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Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning **JUL 1, 2010** and ending **JUN 30, 2011**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization GREATER PITTSBURGH COMMUNITY FOOD BANK		D Employer identification number 25-1420599
	Doing Business As		E Telephone number 412-460-3663
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 37,648,617.
	1 NORTH LINDEN STREET		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or country, and ZIP + 4 DUQUESNE, PA 15011		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
F Name and address of principal officer: D. JERMAINE HUSSER SAME AS C ABOVE			H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.PITTSBURGHFOODBANK.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1982 M State of legal domicile: PA	

Part I Summary

1 Briefly describe the organization's mission or most significant activities. COMMITTED TO ELIMINATING HUNGER THROUGHOUT SOUTHWESTERN PENNSYLVANIA.	
2 Check this box <input type="checkbox"/> 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)	32
4 Number of independent voting members of the governing body (Part VI, line 1b)	32
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	115
6 Total number of volunteers (estimate if necessary)	12130
7a Total unrelated business revenue from Part VIII, column (C), line 12	0.
b Net unrelated business taxable income from Form 990-T, line 34	0.
8 Contributions and grants (Part VIII, line 1h)	30,857,762.
9 Program service revenue (Part VIII, line 1i)	35,138,007.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,689,132.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10, and 11e)	168,518.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	32,647,699.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	84,063.
14 Benefits paid to or for members (Part IX, column (A), line 4)	<67,713.>
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<80,383.>
16a Professional fundraising fees (Part IX, column (A), line 11e)	32,647,699.
b Total fundraising expenses (Part IX, column (D), line 25)	37,224,538.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	0.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	0.
19 Revenue less expenses. Subtract line 18 from line 12	4,686,577.
20 Total assets (Part X, line 16)	4,973,742.
21 Total liabilities (Part X, line 26)	0.
22 Net assets or fund balances. Subtract line 21 from line 20	0.

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	Signature of officer D. JERMAINE HUSSER, CHIEF EXECUTIVE OFFICER	Date	
Paid Preparer Use Only	Print/Type preparer's name SUSAN M. KIRSCH	Preparer's signature <i>S. Kirsch</i>	Date 1/24/12
	Firm's name SCHNEIDER DOWNS & CO., INC.	Firm's EIN	
	Firm's address 1133 PENN AVENUE PITTSBURGH, PA 15222	Phone no. (412) 261-3644	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

G17 21

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☒ X

1 Briefly describe the organization's mission:

OUR MISSION IS TO FEED THE HUNGRY IN SOUTHWEST PENNSYLVANIA THROUGH A NETWORK OF PARTNERS AND TO MOBILIZE OUR REGION TO END HUNGER.

WE ACCOMPLISH THIS MISSION BY:

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 337,123.30 including grants of \$) (Revenue \$ 1,795,413.)
THROUGH THE REGULAR FOOD DISTRIBUTION PROGRAM, THE FOOD BANK ACCEPTS GOVERNMENT COMMODITIES, PRODUCE, FOOD AND NON-FOOD GROCERY PRODUCTS DONATED BY BOTH NATIONAL AND LOCAL FOOD MANUFACTURERS AND DISTRIBUTORS, AS WELL AS CONCERNED COMMUNITY INDIVIDUALS WHO CONDUCT LOCAL FOOD DRIVES. IN ADDITION TO THE GOVERNMENT COMMODITIES AND DONATED PRODUCT, THE FOOD BANK OFFERS ITS AGENCIES THE OPTION TO PURCHASE PRODUCTS FROM THE FOOD BANK'S WHOLESALE BUYING PROGRAM. THROUGH THE EFFORTS OF THE FOOD BANK'S OPERATIONS APPROXIMATELY 27,338,000 POUNDS OF GROCERY PRODUCTS WERE DISTRIBUTED TO LOW-INCOME INDIVIDUALS AND FAMILIES THROUGH ITS 380+ MEMBER AGENCIES DURING FY2010-11. OVER 8 MILLION POUNDS OF THAT PRODUCT WAS DISTRIBUTED IN OUR REGIONAL AREA OUTSIDE OF ALLEGHENY COUNTY IN FY2010-11.

