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Department of the Treasury

# Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010 D Employer identification number B Check if applicable Please Food Bank of the Rockies use IRS label or 84-0772672 Address change Doing Business As E Telephone number print or type. See Name change (303) 371-9250 pecific Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-**G** Gross receipts \$ 51,745,368 10700 East 45th Avenue Terminated tions. City or town, state or country, and ZIP + 4 Denver, CO 80239 Amended return Application pending Name and address of principal officer Is this a group return for Kevin Seggelke affiliates? 10700 East 45th Avenue Denver, CO 80239 H(b) Are all affiliates included? If "No," attach a list (see instructions) Tax-exempt status Group exemption number 🕨 Website: ► www foodbankrockies org K Form of organization 
✓ Corporation 
✓ Trust 
✓ Association 
✓ Other ► L Year of formation 1978 M State of legal domicile CO Part I Summary Briefly describe the organization's mission or most significant activities The organization's mission is to collect surplus food and essential non-food items to distribute to needy families through nonprofit hunger relief programs in Colorado and Wyoming Activities & Governance Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . Number of independent voting members of the governing body (Part VI, line 1b) . . . 16 109 Total number of employees (Part V, line 2a) . . 6,700 Total number of volunteers (estimate if necessary) . 0 7a Total gross unrelated business revenue from Part VIII, column (C), line 12. Net unrelated business taxable income from Form 990-T, line 34 **7**b **Current Year Prior Year** Contributions and grants (Part VIII, line 1h) . 38,164,495 46,103,587 Program service revenue (Part VIII, line 2g) . 4,363,045 5,346,688 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 19,492 35,939 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 68,415 74,666 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 42,615,447 51,560,880 4,106,354 11,255,365 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-Expenses 3,521,364 3,913,308 Professional fundraising fees (Part IX, column (A), line 11e) . 620,813 16a 545,020 Total fundraising expenses (Part IX, column (D), line 25)  $\blacktriangleright \frac{1,222,302}{}$ ь 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 29,386,900 32,996,963 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 37,559,638 48,786,449 Revenue less expenses Subtract line 18 from line 12 . 5,055,809 2,774,431 19 Net Assets or land Balances **Beginning of Current End of Year** Year 14,085,714 20 Total assets (Part X, line 16) . 16,622,748 21 Total liabilities (Part X, line 26) . 678,709 741,981 Net assets or fund balances Subtract line 21 from line 20 13,407,005 15,880,767 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sian \*\*\*\*\* 2010-11-15 Here Signature of officer Marshall Aster CFO Type or print name and title Date Check if Preparer's identifying number Preparer's CRAIG R CHOUN (see instructions) Paid empolyed 🕨 🦵 Preparer's Firm's name (or yours EHRHARDT KEEFE STEINER & HOTTMAN PC EIN ▶ if self-employed), **Use Only** address, and ZIP + 4 7979 E TUFTS AVENUE SUITE 400 Phone no (303) 740-9400

DENVER, CO 802372843

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

Cat No 11282Y

Form **990** (2009)

#### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

The organization's mission is to collect surplus food and essential non-food items to distribute to needy families through nonprofit hunger relief programs in Colorado and Wyoming

2	Did the organizatio the prior Form 990		ant program services durii	ng the year which were not listed	lon . 🔽 Yes 🗆 No
	If "Yes," describe t	hese new services on S	chedule O		
3	-	n cease conducting, or	make significant changes i	n how it conducts, any program	. 「Yes 「No
	If "Yes," describe t	hese changes on Sched	ule O		
4	Section 501(c)(3)	and 501(c)(4) organiza	tions and section 4947(a)	ion's three largest program serv (1) trusts are required to report t h program service reported	• •
4a	(Code	) (Expenses \$	22,936,161 including gra	ants of \$ ) (Reve	nue \$ 2,373,157 )
	Metropolitan Denver,	Northern Colorado and all of		ank distributed 35 7 million pounds of f	relief programs in 31 counties including ood and commodities - enough for our
4b	(Code	) (Expenses \$	5,887,720 including gra	ants of \$ ) (Reve	nue \$ 642,620 )
				f programs that provide food and meals ners with programs to provide food and	s for the sick, needy, or ill across the state l essential items to Wyoming's less
	(Code	) (Expenses \$	5,012,601 including gra	ants of \$ ) (Reve	nue \$ 511.565 )
-10	FBR contracts with the and Northern Colorad	e state of Colorado for admin o One of them is called The	istration of three United States E Emergency Food Assistance Prog	epartment of Agriculture (USDA) progra	ams for the City and County of Denver stribution of nutritious food to low income
4d	, ,	•	nedule O ) <b>See also Additio</b>	•	_
	(Expenses \$	13,136,319 inc	luding grants of \$	) (Revenue \$	1,819,346 )
4e	Total program ser	vice expenses►\$	46,972,801		

art IV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
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		No
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>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
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	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D,  Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? 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.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ 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.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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</i> " <i>Yes,"</i> complete Schedule F, Part I	14b		No
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 U S? If "Yes," complete Schedule F, Part II	15		No
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 U S ? If "Yes," complete Schedule F, Part III	16		No
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	Yes	
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	Yes	
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		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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		No
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	25b		No
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		No
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	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	

orm	990 (2009)			Page \$
Pai	rt 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			
	1a	22		
b	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?	. 1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
	return	109		
b	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)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	. 3a		No.
ь	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	,		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	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 an Financial Accounts	d		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		'''
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gwere not tax deductible?			
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods at services provided to the payor?	nd <b>7a</b>	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was require file Form 8282?	ed to 7c		No
d	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			
٠	benefit contract?	. 7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	. 7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	. 7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
		9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			

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

 $\textbf{b} \quad \text{If "Yes," enter the amount of tax-exempt interest received or accrued during the} \\$ 

year

12a

12b

10700 E 45TH AVENUE Denver, CO 80239 (303) 371-9250

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

Se	ction A. Governing Body and Management			
			Yes	No
1-	Enter the number of voting members of the governing body			
1a b	Enter the number of voting members of the governing body 1a 17  Enter the number of voting members that are independent 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
-	other officer, director, trustee, or key employee?	2		Νo
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?	3		Νo
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νo
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		Νo
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
4.0		40	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
	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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 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 of which 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. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orga	ınızatıor	ı <b>F</b>
	MARSHALL ASTER			

# Part VIII 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, and current key employees 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, or 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 i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
<b>(A)</b> Name and Title	(B) Average hours	(C) Position (check all that apply)						<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

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<b>1</b> b	Total	351,634	0		55,203
2	Total number of individuals (including but not limited to those listed above) who r \$100,000 in reportable compensation from the organization 2	received more than			
				Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or on line 1a? <i>If</i> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>		e e <b>3</b>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and ot organization and related organizations greater than \$150,000? If "Yes," complete individual	•	. 4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelarendered to the organization? If "Yes," complete Schedule J for such person	· <del>-</del>	5		No
_	Section B. Independent Contractors				
1	Complete this table for your five highest compensated independent contractors t \$100,000 of compensation from the organization	hat received more than			
	(A) Name and business address	( <b>B</b> ) Description of service	es	(C Compe	
201	Robbins Summer Street PO Box 5838 LISTON, MA 017465838	Fundraising			620,813
2	Total number of independent contractors (including but not limited to those listed \$100,000 in compensation from the organization ▶1	above) who received more tha	n		

Form **990** (2009)

Form 99								Page <b>9</b>
Part V	<b>/1111</b>	Statement o	of Revenue		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated camp	paigns 1a					
g E E	b	Membership du	es 1b					
ts, a⊞	C	Fundraising eve		269,266				
<u> </u>	d     e	Related organiz  Government grants	ations 1d s (contributions) 1e	11,767,090				
ons sin	, e	_	ons, gifts, grants, and <b>1f</b>	34,067,231				
Contributions, gifts, grants and other similar amounts	g	sımılar amounts no	ot included above					
S ₩	h	Total. Add lines	s 1a-1f	▶	46,103,587			
				Business Code				
ne ur	2a	AGENCY SUPPORT	FEES	900,099	1,181,688	1,181,688	0	0
Program Serwce Revenue	Ь	PURCHASED FOOD		900,099	2,236,474	2,236,474	0	0
	C	GOVERNMENT CON	ITRACTS	900,099	1,928,526	1,928,526	0	0
38	d							
Ē	e	0 II abban na an						
į.	f	All other progra	ım service revenue					
	g		3 2a-2f	+	5,346,688			
	3		ome (including dividen	. +	21,306	0	0	21,306
	4	and other similar amounts)  Income from investment of tax-exempt bond proceeds			0			
	5			· · · · · · · · · · · · · · · ·	0			
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	b	Less rental expenses						
	C	Rental income or (loss)						
	d	Net rental incor	me or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(II) O ther 41,890				
	b	Less cost or other basis and		27,257				
	l c	sales expenses Gain or (loss)		14,633				
	d		s)		14,633			14,633
une	8a	Gross income fi events (not incl \$269,	luding					
Other Revenue			reported on line 1c) e 18	70,816				
the	ь		penses <b>b</b>	157,231				
0	C		loss) from fundraising	events 🕦	-86,415			-86,415
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19 <b>a</b>					
	b		penses b		0			
	10a	Gross sales of returns and allo	• •	vities	o d			
	b c	_	<b>a</b> pods sold <b>b</b> loss) from sales of inve	entory •	0			
	۲	Miscellaneous	•	Business Code				
	11a		EIMBURSEMENT	900,099	139,443	0	0	139,443
	ь	MISCELLANEO		900,099	21,638	0	0	21,638
	c							
	d	All other revenu	ue					
	e	Total. Add lines	s 11a-11d		161,081			
	12	Total revenue.	See Instructions .		51,560,880	5,346,688	0	110,605

