delivery of food to the homeless and destitute.

L. KIDS IN THE KITCHEN

Kids from throughout Western New York come to the Food Bank's test kitchen to learn about cooking and healthful eating. They get a chance to understand how their eating habits affect their health and learn how to prepare simple snacks and meals and how to choose foods wisely.

M. MEALS ON WHEELS/BLIZZARD BOXES

Meals on Wheels has found it helpful to distribute Blizzard Boxes, which are given to shut-ins each fall for use when regular meal deliveries are interrupted by severe weather. These boxes are packed by the Food Bank and contain enough nonperishable food for six meals (two days). Meals on Wheels makes funds available to cover the costs.

N. NUTRITION EDUCATION & FOOD SAFE HANDLING PROGRAMS

These are workshops to teach member agencies and their clients and volunteers about nutrition, food safety, recipe ideas and cooking. The programs are taught by our registered dietitian, who can tailor them to address specific health needs. Currently we have an adult specific program (Good Cookin'), a child specific program (Kids in the Kitchen), and food safety programs.

O. THE PUPPET SHOW

The Puppet Show gives children ages 4-7 the opportunity to learn about the Food Bank and nutrition. Children are taught about including fruits and vegetables in their diets in a fun and interactive way. Children are encouraged to help convince our candy-eating only dragon to "try some healthy foods". The puppets also participate in a school food drive. The show lasts approximately 20 minutes.

P. SPECIAL FOOD FUND

The Food Bank occasionally receives public support funds designated for food purchases. During the year-end holidays, turkeys, hams and chickens are purchased. At other times, the funds are used to acquire and distribute baby formula and special dietary items.

Q. SUNSHINE NUTRITION PROGRAM

A collaborative effort of the Food Bank of WNY, Meals on Wheels of Buffalo and Erie County and Goodwill Industries, this program provides a nutritious breakfast to homebound individuals who already are receiving a hot lunch and cold dinner from Meals on Wheels.

R. USDA (UNITED STATES DEPARTMENT OF AGRICULTURE)

NYS Bureau of Donated Foods, OGS (Office of General Services) provides New York State food banks with USDA surplus commodities for distribution to soup kitchens, shelters and pantries.

S. VALU ADDED PRODUCTS

Sometimes donated products require more than our limited repack capabilities can handle. For example, 12-lb. deli hams are more effectively used by pantries when they are cut and re-cryovaced in 3-lb. pieces. The cost of such "processing" is called "valu added." Food banks are allowed to pass on these costs to their agencies, but we currently try to raise funds to subsidize "valu added" products.

T. YOUTH AFTERNOON PROGRAMS

These provide meals to disadvantaged children under the age of 17 in an environment which is safe, accessible and convenient. The children are taught life skills by having an opportunity to participate in meal development, then receive the well balanced meal before being tutored.

05/2010