4b (Code:) (Expenses \$ 1,312,903. including grants of \$) (Revenue \$ 83,508.)
THE AGENCY OUTREACH WORK IS FOCUSED ON IMPROVING THE QUALITY AND QUANTITY OF DISTRIBUTED PRODUCT AND TO PROVIDE EQUAL ACCESS TO FOOD ASSISTANCE TO ELIGIBLE LOW-INCOME PEOPLE IN ALLEGHENY COUNTY AND OUR REGIONAL SERVICE AREA.

REGIONAL OUTREACH - A 2004 GAP STUDY PROVIDED HARD DATA SHOWING THAT OUR FOOD ASSISTANCE EFFORTS WERE INSUFFICIENT IN OUR REGIONAL COUNTY SERVICE AREA, BASED ON THE REPORTED NEED. THE STUDY ALSO SHOWED THAT THE INFRASTRUCTURE NECESSARY TO MEET THE NEEDS OF THE LOW-INCOME POPULATION IS FRAGILE AND IN MANY CASES, INADEQUATE.

THE OUTREACH TEAM HAS WORKED TO STRENGTHEN AND BETTER UTILIZE OUR

4c (Code:) (Expenses \$ 714,213. including grants of \$) (Revenue \$ 41,754.)
THE FOOD BANK REPACK/VOLUNTEER PROGRAM WORKS IN PARTNERSHIP WITH HUNDREDS OF LOCAL CORPORATIONS, CHURCHES, SCHOOLS, INDIVIDUALS AND CIVIC ORGANIZATIONS TO SUPPORT DAILY CLERICAL AND REPACK OPERATIONS AT THE WAREHOUSE, AS WELL AS SPECIAL EVENTS AND COMMUNITY FOOD DROPS. IN ADDITION TO MAINSTREAM VOLUNTEERS, THE FOOD BANK ALSO HELPS DISADVANTAGED YOUTH, PEOPLE WITH DISABILITIES, WELFARE TO WORK PARTICIPANTS AND SENIOR RETRAINING PARTICIPANTS PREPARE FOR WORKFORCE READINESS. IN THIS WAY, FOOD GETS OUT TO HUNGRY PEOPLE WHILE AT THE SAME TIME DIVERSE POPULATIONS ARE BROUGHT TOGETHER, EMPHASIZING THE IMPORTANCE AND RELEVANCE OF COMMUNITY SERVICE. MORE THAN 12,000 VOLUNTEERS (2,000 MORE THAN LAST YEAR) GAVE MORE THAN 66,000 HOURS OF SERVICE TO THE FOOD BANK IN FY 2010-11, SAVING THE FOOD BANK WELL OVER

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

(Expenses \$ 805,460. including grants of \$) (Revenue \$ 167,014.)4e Total program service expenses 36,544,906.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f 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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	27	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	115	
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 (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	X	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	N/A	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	N/A	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	N/A	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	N/A	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	N/A	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	N/A	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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

Check if Schedule O contains a response to any question in this Part VI

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	32	
b Enter the number of voting members included in line 1a, above, who are independent	32	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

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

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

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►
SHARON HARM - 412-460-3663
1 NORTH LINDEN STREET, DUQUESNE, PA 15110