	990 (2009)				Page <b>10</b>
Par	IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)	
Do no	other organizations must complete column (A) but are not required to bot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	9,054,827	9,054,827		
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	2,200,538	2,200,538	-	
4	Benefits paid to or for members	0		1	
5	Compensation of current officers, directors, trustees, and key employees	270,538	210,432	33,445	26,661
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	2,861,967	2,226,120	353,810	282,037
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	68,817	53,528	8,507	6,782
9	Other employee benefits	427,188	332,279	52,811	42,098
10	Payroll taxes	284,798	221,524	<del>                                     </del>	28,066
11	Fees for services (non-employees)				
а	Management	0			
ь	Legal	703	579	52	72
c	Accounting	33,389	27,487	<del>                                     </del>	3,433
d	Lobbying	0	,	_,	
- e	Professional fundraising See Part IV, line 17	620,813			620,813
f	Investment management fees	0			
g	Other	234,925	191,093	18,333	25,499
12	Advertising and promotion	0	131,030	10,000	
13	Office expenses	329,464	247,426	18,281	63,757
14	Information technology	117,130	96,425	8,660	12,045
15	Royalties	0	30,123	0,000	12,015
16	Occupancy	416,444	400,966	12,082	3,396
17	Travel	72,066	54,121	<del>                                     </del>	13,946
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	31,121	3,555	13,310
19	Conferences, conventions, and meetings	39,801	32,765	2,943	4,093
20	Interest	11,132	8,360	<del>                                     </del>	2,154
21	Payments to affiliates	0	,		· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	443,141	410,279	25,559	7,303
23	Insurance	82,004	61,585	<u> </u>	15,869
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				· · ·
а	CONTRIBUTED FOOD DISTRIBUTED	27,283,018	27,283,018	0	0
b	PURCHASED FOOD DISTRIBUTED	2,300,783	2,300,783	0	0
c	DISTRIBUTION COSTS	756,514	756,417	<del>                                     </del>	80
d	PREPARED MEALS & SNACKS	666,885	666,885	0	0
e	WAREHOUSE EXPENSE	164,969	123,891	9,154	31,924
f	All other expenses	44,595	11,473	<del>                                     </del>	32,274
25	Total functional expenses. Add lines 1 through 24f	48,786,449	46,972,801	591,346	1,222,302
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				

Pa	rt X	Balance Sheet					<u> </u>		
					(A) Beginning of year		<b>(B)</b> End of year		
	1	Cash—non-interest-bearing			1,800	1	1,800		
	2	Savings and temporary cash investments			1,442,105	2	2,113,594		
	3	Pledges and grants receivable, net			316,397	3	233,431		
	4	Accounts receivable, net			468,820	4	610,793		
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	om current and former officers, directors, trustees, key employees, and nsated employees. Complete Part II of						
		Schedule L				5			
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of		4958(f)(1)) and					
		Schedule L				6			
Assets	7	Notes and loans receivable, net	•			7			
SS	8	Inventories for sale or use			3,628,361	8	4,354,364		
٧	9	Prepaid expenses and deferred charges			124,715	9	214,862		
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	10,455,293					
	ь	Less accumulated depreciation	10b	2,125,665	7,048,435	10c	8,329,628		
	11	Investments—publicly traded securities				11			
	12	Investments—other securities See Part IV, line 11			1,036,370	12	744,789		
	13	Investments—program-related See Part IV, line 11		13					
	14	Intangible assets		14					
	15	Other assets See Part IV, line 11			18,711	15	19,487		
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			14,085,714	16	16,622,748		
	17	Accounts payable and accrued expenses .			503,225	17	429,777		
	18	Grants payable				18			
	19	Deferred revenue			48,000	19	113,715		
	20	Tax-exempt bond liabilities				20			
es es	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.	•		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified							
7		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		127,484	25	198,489			
	26	Total liabilities. Add lines 17 through 25			678,709	26	741,981		
Fund Balances		Organizations that follow SFAS 117, check here ► $\sqrt{}$ and comp through 29, and lines 33 and 34.	olet e li	ines 27					
ลท	27	Unrestricted net assets			8,967,041	27	11,782,609		
8	28	Temporarily restricted net assets	4,140,388	28	4,098,158				
р	29	Permanently restricted net assets			299,576	29	0		
Fil		Organizations that do not follow SFAS 117, check here ▶ ┌ ar	ıd com	plete					
<u>~</u>		lines 30 through 34.							
	30	Capital stock or trust principal, or current funds				30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31			
	32	Retained earnings, endowment, accumulated income, or other fu	ınds			32			
Net	33	Total net assets or fund balances			13,407,005	33	15,880,767		
	34	Total liabilities and net assets/fund balances			14,085,714	34	16,622,748		

## Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
C	If "Yes," to 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	2c	Yes	
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 separated 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?	3a	Yes	
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	3b	Yes	

Form **990** (2009)

## OMB No 1545-0047

Inspection

# **SCHEDULE A**

(Form 990 or 990EZ) Complete if the organization is a section 501(c)(3) organization or a section Department of the Treasury 4947(a)(1) nonexempt charitable trust. Internal Revenue Service

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

**Public Charity Status and Public Support** 

Name of the organization Food Bank of the Rockies

**Employer identification number** 

84-0772672

Pa	rt I	Reas	on for Pul	olic Charity Stat	<b>us</b> (All orga	anızatıons ı	must comp	olete this pai	rt.) See ins	tructions	
The	organı	zatıon ıs	not a private	e foundation because	ıtıs (Forlır	nes 1 throug	h 11, check	only one box	)		
1	Γ	A churc	h, conventio	on of churches, or as	sociation of d	churches <b>se</b>	ction 170(b	)(1)(A)(i).			
2	$\sqcap$	A schoo	ol described	ın <b>section 170(b)(1)</b>	( <b>A</b> )(ii). (Atta	ach Schedul	e E )				
3	Γ	A hospi	tal or a coop	erative hospital serv	vice organiza	ition describ	ed ın <b>sectio</b>	n 170(b)(1)(A	(iii).		
4	Γ		cal research l's name, cıt	organization operate y, and state	ed in conjunc	tion with a h	ospital desc	cribed in <b>secti</b>	on 170(b)(1)	)( <b>A)(iii).</b> En	ter the
5	Г	An orga	ınızatıon ope	rated for the benefit	of a college of	or university	owned or o	perated by a d	overnmenta	l unit descri	 bed in
	·	•	•	<b>A)(iv).</b> (Complete Pa	•	,		, , ,	•		
6	Γ	A feder	al, state, or l	local government or	governmenta	ıl unıt descri	bed ın <b>secti</b>	on 170(b)(1)(	A)(v).		
7	<b>▽</b>	describ	n organization that normally receives a substantial part of its support from a governmental unit or from the general public escribed in <b>ection 170(b)(1)(A)(vi)</b> (Complete Part II )								
_	_					V :> /6					
8	<u> </u>		community trust described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II ) organization that normally receives  (1) more than 331/3% of its support from contributions, membership fees, and gross								
9	ı										
		•	ceipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of								
			support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses quired by the organization after June 30, 1975 See <b>section 509(a)(2).</b> (Complete Part III )								
	_	•			•			•	•		
10	<u> </u>			anized and operated							
11	ı	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 <b>section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h  a Type I  b Type III - Type III - Functionally integrated  d Type III - Other									
е	Γ	other th		x, I certify that the o on managers and oth							
f				eceived a written de	termination f	rom the IRS	that it is a	Type I, Type I	I or Type II	I supporting	j organizatio <u>n,</u>
		check t		006, has the organız					the		Г
g			g persons?	000, has the organiz	ation accept	ed any gni o	i contributi	on nom any or	tile		
		(i) a pe	rson who dır	ectly or indirectly co	ntrols, eithei	r alone or tog	gether with i	persons descr	ıbed ın (ıı)		Yes No
		and (III)	below, the g	overning body of the	the support	ed organızat	ion?			11g(i	)
		(ii) a fa	mıly membe	r of a person descrıb	ed ın (ı) abov	/e <sup>?</sup>				<b>11</b> g(ii	i)
		(iii) a 3	5% controll	ed entity of a person	described in	ı (ı) or (ıı) ab	ove?			<b>11</b> g(ii	ii)
h		Provide	the followin	g information about t	he supported	d organizatio	n(s)				
	(i) Name suppo rganız	e of (ii) rted EIN		(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv)  Is the organization in col (i) listed in your governing document?		Did you no organiza col (i) c suppo	otify the ition in of your	(vi) Is the organization i col (i) organiz in the US?		(vii) A mount of support?
				instructions))	Yes	No	Yes	No	Yes	No	
Tota	ı										

