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Return of Organization Exempt From Income Tax

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

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

2010

Open to Public
Inspection

A For the 2010 calendar year, or tax year beginning , 2010, and ending , 20

B Check if applicable

Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization DAILY BREAD INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

Room/suite

815 E FEE AVENUE

City or town, state or country, and ZIP + 4

MELBOURNE FL 32901-4612

D Employer identification number

59-2846212

E Telephone number

321 723-1060

F Gross receipts \$ 531374

F Name and address of principal officer JOHN E FARRELL, EXEC. DIRECTOR

815 E FEE AVENUE MELBOURNE FL 32901-4612

H(a) Is this a group return for affiliates? Yes NoH(b) Are all affiliates included? Yes No

If "No," attach a list (see instructions)

H(c) Group exemption number ►

I Tax-exempt status 501(c)(3) 501(c) () ► (insert no) 4947(a)(1) or 527

J Website: ► www.dailybreadinc.org

K Form of organization Corporation Trust Association Other ►

L Year of formation: 1987

M State of legal domicile FL

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
SOUP KITCHEN, FOOD DISTRIBUTION CENTER

2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets.
 3 Number of voting members of the governing body (Part VI, line 1a)
 4 Number of independent voting members of the governing body (Part VI, line 1b)
 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)
 6 Total number of volunteers (estimate if necessary)
 7a Total unrelated business revenue from Part VIII, column (C), line 12
 b Net unrelated business taxable income from Form 990-T, line 34

3	17
4	17
5	19
6	500
7a	
7b	

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	381841	377793
9 Program service revenue (Part VIII, line 2g)		
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9228	12848
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	142307	140733
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	533376	531374

	Prior Year	Current Year
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)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	165176	173695
16a Professional fundraising fees (Part IX, column (A), line 11e)		
b Total fundraising expenses (Part IX, column (D), line 25) ►		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	325238	293842
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	490414	467537
19 Revenue less expenses. Subtract line 18 from line 12	42962	63837

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	2461057	2527682
21 Total liabilities (Part X, line 26)	11388	14176
22 Net assets or fund balances. Subtract line 21 from line 20	2449669	2513506

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.

Sign Here	► <i>John E. Farrell</i>	Date 8/15/2011
	► <i>John E. Farrell, Executive Director</i>	
	Type or print name and title	

Paid Preparer See Only	Print/Type preparer's name JEAN ANN LITTLEFIELD	Preparer's signature <i>John E. Farrell</i>	Date 8/13/11	Check <input type="checkbox"/> if self-employed	PTIN P00289887
	Firm's name ► LITTLEFIELD AND WHITWORTH, INC			Firm's EIN ► 59-3417114	
	Firm's address ► 2800 AURORA RD STE C MELBOURNE FL 32935-2096			Phone no 321 254-800	

discuss this return with the preparer shown above? (see instructions) Yes No