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☐**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.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LORI ASHBY BOARD MEMBER	0.90	X						0.	0.	0.
MONTY BEDI BOARD MEMBER	0.30	X						0.	0.	0.
MARVA BROWN BOARD MEMBER ENTERED 6/11	0.30	X						0.	0.	0.
TONY BRADY BOARD MEMBER EXITED 6/11	0.30	X						0.	0.	0.
WILLIAM COTTER BOARD MEMBER	0.40	X						0.	0.	0.
DEBRA DOERR BOARD MEMBER	0.30	X						0.	0.	0.
LISA FLORO BOARD MEMBER	0.20	X						0.	0.	0.
SUSAN FLYNN BOARD MEMBER	1.20	X						0.	0.	0.
ANNE FOULKES BOARD MEMBER ENTERED 9/10	0.30	X						0.	0.	0.
HENRY GORMAN BOARD MEMBER	0.30	X						0.	0.	0.
TERRI GOULD BOARD MEMBER	6.00	X						0.	0.	0.
COSETTE GRANT-OVERTON BOARD MEMBER ENTERED 6/11	0.20	X						0.	0.	0.
MARK GRAY BOARD MEMBER	3.00	X						0.	0.	0.
KEN JOHNSTON BOARD MEMBER ENTERED 9/10	0.30	X						0.	0.	0.
RYAN KELLY BOARD MEMBER ENTERED 6/11	0.20	X						0.	0.	0.
SCOTT LAMMIE BOARD MEMBER	1.50	X						0.	0.	0.
AMY LEWIS BOARD MEMBER ENTERED 11/10	0.30	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GREGORY LINTNER BOARD MEMBER	2.00	X						0.	0.	0.
BILL MCCLOY BOARD MEMBER	1.00	X						0.	0.	0.
JIM MCDONALD BOARD MEMBER	1.40	X						0.	0.	0.
GEORGE MCGRADY BOARD MEMBER	0.60	X						0.	0.	0.
MICHAEL MULLEN BOARD MEMBER	0.20	X						0.	0.	0.
WILLIAM NICHOLS BOARD MEMBER EXITED 11/10	0.20	X						0.	0.	0.
NATE NORMAN BOARD MEMBER EXITED 3/11	0.20	X						0.	0.	0.
MICHELE OSWALD BOARD MEMBER	0.30	X						0.	0.	0.
CAROL ROBINSON BOARD MEMBER	3.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								534,497.	0.	100,054.
d Total (add lines 1b and 1c)								534,497.	0.	100,054.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **1**

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

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
NEWPORT CREATIVE COMMUNICATIONS 33 RAILROAD AVE, SUITE 1, DUXBURY, MA 02332	DIRECT MAIL SVC	298,063.
BIG PICTURE MEDIA SOLUTIONS ONE ALTOONA PLACE, PITTSBURGH, PA 15228	ADVERTISING/PROF SVCS	294,112.

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

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MIM SEIDEL BOARD MEMBER	0.60	X						0.	0.	0.
MAUREEN SWEENEY BOARD MEMBER	0.30	X						0.	0.	0.
REV. DAVID TAYLOR BOARD MEMBER	1.00	X						0.	0.	0.
CAROL WASHINGTON BOARD MEMBER EXITED 4/11	0.20	X						0.	0.	0.
KEVIN HOLDEN ENTERED 1/11 EMERITUS BOARD MEMBER	0.20	X						0.	0.	0.
HERB SHEAR EMERITUS BOARD MEMBER	0.20	X						0.	0.	0.
MATT SWIDER PRESIDENT	6.00	X		X				0.	0.	0.
DENO DECIANTIS VICE PRESIDENT	2.00	X		X				0.	0.	0.
MEL STEALS SECRETARY	0.50	X		X				0.	0.	0.
ROCCO D'ANGELO TREASURER	2.00	X		X				0.	0.	0.
JOYCE ROTHERMEL CHIEF EXECUTIVE OFFICER	53.00			X				121,553.	0.	21,084.
ANNE HAWKINS CHIEF DEVELOP. OFFICER	45.00			X				79,388.	0.	16,890.
LISA SCALES CHIEF PROGRAM OFFICER	45.00			X				95,182.	0.	12,877.
SHARON HARM CHIEF FINANCIAL OFFICER	48.00			X				81,272.	0.	19,653.
LEO HOKAJ CHIEF TECHNOLOGY OFFICER	45.00			X				85,678.	0.	18,714.
CYNTHIA MOORE CHIEF OUTREACH OFFICER	45.00			X				71,424.	0.	10,836.
Total to Part VII, Section A, line 1c								534,497.		100,054.