### Support Schedule for Organizations Described in IRC 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.) Part II

_	(Complete only if y	ou checked the	box on line 3, 1	, or o or rait i	··/			
	ection A. Public Support endar year (or fiscal year beginning	Τ	1					
Car	in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	( <b>e</b> ) 2009	9	<b>(f)</b> Total
1	Gıfts, grants, contributions, and							
	membership fees received (Do no	t 29,285,94	15 34,246,454	31,665,484	38,164,495	46,10	3,587	179,465,965
	include any "unusual grants ")							
2	Tax revenues levied for the							
	organızatıon'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	29,285,94	15 34,246,454	31,665,484	38,164,495	46,10	3,587	179,465,965
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							21 025 624
	supported organization) included on line 1 that exceeds 2% of the							21,825,634
	amount shown on line 11, column							
	(f)							
6	Public Support. Subtract line 5							157,640,331
	from line 4							
	ection B. Total Support endar year (or fiscal year	T	T					
Car	beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	<b>(e)</b> 2009		<b>(f)</b> Total
7	A mounts from line 4	29,285,945	61,717	31,665,484	38,164,495	46,103	,587	179,465,965
8	Gross income from interest,							
	dividends, payments received	42.625	64 747	22.062	40,400	24	206	140.013
	on securities loans, rents,	12,635	61,717	33,863	19,492	21	,306	149,013
	royalties and income from similar sources							
9	Net income from unrelated							
_	business activities, whether or							
	not the business is regularly							
	carried on Other income (Explain in Part						_	
10	IV ) Do not include gain or loss				==.			
	from the sale of capital	5,081	43,255	100,786	144,751	161	,081	454,954
	assets							
11	Total support (Add lines 7							180,069,932
12	through 10) L Gross receipts from related activit	uns atc (San Ins	tructions \			112		17.605.730
	·		•	Alband Carrath and	. O. b	12		17,605,729
13	First Five Years If the Form 990 is check this box and stop here	for the organizat	tion s first, second	, tnira, fourth, or f	inthitax year as a :	501(c)(3) o	rganiz	eation, ►
S	ection C. Computation of Pu	hlic Sunnort	Percentage					
14	Public Support Percentage for 200			11 column (f))		14		87 544 %
15	Public Support Percentage for 200	•				15		99 733 %
	33 1/3% support test—2009. If the	•	•	contine 13 and t	line 14 is 33 1/3%		neck t	
Lou	and <b>stop here.</b> The organization qu				IIIIC 14 13 33 1/3/0	or more, er	icck t	<b>▶</b> ▼
b	33 1/3% support test-2008. If the	e organization die	d not check the box	c on line 13 or 16	a, and line 15 is 3	3 1/3% or i	more,	check this_
	box and <b>stop here.</b> The organization			-			_	▶□
17a	10%-facts-and-circumstances test is 10% or more, and if the organization		-					
	in Part IV how the organization me							ed
	organization			organiz	quannos do (	. , , , , , , , , , , , , , , , , , , ,		<b>.</b>
b	10%-facts-and-circumstances test							
	15 is 10% or more, and if the orga							
	Explain in Part IV how the organization	ation meets the "	racts and circums	ances" test I he	organization quali	iries as a pi	iblicly	<b>▶</b> □
18	Private Foundation If the organiza	tion did not chec	k a box on line 13.	16a, 16b. 17a o	r 17b, check this l	oox and see		-1
-	instructions			,, 0	,			<b>▶</b> □

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support	T			1	T	I
cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 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 Gross receipts from activities that						
3	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	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2,						
/a	and 3 received from disqualified				1		
	persons						
b	A mounts 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						
	rom line 6 ) ction B. Total Support						
	ndar year (or fiscal year beginning						
cuic	in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar						
	sources						
ь	Unrelated business taxable						
	income (less section 511 taxes) from businesses acquired after						
	June 30, 1975						
С	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						
13	IV ) Total support (Add lines 9, 10c,						
13	11 and 12 )						
14	First Five Years If the Form 990 is for	or the organizat	ion's first, second	l, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	
	check this box and <b>stop here</b>						<b>►</b> □
Se	ction C. Computation of Publ	ic Support P	ercentage				
15	Public Support Percentage for 2009			13 column (f))		15	
16	Public support percentage from 200	-		.,,		16	
	Table support personage nom 200	o o o modulo / i / i	arc 111, mrs 15			10	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ae			
17	Investment income percentage for 2				n (f))	17	
18	Investment income percentage from	•		•		18	
	33 1/3% support tests—2009. If the		•		d line 15 is more		line 17 is not
1.7a	more than 33 1/3%, check this box a					u.ii 23 1/3/0 dill	. IIIC 17 13 110t
	organization	•厂		•			
ь	33 1/3% support tests—2008. If the	organization di	d not check a box	on line 14 or line	e 19a, and line 16	5 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 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

#### **Additional Data**

Software ID: Software Version:

**EIN:** 84-0772672

Name: Food Bank of the Rockies

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Mastarn Clana Cra	) (Expenses \$	4,328,258	including grants of \$	) (Revenue \$	462,003 )
western slope - Gra	nd Junction				
(Code	) (Expenses \$	3,364,727	ıncludıng grants of \$	) (Revenue \$	245,367)
School Lunch Progra	am				
(Code	) (Expenses \$	2,973,564	including grants of \$	) (Revenue \$	509,354)
Commodity Supplem	nental Food Program				
(Code	) (Expenses \$	1,574,366	ıncludıng grants of \$	) (Revenue \$	551,921 )
Children's Nutrition	Network				
(Code	) (Expenses \$	895,404	including grants of \$	) (Revenue \$	50,701)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors								
<b>(A)</b> Name and Title	(B) Average hours per		(C) ition (che that apply	/)		( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Officer Institutional Trustee	Key employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Doug Wilhelm Chairman	4 0	X	Х			0	0	0
A my Diaz Secretary	4 0	X	x			0	0	0
Dan Fair Treasurer	2 0	Х	Х			0	0	0
Jeff Peitzmeier Director	2 0	Х				0	0	0
Alan Robinson Director	2 0	x				0	0	0
Mark Boshoven Director	2 0	X				0	0	0
Jared D Casey Jr Director	2 0	X				0	0	0
Leveto Squalls Director	2 0	Х				0	0	0
Stephanie Foote Director	2 0	Х				0	0	0
John Strohm Dırector	2 0	Χ				0	0	0
Neil Duggan Director	2 0	X				0	0	0
Roland Thornton Director	2 0	Х				0	0	0
Bruce Glazer Dırector	2 0	X				0	0	0
Dick Treich Director	2 0	Χ				0	0	0
Michael Hall Director	2 0	X				0	0	0
Ulysses Williams Director	2 0	X				0	0	0
Meghan Arnold Director	2 0	X				0	0	0
Katıe Wolfram Dırector	2 0	X				0	0	0
Seth Patterson Director	2 0	X				0	0	0
Richard W Yolles Director	2 0	X				0	0	0
Jackson Lamb Director	2 0	X				0	0	0
Mıke Moderhak Dırector	2 0	X				0	0	0
David Patterson Director	2 0	X				0	0	0
Jim Bolt Director	2 0	X				0	0	0
Allan Fries Director	2 0	Х				0	0	0

# Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

compensated Employees,	and and poin								
<b>(A)</b> Name and Title	(B) A verage hours per week		ition ta Institutional Trustee	•	Highest compensated employee	Former	(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
Kevın Seggelke Presıdent & CEO	55 0	X		X			142,533	0	18,440
Marshall Aster CFO	55 0			X			94,561	0	15,004
Vıncent Alexıs Vıce President	55 0				X		114,540	0	21,759

### Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
CONTRIBUTED FOOD DISTRIBUTED	27,283,018	27,283,018	0	0
PURCHASED FOOD DISTRIBUTED	2,300,783	2,300,783	0	0
DISTRIBUTION COSTS	756,514	756,417	17	80
PREPARED MEALS & SNACKS	666,885	666,885	0	0
WAREHOUSE EXPENSE	164,969	123,891	9,154	31,924

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DLN: 93493319016340

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Rev

**Supplemental Financial Statements** 

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

Open to Public

amai	Revenue Service F Attach to Fo	orm 990. F See separate instructions.		Ilispect	lion
	me of the organization d Bank of the Rockies		Employer id	lentification numbe	er
			84-077267	72	
Pa	rt I Organizations Maintaining Donor Ad		unds or Acc	<b>counts.</b> Complet	te if the
	organization answered "Yes" to Form 99	0, Part IV, line 6. (a) Donor advised funds	(b) Fun	ds and other accou	nte
	Total number at end of year	(a) Donor advised funds	(b) r and	us and other accou	111.5
	Aggregate contributions to (during year)				
	Aggregate grants from (during year)				
	, , ,				
	Aggregate value at end of year				
	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the o		or advised	☐ Yes	┌ No
	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		•	se <b>  Yes</b>	┌ No
aı	t III Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Form 990,	Part IV, line 7.	
	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualication on the last day of the tax year	on or pleasure) Preservation of an Preservation of a c	certified histor		a
			Hele	d at the End of the	Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
c	Number of conservation easements on a certified his	toric structure included in (a)	2c		
d	Number of conservation easements included in (c) ac	cquired after 8/17/06	2d		
	Number of conservation easements modified, transfe the taxable year -		d by the organ	nization during	
	Number of states where property subject to conserva Does the organization have a written policy regarding enforcement of the conservation easements it holds?	g the periodic monitoring, inspection, hand	—— dling of violation	ons, and <b>Yes</b>	┌ No
	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	nents during th	e year ►	
	A mount of expenses incurred in monitoring, inspecting	ng, and enforcing conservation easements	s during the ye	ear ► \$	
	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$ ?	(d) above satisfy the requirements of sec	tion	☐ Yes	┌ No
	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easem	he footnote to the organization's financial			
ar	<b>TIII</b> Organizations Maintaining Collection Complete if the organization answered "		or Other Si	milar Assets.	
а	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	116, not to report in its revenue stateme for public exhibition, education or research	ch in furtheran		
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ii			
	(i) Revenues included in Form 990, Part VIII, line 1		<b>.</b>	\$	
	(ii) Assets included in Form 990, Part X			\$	
	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS				
а	Revenues included in Form 990, Part VIII, line 1		•	\$	
				-	

**b** Assets included in Form 990, Part X

ar	Organizations Maintaining Co	llections of Art	, His	torica	<u>al Tre</u>	<u>easu</u>	res, or (	<u> </u>	r Simila	r Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e follo	wing th	hat ar	e a sıgnıfıc	ant u	se of its c	ollectio	n	
а	Public exhibition		d	Г	Loan o	rexcl	nange prog	rams				
b	Scholarly research		e	Γ (	Other							
c	Preservation for future generations											
ļ	Provide a description of the organization's co	ollections and expla	ın how	v they	further	r the c	rganızatıo	n's ex	empt pur	pose in		
•	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					nılar	Г	Yes	┌ No
aı	t IV Escrow and Custodial Arrang						answere	d "Y	es" to Fo	rm 990	),	
	Part IV, line 9, or reported an an		•									
a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	diary	for co	ntrıbut	ions o	or other as:	sets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	V and complete the	follow	ıng tab	ole		Г					
										A mo	unt	
С	Beginning balance						-	1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?							$\vdash$	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	1										
Pa	rt V Endowment Funds. Complete											
		(a)Current Year	(b)	Prior Ye		<b>(c)</b> Tv	vo Years Back	(d)	Three Years	Back (e	e)Four Ye	ars Back
а	Beginning of year balance	299,576			40,310							
Ь	Contributions	8,659			10,936							
С	Investment earnings or losses	40,292			51,670							
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses	6,644										
g	End of year balance	341,883		2	99,576							
	Provide the estimated percentage of the yea	r end balance held a	as									
а	Board designated or quasi-endowment	%										
_	Permanent endowment ► 100 000 % %											
Ь												
c a	Term endowment  %  Are there endowment funds not in the posses	ssion of the organize	-tion t	hat ar	a bald	and a	dministora	d for	+ha			
a	organization by	331011 Of the organiza	ation t	.mat ar	e neiu	ana a	ullillistere	u 101	tile		Yes	No
	(i) unrelated organizations									3a(i)		Νο
	(ii) related organizations									3a(ii)		Νo
Ь	If "Yes" to 3a(II), are the related organizatio									3b	Yes	
	Describe in Part XIV the intended uses of th											
a i	t VI Investments—Land, Buildings	s, and Equipme	nt. S	<u>ee Fo</u>	rm 99	90, Pa	art X, line	10.	T			
	Description of investment				Cost or ( (Investr		(b)Cost or basis (oth		(c) Accun depreci		( <b>d</b> ) Bo	ok value
а	Land						1,21	9,911				1,219,911
b	Buildings						4,09	8,617		610,221	:	3,488,396
c	Leasehold improvements						2,02	7,566		282,555		1,745,011
d	Equipment						3,01	3,694	1,	,165,106		1,848,588
e	Other						9	5,505		67,783	-	27,722

8,329,628

(a) Description of security or category		. <b>(c)</b> Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
	_	
	a Form 000 Port V line 1	2
Part VIII Investments—Program Related. Se		.3. (c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
	1	
Tetal (Column (h) should agust Form 000, Part V, col (P) Inc. 12.)	•	
	▶ ne 15.	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. See Form 990, Part X, li  (a) Descri	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, II (a) Descri	ne 15. ption	
Part IX Other Assets. See Form 990, Part X, II  (a) Description  Total. (Column (b) should equal Form 990, Part X, col.(B) line	ne 15. ption	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part	ne 15. ption  15.)  X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part 1  (a) Description of Liability	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part 1  (a) Description of Liability	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.)  X, line 25.  (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line  Part X Other Liabilities. See Form 990, Part  (a) Description of Liability  Federal Income Taxes	15.) X, line 25.  (b) A mount  0 198,489	

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ıts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	51,560,880
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	48,786,449
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,774,43
4	Net unrealized gains (losses) on investments	4	-1,09
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	42,30
9	Total adjustments (net) Add lines 4 - 8	9	41,214
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	2,815,64
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Retu	rn
1	Total revenue, gains, and other support per audited financial statements	1	51,783,57
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	222,69
3	Subtract line <b>2e</b> from line <b>1</b>	3	51,560,880
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	51,560,88
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Ret	
1	Total expenses and losses per audited financial statements	1	48,967,93
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	181,48
3	Subtract line <b>2e</b> from line <b>1</b>	3	48,786,449
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	48,786,44

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, 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

Ident if ier	Return Reference	Explanation
FIN 48 Disclosure	Schedule D, Part XIV	The Organization adopted guidance related to uncertainty in income taxes on July 1,2009. After evaluating the tax positions taken, none are considered to be uncertain, therefore, no amounts have been recognized as of June 30, 2010 and 2009. If incurred, interest and penalties associated with tax positions are recorded in the period assessed as general and administrative expense. No interest or penalties have been assessed as of June 30, 2010 or 2009. Tax years that remain subject to examination include 2006 through current.
Intended Use of Endowment Fund	Schedule D, Part V, Line 4	The endowment fund is established for support of the program services of the Food Bank of the Rockies
Reconciliation of Revenue	Schedule D, Part XII, Line 2(d)	FBR Endowment Fund Revenues \$ 42,307 Special Events Expenses Netted with Income \$157,231
Reconciliation of Expense	Schedule D, Part XIII, Line 2(d)	Special Events Expenses Netted with Income \$157,231
O ther A djustments	Part XI, Line 8	FBR Endowment Fund Revenues \$42,307

As Filed Data -

DLN: 93493319016340

**SCHEDULE G** (Form 990 or 990-EZ) **Supplemental Information Regarding Fundraising or Gaming Activities** 

OMB No. 1545-0047 2009

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18 Department of the Treasury  or if the organization entered more than \$15,000 on Form 990-EZ, line 6a Internal Revenue Service  Name of the organization							line 6a.	,	Open to Public Inspection
Name of the of Food Bank of	•							Employer iden 84-0772672	tification number
		Activities. Comple lers are not require							line 17.
1 Indicate	whether the or	ganızatıon raısed fund	s through a	any of the	follo	owing activities Che	eck all tha	t apply	
a 🔽 Mai	solicitations			e	~	Solicitation of non	n-governm	ent grants	
<b>b</b> 🔽 Inte	✓ Internet and e-mail solicitations f ✓ Solicitation of g						ernment g	grants	
<b>c</b>	ne solicitations			g	~	Special fundraisin	ng events		
d √ In-p	erson solicitatio	ons							
orkeye <b>b</b> If "Yes,	mployees listed Ist the ten hig	ve a written or oral aging in Form 990, Part VI nest paid individuals of the orast \$5,000 by the or	I) or entity or entities	/ in conne (fundrais	ectio ers) j	n with professional f pursuant to agreeme	fundraising ents under	g activities? which the fun	
	of individual (fundraiser)	(ii) Activity	(iii) fundrais custo contr contribu	er have dy or ol of	(iv	/) Gross receipts from activity	(or ret	ount paid to ained by) er listed in ol <b>(i)</b>	(vi) A mount paid to (or retained by) organization
LW Robbins		Direct Mail		No		2,540,082		620,813	1,919,269
Total						2,540,082		620,813	1,919,269
					•				

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

CO,WY

Pa	rt I.	<b>Fundraising Events.</b> Commore than \$15,000 on Form					reporte	∌d
		· · ·	(a) Event #1	(b) Event #2	(c) Other Events	(Add col	tal Even (a) thro	
dì			(event type)	(event type)	(total number)	+		
Ě	1	Gross receipts	340,082	2			340	,082
Revenue	2	Less Charitable contributions	269,260	5			269	,266
	3	Gross income (line 1 minus line 2)	70,816	5			70	,816
	4	Cash prizes						
မှာ	5	Non-cash prizes						
esus	6	Rent/facility costs						
Expenses	7	Food and beverages						
Direct	8	Entertainment						
Δ	9	Other direct expenses .	157,23	1			157	,231
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	(d)	🛌		157	,231
	11	Net income summary Combine I	nes 3, column d, and line	10		-	-86	,415
Par	t II	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more	e than	
Revenue			(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(Add col	al gamı (a) thro	_
	1	Gross revenue				+		
	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	│ Yes% │ No	│ Yes% │ No	∀es	_		
	7	Direct expense summary Add line	s 2 through 5 in column (	(d)				
	8	Net gaming income summary Con	nbine lines 1, column d, a	nd line 7				
9 a b	Is	ter the state(s) in which the organiz the organization licensed to operate 'No," Explain				· 9a	Yes	No
10a b		re any of the organization's gaming 'Yes," Explain	licenses revoked, susper	nded or terminated during	the tax year?	10a		
11	D o	es the organization operate gaming	activities with nonmembe	ers?		11		
12		the organization a grantor, beneficia med to administer charitable gamin						_
	101	to daminister charitable gallilli	,			12	1 1	

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
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?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
<b>.7</b>	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

DLN: 93493319016340 OMB No 1545-0047

**Grants and Other Assistance to Organizations,** Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

**Inspection** Employer identification number

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?							
Part I General Information	on Grants and	l Assistance				•	
the selection criteria used to awa	rd the grants or as:	sıstance?			•	,	√ Yes
Form 990, Part IV, line	21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000.	Use
organization	<b>(b)</b> EIN	section	` '	cash	valuation (book, FMV, appraisal,	'-'	(h) Purpose of gran or assistance
See Additional Data Table					·		