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a	161,820.				
	b Membership dues	1b	16,290.				
	c Fundraising events	1c	134,039.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	7661673.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	27,164,185.				
	g Noncash contributions included in lines 1a-1f \$		19,301,436.				
	h Total. Add lines 1a-1f			35,138,007.			
Program Service Revenue	2 a WHOLESALE FOOD PROGRAM	Business Code	900099	1835399.	1835399.		
	b SHARED MAINTENANCE FEE		900099	214,071.	214,071.		
	c TRUCKING SERVICES		900099	33,381.	33,381.		
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			2082851.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			87,069.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross Rents		(i) Real	(ii) Personal				
b Less: rental expenses							
c Rental income or (loss)							
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses							
c Gain or (loss)							
d Net gain or (loss)							
8 a Gross income from fundraising events (not including \$ 134,039. of contributions reported on line 1c). See Part IV, line 18		a					
b Less direct expenses		b					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities See Part IV, line 19		a					
b Less direct expenses	b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MISC	Business Code	900099	4,838.	4,838.		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			4,838.			
	12 Total revenue. See instructions.			37,224,538.	2087689.	0.	<1,158.>

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	630,471.	275,972.	336,541.	17,958.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,185,977.	2,585,926.	470,942.	129,109.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	164,261.	128,811.	28,040.	7,410.
9 Other employee benefits	710,255.	589,850.	95,288.	25,117.
10 Payroll taxes	282,778.	228,489.	43,074.	11,215.
11 Fees for services (non-employees):				
a Management				
b Legal	370.		370.	
c Accounting	38,935.	36,358.	1,592.	985.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	9,634.		9,634.	
g Other	756,621.	387,451.	103,070.	266,100.
12 Advertising and promotion	291,582.	159,828.	131,754.	
13 Office expenses	776,695.	531,484.	75,059.	170,152.
14 Information technology	112,911.	71,227.	34,946.	6,738.
15 Royalties				
16 Occupancy	329,016.	320,196.	7,137.	1,683.
17 Travel	70,430.	51,494.	18,096.	840.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	28,159.	18,493.	9,474.	192.
20 Interest				
21 Payments to affiliates	16,228.	12,398.	3,213.	617.
22 Depreciation, depletion, and amortization	507,825.	484,896.	18,961.	3,968.
23 Insurance	54,731.	53,134.	1,316.	281.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a FOOD DISTRIBUTION	29,746,824.	29,746,824.		
b FREIGHT AND TRUCKING	416,668.	416,668.		
c AGENCY SUPPORT	410,606.	403,746.	1,900.	4,960.
d MISCELLANEOUS	27,433.	17,667.	8,213.	1,553.
e WAREHOUSE EXPENSE	23,994.	23,994.		
f All other expenses				
25 Total functional expenses Add lines 1 through 24f	38,592,404.	36,544,906.	1,398,620.	648,878.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	603,012.	1	1,554,502.
	2 Savings and temporary cash investments	1,352,663.	2	965,093.
	3 Pledges and grants receivable, net	1,155,363.	3	227,478.
	4 Accounts receivable, net	526,201.	4	710,936.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	3,078,354.	8	2,015,578.
	9 Prepaid expenses and deferred charges	33,881.	9	35,225.
	10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a 9,228,575.		
	b Less: accumulated depreciation	10b 4,555,458.		
	11 Investments - publicly traded securities	4,906,783.	10c	4,673,117.
	12 Investments - other securities. See Part IV, line 11	2,362,523.	11	2,799,743.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11		14	
16 Total assets. Add lines 1 through 15 (must equal line 34)	14,018,780.	15	12,981,672.	
Liabilities	17 Accounts payable and accrued expenses	702,136.	16	775,879.
	18 Grants payable		17	
	19 Deferred revenue	848,323.	18	722,373.
	20 Tax-exempt bond liabilities		19	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		20	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21	
	23 Secured mortgages and notes payable to unrelated third parties		22	
	24 Unsecured notes and loans payable to unrelated third parties		23	
	25 Other liabilities. Complete Part X of Schedule D		24	
	26 Total liabilities. Add lines 17 through 25	1,550,459.	25	1,498,252.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	10,630,028.	26	10,590,849.
	28 Temporarily restricted net assets	1,838,293.	27	892,571.
	29 Permanently restricted net assets		28	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		29	
	31 Paid-in or capital surplus, or land, building, or equipment fund		30	
	32 Retained earnings, endowment, accumulated income, or other funds		31	
	33 Total net assets or fund balances	12,468,321.	32	11,483,420.
34 Total liabilities and net assets/fund balances	14,018,780.	33	12,981,672.	