Cat No 50055P

Part IIII Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Food For Eligible Low-Income Individuals	100131		2,200,538	FM∨	Food
See Additional Data Table					
		·		·	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Grant Monitoring Procedures	Schedule G, Part I, Line 2	Food distributed to food agencies is distributed directly to those agencies. These agencies are selected by the State of Colorado
<u></u>		

Software ID:

**Software Version:** 

**EIN:** 84-0772672

Name: Food Bank of the Rockies

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of (b) EIN (c) IRC Code section (d) Amount of cash (e) Amount of non- (f) Method of (g)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Adam County-Food Distribution7111 E 56th Ave Commerce City,CO 80022		501(c)3		687,177	FMV	Food	Food Distribution
Arapahoe County TEFAP 5804 S Datura St Suite 1A Littleton, CO 80120		501(c)3		597,602	FMV	Food	Food Distribution
Care & Share2605 Preamble Pt Colorado Springs,CO 80915		501(c)3		500,132	FMV	Food	Food Distribution
Mesa County Supplemental Foods486 Morning Glry Ln Grnd Junction, CO 81504		501(c)3		267,250	FM∨	Food	Food Distribution
Jeffco Action Center8755 W 14th Ave Lakewood, CO 80215		501(c)3		197,310	FMV	Food	Food Distribution
CC STAR717 E Industrial Blvd Pueblo West,CO 81007				137,513	FMV	Food	Food Distribution
Byers PlaceCatholic Charities1205 W Byers Suite A Denver, CO 80223		501(c)3		132,617	FMV	Food	Food Distribution
Arvada Food Bank8555 W 57th Ave Arvada,CO 80002		501(c)3		129,026	FMV	Food	Food Distribution
Mesa County School District #512280 E Main Street Grand Junction, CO 81501				117,294	FMV	Food	Food Distribution
ACTS Food Bank2450 N Clay St Denver, CO 80211		501(c)3		114,318	FMV	Food	Food Distribution

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Holy Cross Center Inc1030 N Lincoln Casper, WY 82601		501(c)3		109,926	5 FMV	Food	Food Distribution
Senior High Rise FB2611 S Decatur Denver, CO 80219		501(c)3		102,817	FMV	Food	Food Distribution
Metro CareRing1100 E 18th Ave Denver, CO 80218		501(c)3		99,358	B FMV	Food	Food Distribution
Mapleton School District #1 591 E 80th Avenue Denver, CO 80229				98,548	B FMV	Food	Food Distribution
Denver Urban Ministries 1717 E Colfax Ave Denver, CO 80218		501(c)3		98,187	FMV	Food	Food Distribution
Denver Rescue Mission3501 E 46th Ave Denver, CO 80216		501(c)3		97,389	FMV	Food	Food Distribution
Needs Inc900 Central Ave Cheyenne, WY 82007		501(c)3		97,260	FMV	Food	Food Distribution
St Joseph's Church321 E 6th Street Cheyenne, WY 82007		501(c)3		96,962	P FMV	Food	Food Distribution
Kıds Cafe10700 E 45th Ave Denver, CO 80239		501(c)3		94,269	FMV	Food	Food Distribution
Lander Care & Share FB281 Garfield Street Lander, WY 82520		501(c)3		93,296	5 FMV	Food	Food Distribution

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Montrose School District RE- 1J930 Colorado Avenue Montrose, CO 81402				84,598	FMV	Food	Food Distribution
Ft Morgan School District RE- 3715 W Platte Avenue Fort Morgan, CO 80701				84,010	) FMV	Food	Food Distribution
Centible Nutrition2011 Fairgrounds Rd Building A 300 Casper, WY 82604		501(c)3		82,080	FMV	Food	Food Distribution
Metropolitan Community980 Clarkson St Building A 300 Denver,CO 80218		501(c)3		79,048	FMV	Food	Food Distribution
FB Sweetwater Cnty90 Center Street Rock Springs, WY 82901		501(c)3		78,776	5 FMV	Food	Food Distribution
Garfield School District RE-2 215 E 30th Street Rifle, CO 81650				78,132	P. FMV	Food	Food Distribution
Cherry Creek School District #514270 E Briarwood Ave Centennial, CO 80112				77,021	. FMV	Food	Food Distribution
Jewish FamilyKosher3201 S Tamarac Dr Denver,CO 80231		501(c)3		74,645	FMV	Food	Food Distribution
Montrose County DSS17 N 6th St Montrose, CO 81401		501(c)3		74,344	FMV	Food	Food Distribution
Salvation Army Cheyenne 1401 E Lincolnway Cheyenne, WY 82003		501(c)3		74,322	! FM∨	Food	Food Distribution

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ACS Community Lift5045 W 1st Ave Denver,CO 80219		501(c)3		74,259	FMV	Food	Food Distribution
Northeast Church of Christ 5490 Crown Blvd Denver, CO 80239		501(c)3		72,336	5 FMV	/ Food	Food Distribution
Salvation Army Hope Cntr 441 S Center St Casper, WY 82601		501(c)3		71,032	2 FMV	Food	Food Distribution
His Hands Food Ministries 2750 S Clermont Dr Denver, CO 80222		501(c)3		68,166	5 FMV	Food	Food Distribution
Aurora Public Schools80 Airport Blvd Aurora,CO 80011				67,695	5 FMV	Food	Food Distribution
Salvation Army-Sheridan150 South Tschirgi Sheridan, WY 82801		501(c)3		66,576	5 FMV	Food	Food Distribution
Twin Parishes 3663 Humboldt Denver, CO 80205		501(c)3		63,686	5 FMV	Food	Food Distribution
Council of Comm Gillette114 South 4J Road Gillette, WY 82716		501(c)3		62,661	L FMV	Food	Food Distribution
Trinity Christian Center6500 W Coalmine Ave Littleton, CO 80123		501(c)3		59,195	5 FMV	Food	Food Distribution
Delta County School District #507655 2075 Road Delta,CO 81416				58,034	fMV	Food	Food Distribution

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Salvation ArmyHarbor1901 29th Ave Denver, CO 80216		501(c)3		56,982	2 FMV	Food	Food Distribution
Community Ministry SW1755 S Zuni St Denver, CO 80223		501(c)3		55,675	5 FMV	Food	Food Distribution
Lord's Storehouse1565 S Hwy 150 Ste E Evanston, WY 82931		501(c)3		54,788	B FMV	Food	Food Distribution
Summit School District RE-1 150 School Road Frisco, CO 80443				53,938	B FMV	Food	Food Distribution
Land of Goshen Ministries 801 W Valley Road Torrington, WY 82240		501(c)3		53,901	FMV	Food	Food Distribution
Douglas-Elbert Task Force 1638 Park St Castle Rock, CO 80104		501(c)3		53,065	5 FMV	Food	Food Distribution
North Presbyterian Church 3025 W 37th Ave Denver, CO 80211		501(c)3		52,321	FMV	Food	Food Distribution
Valley School District RE-1 428 W Broadway Sterling, CO 80751				50,857	7 FMV	Food	Food Distribution
Delta County HHS35677 Back River Road Delta, CO 81416		501(c)3		50,722	2 FMV	Food	Food Distribution
Northwest Family Asst2222 W 32nd Ave Denver, CO 80211		501(c)3		50,378	FMV	Food	Food Distribution

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Colorado Aids Project2490 W 26th Ave Bdg A 300 Denver, CO 80211		501(c)3		50,180	FMV	Food	Food Distribution
Pinnacle Charter School 1001 W 84th Ave Room 127 Federal Hts, CO 80260				49,109	P FMV	Food	Food Distribution
Boulder Valley School District RE-26500 E Arapahoe Road Room 127 Boulder, CO 80303				48,331	L FMV	Food	Food Distribution
Kıds Cafe10700 E 45th Ave Denver, CO 80239		501(c)3		45,865	5 FMV	Food	Food Distribution
Englewood School District #1 3695 S Lincoln Englewood, CO 80110				45,406	5 FMV	Food	Food Distribution
Roaring Fork High School 2270 Highway 133 Carbodale, CO 81623				44,772	2 FMV	Food	Food Distribution
Fremont Cnty Samaritan 917921 E Washington Ave Riverton, WY 82501		501(c)3		44,026	5 FMV	Food	Food Distribution
Brush School District RE-2J 527 Industrial Park Road Brush, CO 80723				42,991	L FMV	Food	Food Distribution
Logan County230 N 10th Ave Sterling, CO 80751		501(c)3		42,780	FMV	Food	Food Distribution
Caring Ministry420 E Railroad Fort Morgan, CO 80701		501(c)3		42,658	FMV	Food	Food Distribution

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DYC - Denver7866 Mansfield Parkway PO Box 259 Denver,CO 80235				42,242	∑ FM∨	Food	Food Distribution
Littleton School District #6 5759 Wyndermere PO Box 259 Littleton, CO 80120				41,547	, FMV	Food	Food Distribution
Montbello Coop Ministry4685 Peoria St Ste 231A Denver, CO 80239		501(c)3		40,183	B FM∨	Food	Food Distribution
Lake County School District R-1107 Spruce Street Leadville, CO 80461				39,159	FMV	Food	Food Distribution
Platte Valley School District 901 Campbell St Kersey, CO 80644				38,386	5 FMV	Food	Food Distribution
Weld Cnty School District RE-1901 Birch Street Gilcrest, CO 80623				37,616	5 FMV	Food	Food Distribution
Powell American Legion143 S Clark Street Powell, WY 82435		501(c)3		37,499	FMV	Food	Food Distribution
Weld County School District RE-3J4977 Weld County Rd 59 Keenesburg, CO 80643				36,304	FMV	Food	Food Distribution
Windsor School District RE-4 180 N 8th Street Windsor, CO 80550				35,470	) FMV	Food	Food Distribution
Manna House2343 Mountain View Dr Cody, WY 82414		501(c)3		35,247	FMV	Food	Food Distribution

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Eaton School DistrictRE-2 HS114 Park Avenue Eaton, CO 80615				34,552	2 FMV	Food	Food Distribution
Lift-Up Garfield800 Railroad Rifle,CO 81650		501(c)3		34,118	B FMV	Food	Food Distribution
Johnstown - Letford2 N Jay Avenue Johnstown,CO 80534				34,027	7 FMV	Food	Food Distribution
Fort Lupton School District RE-8530 Renyolds Fort Lupton, CO 80621				32,549	FMV	Food	Food Distribution
Bethany Fellowship Church 160 Pleasant View Lane Worland, WY 82401		501(c)3		32,105	5 FMV	Food	Food Distribution
Douglas Snr Citizen Cntr340 1st Street West Douglas, WY 82633		501(c)3		31,768	B FMV	Food	Food Distribution
Gathering Place-Food Pantry 1535 High St Denver, CO 80218		501(c)3		29,751	FMV	Food	Food Distribution
Moffat County School District RE-1900 Finley Lane Craig, CO 81625				29,614	f FMV	Food	Food Distribution
Jefferson County School District R-11829 Denver West Drive 27 Golden, CO 80401				28,989	P FMV	Food	Food Distribution
Salvation ArmyFamily Services2201 Stout St Denver, CO 80205		501(c)3		28,581	FMV	Food	Food Distribution
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Sharing and Caring3739 Downing Denver, CO 80205		501(c)3		28,550	) FMV	Food	Food Distribution
Joshua's Storehouse334 S Wolcott St Casper, WY 82601		501(c)3		28,520	FMV	Food	Food Distribution
Scott United Methodist2880 Garfield St Denver, CO 80205		501(c)3		28,473	FMV	Food	Food Distribution
Antioch COGIC6825 E 26th Ave Denver,CO 80207		501(c)3		26,489	FMV	Food	Food Distribution
Elizabeth School District C-1 137 Walnut Street Elizabeth, CO 80107				26,058	FMV	Food	Food Distribution
Family Ministries 95 19th Street Wheatland, WY 82201		501(c)3		25,687	FMV	Food	Food Distribution
Salvation ArmyAdult4751 North Broadway Denver,CO 80216		501(c)3		25,224	f FMV	Food	Food Distribution
Garfield School District #16 800 Cardinal Way Parachute, CO 81635				23,009	FMV	Food	Food Distribution
Agape Life Church5970 W 60th Ave Arvada, CO 80003		501(c)3		22,842	P FMV	Food	Food Distribution
Arapahoe House8801 Lipan St Thornton, CO 80221		501(c)3		22,620	FMV	Food	Food Distribution

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Rose of Sharon Food Bank 5306 N Lincoln St Denver, CO 80216		501(c)3		22,431	L FMV	Food	Food Distribution			
Weld County1108 H Street Greeley,CO 80758		501(c)3		22,134	FMV	Food	Food Distribution			
Clear Creek County School District185 Beaver Bk Canyon Rd Evergreen, CO 80439				21,899	) FMV	Food	Food Distribution			
Niobrara Senior Center611 E 6th Street Lusk, WY 82225		501(c)3		20,795	5 FMV	Food	Food Distribution			
Ecumenical Refugee Srvcs 1600 Downing St Ste 400 Denver, CO 80218		501(c)3		20,661	FMV	Food	Food Distribution			
Burlington School District RE-6J450 11th Street Burlington, CO 80807				19,749	FMV	Food	Food Distribution			
Grant Ave St Reach1600 Grant St Denver, CO 80203		501(c)3		19,423	B FMV	Food	Food Distribution			
New Genesis 1680 Sherman St Denver, CO 80203		501(c)3		19,413	B FMV	Food	Food Distribution			
Strasburg School District #31J56727 E Colorado Avenue Strasburg, CO 80136				19,296	5 FMV	Food	Food Distribution			
Praise Center Church3105 W Florida Ave Denver, CO 80219		501(c)3		19,281	FMV	Food	Food Distribution			
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VOA Shelters2660 Larımer St Denver,CO 80205		501(c)3		19,267	7 FMV	Food	Food Distribution			
Pueblo County2631 E 4th St Pueblo,CO 81001	_	501(c)3		18,990	FMV	Food	Food Distribution			
New Hope Ministries875 S Sheridan Lakewood, CO 80226	_	501(c)3		18,527	7 FMV	Food	Food Distribution			
Yuma School District RJ-1 500 S Elm Yuma,CO 80759				18,475	5 FMV	Food	Food Distribution			
Bennett Elementary School 462 8th Street Bennett, CO 80102				18,408	B FMV	Food	Food Distribution			
University Church of Christ 2000 S Milwaukee St Denver, CO 80210		501(c)3		18,400	FMV	Food	Food Distribution			
NOWCAP317 S 6th Street Thermopolis, WY 82443		501(c)3		18,219	FMV	Food	Food Distribution			
Poudre School District R-1 2415 E LaPorte Ave Fort Collins, CO 80521				18,189	9 FMV	Food	Food Distribution			
Eagle County School District RE-50J600 Eagle Road Vail, CO 81620				17,992	2 FMV	Food	Food Distribution			
SJB Child Development Centers Inc1511 12th Avenue Greeley, CO 80631				17,947	7 FMV	Food	Food Distribution			

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Weld School District RE-9 210 W 1st Street Ault, CO 80610				17,628	B FMV	Food	Food Distribution			
Park School District R-3 1600 Manford Avenue Estes Park, CO 80517				17,537	, FMV	Food	Food Distribution			
Moffat County DSS595 Breeze Street Craig, CO 81625		501(c)3		17,044	FMV	Food	Food Distribution			
Thompson School District R- 2J2890 N Monroe Avenue Loveland, CO 80538				17,009	FMV	Food	Food Distribution			
Redeeming Love Fellowship 1201 W 41st Ave Denver, CO 80211		501(c)3		16,641	. FMV	Food	Food Distribution			
Servicios de la Raza Inc 4055 Tejon St Denver, CO 80211		501(c)3		16,256	5 FMV	Food	Food Distribution			
Steamboat Springs School District325 ASPEN ST Steamboat Springs,CO 80477				16,083	B FM∨	Food	Food Distribution			
His Provision Inc705 Ulysses St Golden, CO 80401		501(c)3		15,765	5 FMV	Food	Food Distribution			
Glenrock Comm Services615 West Deer Glenrock, WY 82637		501(c)3		15,281	. FMV	Food	Food Distribution			
From The Heart Ministries 2507 N Street Hwy 414 Urie, WY 82939		501(c)3		14,809	FMV	Food	Food Distribution			

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Yuma County340 Birch Street Wray,CO 80758		501(c)3		14,723	3 FMV	Food	Food Distribution
East Denver Bible Baptist Church2937 Fillmore Denver, CO 80205		501(c)3		14,701	FMV	Food	Food Distribution
Epworth United Methodist 3401 High St Denver, CO 80205		501(c)3		14,454	FMV	Food	Food Distribution
Love Christian Fellowship 4651 Tulsa Ct W Denver, CO 80239				13,945	5 FMV	Food	Food Distribution
American Lutheran Memorial 501 Raleigh Street Denver,CO 80204		501(c)3		13,905	5 FMV	Food	Food Distribution
Cross Roads of the Rockies 2707 W Mississippi Ave Denver, CO 80219		501(c)3		13,788	FMV	Food	Food Distribution
Project Angel Heart4190 Garfield St Unit 5 Denver, CO 80216		501(c)3		13,721	FMV	Food	Food Distribution
Big Piney Food Closet630 Piney Dr Big Piney, WY 83113		501(c)3		13,619	FMV	Food	Food Distribution
BREAD30 N Summit Street Newcastle, WY 82701		501(c)3		13,525	5 FMV	Food	Food Distribution
Weld County School District #62508 4th Ave Greeley, CO 80631				13,201	. FMV	Food	Food Distribution

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FBRCSFP10700 E 45th Ave Denver, CO 80239		501(c)3		12,840	FMV	Food	Food Distribution
Buffalo Senior Center671 W Fetterman Buffalo, WY 82834		501(c)3		12,516	5 FMV	Food	Food Distribution
South Big Horn Food Pntr 1285 Lane 39 Otto, WY 82434		501(c)3		12,470	FMV	Food	Food Distribution
Platte Canyon School District #11737 Park County Rd 43 Bailey, CO 80421				12,115	5 FMV	Food	Food Distribution
Little Debbies Child Care 14281 E Exposition Avenue Aurora, CO 80012				11,933	B FMV	Food	Food Distribution
Star Valley Senior Center 540 Washington Street Afton, WY 83110		501(c)3		11,565	5 FMV	Food	Food Distribution
St Thomas Church9 South First Street Dubois, WY 82513		501(c)3		11,272	2 FMV	Food	Food Distribution
Holyoke School District RE- 1J326 E Kellogg Street Holyoke, CO 80734				10,911	L FMV	Food	Food Distribution
Warren Village Inc1323 Gilpin St Denver, CO 80218		501(c)3		10,841	L FMV	Food	Food Distribution
Excelsior Youth Center 15001 E Oxford Avenue Aurora, CO 80014				10,692	PMV FMV	Food	Food Distribution