Form 990 (2010)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	37,224,538.
2	Total expenses (must equal Part IX, column (A), line 25)	2	38,592,404.
3	Revenue less expenses Subtract line 2 from line 1	3	<1,367,866.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,468,321.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	382,965.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	11,483,420.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

☒

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
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 separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
3b	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.	X	

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	25,221,487.	24,076,264.	31,844,905.	30,857,762.	35,138,007.	147,138,425.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	25,221,487.	24,076,264.	31,844,905.	30,857,762.	35,138,007.	147,138,425.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,412,853.
6 Public support. Subtract line 5 from line 4						140,725,572.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	25,221,487.	24,076,264.	31,844,905.	30,857,762.	35,138,007.	147,138,425.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	214,296.	218,546.	117,499.	102,231.	87,069.	739,641.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	297,688.	127,558.	103,250.	106,383.	135,303.	770,182.
11 Total support. Add lines 7 through 10						148,648,248.
12 Gross receipts from related activities, etc. (see instructions)					12	17,579,366.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	94.67 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	93.77 %
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐**b 33 1/3% support tests - 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

2010

Open to Public
Inspection

- ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations. Complete Part III.

Name of organization GREATER PITTSBURGH COMMUNITY FOOD BANK	Employer identification number 25-1420599
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2010

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		3,926.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		982.													
c Total lobbying expenditures (add lines 1a and 1b)		4,908.													
d Other exempt purpose expenditures		38587496.													
e Total exempt purpose expenditures (add lines 1c and 1d)		38592404.													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	12,563.	8,529.	8,392.	4,908.	34,392.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures		6,823.	6,714.	3,926.	17,463.

Schedule C (Form 990 or 990-EZ) 2010

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010Open to Public
Inspection

Name of the organization

GREATER PITTSBURGH COMMUNITY FOOD BANK

Employer identification number

25-1420599

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

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

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

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

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

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

☐ Yes

☐ No

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

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

☐ Yes

☐ No

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

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

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

☐ Yes

☐ No

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

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

1a Beginning of year balance

b Contributions

c Net investment earnings, gains, and losses

d Grants or scholarships

e Other expenditures for facilities and programs

f Administrative expenses

g End of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
b					
c					
d					
e					
f					
g					

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

a Board designated or quasi-endowment ▶ _____ %

b Permanent endowment ▶ _____ %

c Term endowment ▶ _____ %

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

(i) unrelated organizations

(ii) related organizations

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		332,699.		332,699.
b Buildings		6,467,164.	2,863,204.	3,603,960.
c Leasehold improvements		18,240.	8,824.	9,416.
d Equipment		1,140,182.	876,156.	264,026.
e Other		1,270,290.	807,274.	463,016.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				4,673,117.

Schedule D (Form 990) 2010

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		

Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶

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

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶

FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under

FIN 48 (ASC 740)

032053
12-20-10

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	37,224,538.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	38,592,404.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	<1,367,866.>
4	Net unrealized gains (losses) on investments	4	382,965.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net) Add lines 4 through 8	9	382,965.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	<984,901.>

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

1	Total revenue, gains, and other support per audited financial statements	1	37,823,189.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	382,965.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	215,686.
e	Add lines 2a through 2d	2e	598,651.
3	Subtract line 2e from line 1	3	37,224,538.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	37,224,538.

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

1	Total expenses and losses per audited financial statements	1	38,808,090.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	215,686.
e	Add lines 2a through 2d	2e	215,686.
3	Subtract line 2e from line 1	3	38,592,404.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	38,592,404.

Part XIV Supplemental Information

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

PART X, LINE 2: THE FOOD BANK FOLLOWS THE CODIFICATION TOPIC ON INCOME

TAXES. THE TOPIC PRESCRIBES A MINIMUM RECOGNITION THRESHOLD AND

MEASUREMENT METHODOLOGY THAT A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN

IN A TAX RETURN IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN FINANCIAL

STATEMENTS. THE FOOD BANK'S STATEMENTS OF FINANCIAL POSITION AT JUNE 30,

2011 AND 2010 DO NOT INCLUDE ANY LIABILITIES ASSOCIATED WITH UNCERTAIN TAX

POSITIONS; FURTHER, THE FOOD BANK HAS NO UNRECOGNIZED TAX BENEFITS. THE

FOOD BANK IS NO LONGER SUBJECT TO EXAMINATION OF ITS TAX RETURNS FOR YEARS

Part XIV Supplemental Information (continued)

BEFORE 2008.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSE 215,686.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSE 215,686.