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organization or government		ıf applicable	grant	cash assistance	(book, FMV, appraisal, other)		or assistance
Wiggins School District RE- 50J320 Chapman Street Wiggins, CO 80654				10,639	FMV	Food	Food Distribution
Meeker School District RE-1 Bob Tucker Drive Meeker, CO 81641				10,534	f FMV	Food	Food Distribution
Friendship Baptist Bailey 1033 Rim Rock Road Bailey,CO 80421		501(c)3		10,513	B FMV	Food	Food Distribution
St Vrain Valley School District RE-12929 Clover Basin Drive Longmont, CO 80503				10,441	L FMV	Food	Food Distribution
Light & Life Community220 S Yarrow Lakewood,CO 80226		501(c)3		10,221	L FMV	Food	Food Distribution
Capitol Hill Comm Serv1420 Ogden Denver, CO 80218		501(c)3		10,218	B FMV	Food	Food Distribution
Feeding Minds6000 W 9th Ave Lakewood, CO 80214		501(c)3		10,171	L FMV	Food	Food Distribution
Our Saviors Lutheran318 E 6th St Casper, WY 82601		501(c)3		10,101	L FMV	Food	Food Distribution
Project Senior Support1402 Miner St Idaho Springs, CO 80452		501(c)3		9,957	7 FMV	Food	Food Distribution
Byers School District #32J 444 E Front Street Byers, CO 80103				9,866	5 FMV	Food	Food Distribution

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Wray School District RD-2 30222 County Road 35 Wray, CO 80758				9,683	B FMV	Food	Food Distribution			
Seniors' Resource Cntr5120 Hwy 73 Evergreen, CO 80439	-	501(c)3		9,249	FMV	Food	Food Distribution			
Human ServiceEagle County 551 Broadway Eagle,CO 81631	-	501(c)3		8,901	L FMV	Food	Food Distribution			
Kemmerer HRC506 Cedar Avenue Kemmerer, WY 83101	-	501(c)3		8,755	5 FMV	Food	Food Distribution			
Jefferson Hills Corporation 1290 Potomac Street Aurora, CO 80014	_			8,700	FMV	Food	Food Distribution			
Church in the City1580 Gaylord Denver, CO 80206	_	501(c)3		8,674	f FMV	Food	Food Distribution			
Calvary Temple7390 West 38th Wheat Ridge, CO 80033	_	501(c)3		8,400	FMV	Food	Food Distribution			
Summit County Soc Serv360 Peak One Dr Ste 230 Frisco, CO 80443	_	501(c)3		8,395	5 FMV	Food	Food Distribution			
Dahlia Street Church1100 Dahlia Street Denver, CO 80220	_	501(c)3		8,391	L FMV	Food	Food Distribution			
Lurdine's Cupboard & Resource3205 Adams St Denver, CO 80205	_	501(c)3		8,370	FMV	Food	Food Distribution			

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St Anthonys Food Bank3801 West Ohio Ave Denver, CO 80219		501(c)3		8,367	7 FMV	Food	Food Distribution			
Senior Support Serv846 E 18th Ave Denver, CO 80218		501(c)3		8,203	B FMV	Food	Food Distribution			
Limon School District #RE- 4J874 F Avenue Limon, CO 80828				8,165	5 FMV	Food	Food Distribution			
Fairplay Adventist Comm801 Castello Avenue Fairplay,CO 80440		501(c)3		8,011	L FMV	Food	Food Distribution			
Phillips County DSS127 E Denver Ste A Holyoke, CO 80734		501(c)3		7,997	7 FMV	Food	Food Distribution			
Bethlehem Lutheran School 2100 Wadsworth Blvd Lakewood, CO 80215				7,985	5 FMV	Food	Food Distribution			
Lift-Up Routt County2125 Curve Ct Steamboat Springs, CO 80487		501(c)3		7,952	2 FMV	Food	Food Distribution			
South Routt School District RE-3305 N Grant Oak Creek,CO 80467				7,926	5 FMV	Food	Food Distribution			
Kıowa Creek231 Cheyenne St Kıowa,CO 80117		501(c)3		7,873	FMV	Food	Food Distribution			
Buffalo School District RE-4J 315 Lee Street Merino, CO 80741		!		7,588	FMV	Food	Food Distribution			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of	(h) Purpose of grant or assistance			
St John's Lutheran Chrch70 East Fifth Street Lovell, WY 82431		501(c)3		7,304	FMV	Food	Food Distribution			
Park County School District RE-2640 Hathaway Street Fairplay, CO 80440				7,208	FMV	Food	Food Distribution			
Haxtun School District RE-2J 201 W Powell St Haxtun, CO 80731				6,962	P. FMV	Food	Food Distribution			
Liberty Plains604 Summit Simla,CO 80835		501(c)3		6,932	P. FMV	Food	Food Distribution			
Griffith Center for Children 12163 S Perry Park Road Larkspur, CO 80118				6,812	: FMV	Food	Food Distribution			
Gathering Place1535 High St Denver, CO 80218		501(c)3		6,808	FMV	Food	Food Distribution			
Cleo Wallace Center8405 Church Ranch Road Broomfield, CO 80021				6,800	FMV	Food	Food Distribution			
Cherry Grove Preschool 14303 E Evans Avenue Aurora, CO 80014				6,779	FMV	Food	Food Distribution			
West End School District RE- 2340 Adams Street Naturita, CO 81422				6,715	5 FMV	Food	Food Distribution			
DYC Grand Junction360 28th Road Grand Junction, CO 81501				6,662	P. FMV	Food	Food Distribution			

Form 990,Schedule I, Part	t II, Grants a	and Other Assistanc	e to Governments	and Organization	s in the United Sta	ites	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Holy Family Elementary School786 26 40180 Road Grand Junction, CO 81506				6,614	FMV	Food	Food Distribution
Rangely School District560 River Road Rangely, CO 81648				6,543	FMV	Food	Food Distribution
Julesburg School District RE- 1525 Spruce Julesburg Julesburg, CO 80737				6,365	5 FMV	Food	Food Distribution
Wright Community Assist265 Rochelle Drive Wright, WY 82732		501(c)3		6,277	FMV	Food	Food Distribution
Annunciation School3536 Lafayette Street Denver, CO 80205				6,186	5 FMV	Food	Food Distribution
Stratton School District R-4 219 Illinois Avenue Stratton, CO 80836				6,183	B FMV	Food	Food Distribution
Crook County FV-SAS116 North West Street Sundance, WY 82729		501(c)3		6,058	B FMV	Food	Food Distribution
St Josephs School127 N Howes Street Fort Collins, CO 80521				6,056	5 FMV	Food	Food Distribution
Project Safe1741 Vine St Denver, CO 80206		501(c)3		6,056	5 FMV	Food	Food Distribution
Children's Haven Inc2600 S Sheridan Lakewood, CO 80219				5,976	5 FM∨	Food	Food Distribution

Form 990,Schedule I, Par	t II, Grants a	nd Other Assistanc	e to Governments	s and Organization	ıs in the United Sta	ites	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	n (g) Description of	(h) Purpose of grant or assistance
Denver Childrens Home1501 Albion Street Denver, CO 80220				5,910	D FMV	Food	Food Distribution
Genoa-Hugo School District C113220 W 7th Street Hugo,CO 80821				5,820	) FMV	Food	Food Distribution
Dept of Human Services Gilpin2960 Dory Hill Rd Black Hawk, CO 80442		501(c)3		5,803	B FMV	Food	Food Distribution
Gilpin County School10595 Hwy 119 Blackhawk,CO 80422				5,740	FMV	Food	Food Distribution
St Elizabeth Hungary1060 St Francis Way Denver,CO 80204		501(c)3		5,715	5 FMV	Food	Food Distribution
Hayden School District RE-1 300 Breeze Basin Hayden, CO 81639				5,545	5 FMV	Food	Food Distribution
Mt Saint Vincent Home4159 Lowell Blvd Denver, CO 80211				5,506	5 FMV	Food	Food Distribution
Big Sandy School District 100J619 Pueblo Avenue Simla,CO 80835				5,410	FMV	Food	Food Distribution
Salvation ArmyARP903 Grand Ave Grand Junction, CO 81501		501(c)3		5,400	FMV	Food	Food Distribution
Upton Community Food Bank 821 Holly Upton, WY 82730		501(c)3		5,375	5 FMV	Food	Food Distribution

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance						
Plateau Valley School District #5056600 Hwy 330 Collbran, CO 81624				5,372	: FMV	Food	Food Distribution						
Kiowa School District C-2 525 Comanche Street Kiowa, CO 80117	_			5,360	FMV	Food	Food Distribution						
Shoshoni Presbyterian121 West Second Street Shoshoni, WY 82649	_	501(c)3		5,196	FMV	Food	Food Distribution						
The Delores Project1290 King St PO Box 1406 Denver, CO 80201	_	501(c)3		5,153	FMV	Food	Food Distribution						
Lighthouse Gospel550 S Ave Grand Junction, CO 81501	1	501(c)3		5,003	FMV	Food	Food Distribution						