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2010

Open To Public Inspection

Name of the organization

GREATER PITTSBURGH COMMUNITY FOOD BANK

Employer identification number
25-1420599

Part I

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

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

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

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

☐ **Yes**☐ No

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

(i) Name and address of individual or entry (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
		BLUES EVENT (event type)	GOLF OUTING (event type)	NONE (total number)	
Revenue	1	Gross receipts	227,229.	37,275.	264,504.
	2	Less: Charitable contributions	113,984.	20,055.	134,039.
	3	Gross income (line 1 minus line 2)	113,245.	17,220.	130,465.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	17,680.		17,680.
	7	Food and beverages	7,452.	1,628.	9,080.
	8	Entertainment	81,376.		81,376.
	9	Other direct expenses	106,816.	734.	107,550.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			(215,686.)
	11	Net income summary. Combine line 3, column (d), and line 10			<85,221.>

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

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

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states?

☐ Yes ☐ No

b If "No," explain: _____

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

☐ Yes ☐ No

b If "Yes," explain: _____

11 Does the organization operate gaming activities with nonmembers?☐ Yes ☐ No**12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?☐ Yes ☐ No**13** Indicate the percentage of gaming activity operated in**a** The organization's facility**13a** %**b** An outside facility**13b** %**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?☐ Yes ☐ No**b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____**c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions:**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?☐ Yes ☐ No**b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2010

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

GREATER PITTSBURGH COMMUNITY FOOD BANK

Employer identification number

25-1420599

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	15	83,779.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X		19,217,657.	AVG. WHOLESALE VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>USED COMPUTER</u>)	X	1	0.	N/A
26 Other ► (<u>GIFT CARDS</u>)	X	24	0.	N/A
27 Other ► (<u>AUCTION ITEMS</u>)	X	13	0.	N/A
28 Other ► (<u>MISCELLANEOUS</u>)	X	53	0.	N/A

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

29

0

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

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

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

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

b If "Yes," describe in Part II

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

	Yes	No
30a		X
31	X	
32a	X	
33		

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

Schedule M (Form 990) (2010)

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

SCHEDULE M, PART I, COLUMN (B): THE ORGANIZATION'S RECORDKEEPING
PRACTICE IS CALCULATED ON A MEASUREMENT OF WEIGHT METHOD AND VALUED AT
\$1.66 PER POUND PER FEEDING AMERICA AUDITED VALUATION REPORT. DURING
THE FISCAL YEAR, NUMEROUS DONORS FROM THE COMMUNITY AT LARGE DONATED
APPROXIMATELY 11,576,901 POUNDS OF FOOD ITEMS.

SCHEDULE M, LINE 32B: THE ORGANIZATION USES AN OUTSIDE BROKER TO SELL
SECURITIES RECEIVED AS CONTRIBUTIONS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

GREATER PITTSBURGH COMMUNITY FOOD BANK

Employer identification number

25-1420599

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

1. SERVING AS A CENTRAL COLLECTION FACILITY FOR GROCERY PRODUCTS AND
DISTRIBUTING THEM TO MEMBER AGENCIES SERVING THE NEEDY IN SOUTHWESTERN
PENNSYLVANIA;

2. INVOLVING THE COMMUNITY AS FOOD DONORS, VOLUNTEERS AND FINANCIAL
SUPPORTERS OF THE FOOD BANK AND OUR MEMBER AGENCIES;

3. WORKING COLLABORATIVELY WITH OTHERS ON PROGRAMS THAT EMPOWER THE
NEEDY TO MEET THEIR OWN NUTRITIONAL NEEDS;

4. COMMUNICATING THE NATURE OF AND SOLUTIONS TO THE PROBLEM OF HUNGER.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