DLN: 93493319016340

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury Internal Revenue Service

# **Compensation Information**

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of	the orga	nizat ion
Food Bank	of the Roo	ckies

**Employer identification number** 

84-0772672

Pai	Tt I Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel		Housing allowance or residence for personal use			
	Travel for companions	$\Gamma$	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc			1b		
2	Did the organization require substantiation prior to r officers, directors, trustees, and the CEO/Executive		,	2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the control of the c		y			
	Compensation committee	 	Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymer	nt?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of $% \left\{ 1,2,3,3,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4$	line 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		Νo
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in		·			
	in Part III	i iveys	section 33 4330-4(a)(3). It les, describe	8		No
9	If "Yes" to line 8 did the organization also follow the	e rehutt	able presumption procedure described in Regulations	۲		
-	section 53 4958-6(c)?		and productions	9		

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and		(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Kevın Seggelke	(I) (II)	142,533 0	0		4,276 0	14,164 0	160,973 0	0

## Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

]	Ident if ier	Ret urn Ref erence	Explanation
]	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

DLN: 93493319016340

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**Transactions with Interested Persons** 

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

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Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Fo	orm 990-EZ, Part V, line	40b (c) Corrected
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Fo	orm 990-EZ, Part V, line	
1 (a) Name of disqualified person (b) Description of tra		Yes No
2 Enter the amount of tax imposed on the organization managers or disqualified persons during the section 4958	he year under •••\$———	
3 Enter the amount of tax, If any, on line 2, above, reimbursed by the organization	<b>&gt;</b> \$	
Part II Loans to and/or From Interested Persons.		
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 99		
(b) Loan to  (a) Name of interested person and or from the purpose organization? principal amount (d)Balance due default?	(f) Approved by board or committee?	<b>(g)</b> Written agreement?
To From Yes No		Yes No
Total		
Part III Grants or Assistance Benefitting Interested Persons.  Complete if the organization answered "Yes" on Form 990, Part IV, line 27.		
(h)Palationship hatwaan interested person	A mount of grant or type	ofassistance
Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a,	28h or 28c	
(b) Relationship	200, 01 200.	(e) Sharing of
(a) Name of interested person between interested (c) A mount of person and the transaction (d) De	escription of transactior	organization's revenues?
organization  Allan Fries Board Member 323,526 Installe	ed industrial kitchen	<b>Yes No</b> No

DLN: 93493319016340

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

**NonCash Contributions** 

Name of the organization Food Bank of the Rockies

**Employer identification number** 

					84-0772672			
'a	TI Types of Property	(a)	(b)	(c)		(d)		
		Check If	Number of Contributions	Revenues reported on Form 990, Part VIII, line 1g	Method of		ning	
	Art—Works of art	аррисавіе		I I I I I I I I I I I I I I I I I I I				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
	Cars and other vehicles	Х	3	31,611	FMV			
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
,	Qualified conservation contribution—Historic structures							
	Qualified conservation contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Realestate—Other							
	Collectibles							
	Food inventory	Х	31,434,695	38,974,437	FMV			
	Drugs and medical supplies .							
	Taxıdermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Joe Sakıc							
	Event							
	Other ► ( <u>Signage</u> )	X	2	478	FMV			
	Other (Standard)		,	1,917	EM)/			
	Other ► ( <u>Signange</u> ) Vehicle	X	2	1,917	F   V			
	Other ► (Repair )	X	2	690	FMV			
	Other ► (Lunches )	X	2		FMV			
	Other ► (IT Supplies )	X	2		FMV			
	Number of Forms 8283 received	l bv the ora	anization during the tax ve	ar for contributions				
	for which the organization compl				29			
						Ī	Yes	No
)a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year for exempt purposes for the enti			on, and which is not require	d to be used	30a		No
ь	If "Yes," describe the arrangem							
	Does the organization have a gif			review of any non-standard	contributions?	31	Yes	
a	Does the organization hire or us contributions?	e third part	es or related organizations	to solicit, process, or sell	non-cash	32a		Νo
	If "Yes," describe in Part II If the organization did not report	revenues i	n column (c) for a type of p	roperty for which column (a	) is checked,			
	describe in Part II							

#### 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.

Ident if ier	Ret urn Reference	Explanation
Contribution of Food Inventory	,	The organization received multiple contributions of food inventory from multiple contributors. In total, 31,434,695 pounds of food inventory were donated

Schedule M (Form 990) 2009

# **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

Open to Public Inspection

OMB No 1545-0047

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

► Attach to Form 990.

Name of the organization Food Bank of the Rockies

**Employer identification number** 

84-0772672

ldentifier	Return Reference	Explanation
New Program Services Undertaken	Part III, Line 2	Another USDA Commodity Program called the School Lunch Program (SLP) was added in the current year Under the SLP Contract, the Food Bank of the Rockies distributes USDA commodities to 190 schools in Northern Colorado for qualified recipients of free and/or reduced school lunches
Executive Committee	Part VI, Section A, Line 1a	The Executive Committee consists of those members of the Board who are from time to time serving as officers of FBR, and the chairpersons of the Development Committee and Operations Committee. In addition, the Chairperson of the Board serves as the Chairperson of the Executive Committee, and the President and CEO is a non-voting ex officio member of the Executive Committee. The outgoing Chairperson of the Executive Committee is a non-voting ex officio member of the Executive Committee for up to one year following his/her departure from the post of Chairperson. The Executive Committee has the authority to (1) review the operations of FBR and receive the reports and recommendations of the President and CEO, (2) establish direction, goals, priorities, and assignments for the other committees, if any, (3) coordinate the activities of those other committees, (4) explore major policy matters and make recommendations to the Board with respect to such matters, (5) evaluate the performance of the President and CEO at least annually, and (6) report to the Board with respect to its actions.
Review of Form 990	Part VI, Section B, Line 11	The Audit Committee reviews the return in detail before the return is filed. After the review by the Audit Committee, the Board of Directors receives a copy of the Form 990 prior to it being filed.
Conflict of Interest Policy	Part VI, Section B, Line 12c	The board members complete a conflict of interest disclosure on an annual basis. If any conflicts of interest exist, the board members recuse themselves from voting on any matters pertaining to the conflict. The organization inquires about additional conflicts of interest at board meetings to identify any new conflicts of interest that may have arisen since the annual disclosure was signed.
Process for Determining Compensation	Part VI, Section B, Lines 15a and 15b	Every two years, the CEO gathers salary compensation data from salary survey comparisons for each position within the organization. The Executive Committee uses this information to set the salary for the CEO Based upon employee performance reviews and the salary survey data, a salary increase is proposed for all employees, including the CEO and other officers and key employees. The salary increases are presented to the Executive Committee, who reviews and approves the proposed salary levels. The organization maintains the necessary documentation of how the salary levels are determined. Employee reviews are done each year.
Documents Available to Public	Part VI, Section C, Line 19	The organization's financial statements are available to the public on the organization's wiebsite. The governing documents and conflict of interest policy are not available to the public.

DLN: 93493319016340

SCHEDULE R (Form 990)

# **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
Food Bank of the Rockies

84-0772672

84-0772072

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

Name, address, and EIN of disregarded entity

**(b)** Primary activity (c)
Legal domicile (state
or foreign country)

(d) Total income (e) End-of-year assets (f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b)
Primary activity

(c)
Legal domicile (state
or foreign country)

(d) Exempt Code section

Public charity status (if section 501(c)(3)) (f) Direct controlling entity

Food Bank of the Rockies Endowment Fund

10700 East 45th Avenue

Investments

CO

501(c)(3)

7-509(a)(1)

Denver, CO 80239 26-0211983

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990	, Part IV,	line 34
	because it had one or more related organizations treated as a partnership during the tax year.)		

(a) Name, address, and EIN of related organization

(b) Primary activity

(c) Legal domicile (state or foreign country)

(d) Direct controlling entity

(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)

**(f)** Share of total income

(g) Share of end-of-year assets

(h) Disproprtionate allocations?

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

(j) General or managing partner?

Yes No Yes

No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity

(c) Legal domicile (state or foreign

country)

(d) Direct controlling entity

(e) Type of entity (C corp, S corp, or trust)

(f) Share of total ıncome

(g) Share of end-of-year assets

(h) Percentage ownership

Sche	Chedule R (Form 990) 2009				
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.	)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No	
<b>1</b> D	ouring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No	
b	Gıft, grant, or capital contribution to other organization(s)	1b		No	
c	Gıft, grant, or capıtal contribution from other organization(s)	<b>1</b> c		No	
d	Loans or loan guarantees to or for other organization(s)	1d		No	
е	Loans or loan guarantees by other organization(s)	1e		No	
f	Sale of assets to other organization(s)	<b>1</b> f		No	
g	Purchase of assets from other organization(s)	<b>1</b> g		No	
h	Exchange of assets	1h		No	
i	Lease of facilities, equipment, or other assets to other organization(s)	<b>1</b> i		No	
	Lease of facilities, equipment, or other assets from other organization(s)	1i		No	

Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

I Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

Reimbursement paid to other organization for expenses

Reimbursement paid by other organization for expenses

**q** Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	<b>(b)</b> Transaction type(a-r)	(c) Amount involved
(1) Food Bank of the Rockies Endowment Fund	0	2/1 993

(1) See Additional Data Table

(2)

(3) (4)

(5)

(6)

341,883

No

No

No

No

No

No

No

11

1m

1n

10

**1**q

Yes

### Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No