OUR PROCUREMENT AND MARKETING (PROMAR) DEPARTMENT IS RESPONSIBLE FOR
SOLICITING FOOD DONATIONS, PURCHASING FOOD AS NECESSARY AND MAXIMIZING
DISTRIBUTION OPPORTUNITIES. THROUGH THEIR EFFORTS THE FOLLOWING
PROGRAMS ARE MANAGED IN ORDER TO ACCOMPLISH THE DISTRIBUTION GOAL:

-PRODUCE TO PEOPLE WAS ESTABLISHED TO MOVE PRODUCE, PERISHABLE FOOD,
AND OCCASIONALLY OVERSTOCKED ITEMS OFF THE WAREHOUSE SHELVES BEFORE
THEY GO TO WASTE AND DISTRIBUTE THEM DIRECTLY TO PEOPLE IN
NEIGHBORHOODS OF HIGH NEED. THIS PROGRAM ALSO HELPS TO CLOSE THE GAP IN
AREAS WHERE PANTRIES MAY HAVE LIMITED STORAGE AND DISTRIBUTION
CAPABILITIES. THE FOOD BANK INCREASED PRODUCE TO PEOPLE POUNDAGE BY
TENFOLD IN FY 2010-11, DISTRIBUTING OVER 2 MILLION POUNDS TO MORE THAN
133,000 PEOPLE AT 11 SITES IN 5 COUNTIES.

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

Schedule O (Form 990 or 990-EZ) (2010)

032211
01-24-11

Name of the organization

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-FARMS & GLEANING - LOCAL FARMS DONATE TO THE FOOD BANK. ADDITIONALLY, WHEN FARMERS HAVE FINISHED THEIR HARVESTING, THE GLEANING PROGRAM ORGANIZES VOLUNTEERS TO HARVEST THE EXCESS. OVER 360,000 POUNDS OF FRESH PRODUCE CAME TO THE FOOD BANK IN FY 2010-11 THROUGH THESE FARMING CONNECTIONS.

-THE FARM STAND PROJECT MAKES FRESH, AFFORDABLE PRODUCE AVAILABLE IN LOW-INCOME NEIGHBORHOODS WITH LIMITED ACCESS TO GROCERY STORES. LOCAL RESIDENTS AND SPONSORS RUN THE FARM STANDS WITH ASSISTANCE FROM THE FOOD BANK IN START-UP MONEY, ORDERING, AND RECRUITING LOCATIONS AND SPONSORS. THE PROGRAM ALSO HELPS THE COMMUNITY BY BUYING LOCAL PRODUCT, ACCEPTING FARMERS' MARKET NUTRITION PROGRAM (FMNP) CHECKS AND FOOD STAMPS, AND PROMOTING THE CONSUMPTION OF PRODUCE THROUGH NUTRITION EDUCATION. IN 2010 THE FARM STANDS SOLD \$123,475 OF FRESH, MOSTLY LOCALLY-GROWN PRODUCE AT 14 FARM STANDS IN UNDERSERVED NEIGHBORHOODS.

-THE FOOD BANK IS ACTIVELY ENGAGED IN RESCUING SAFE, HEALTHY FOOD THAT WOULD OTHERWISE BE WASTED. THE THREE RIVERS TABLE PROGRAM (TRT) DRIVER PICKS UP PREPARED FOODS FROM RESTAURANTS, CATERERS AND OTHER FOOD SERVICES AND DELIVERS THEM VIA A REFRIGERATED TRUCK DIRECTLY TO ON-SITE FEEDING PROGRAMS. THE COMMUNITY TABLE PROGRAM CONNECTS RESTAURANTS, CATERERS AND OTHER FOOD SERVICES WITH ON-SITE FEEDING AGENCIES IN THEIR AREA AND ESTABLISHES THE DONATION OF SCHEDULED PREPARED MEALS.

COMMUNITY HARVEST IS A PROGRAM THAT ENCOURAGES BACKYARD GARDENERS TO GROW EXTRA FRESH PRODUCE AND PROVIDES CENTRAL DROP-OFF LOCATIONS AT GARDEN CENTERS TO MAKE IT EASIER TO DONATE. FINALLY, THROUGH THE RETAIL STORE PROGRAM THE FOOD BANK HAS ESTABLISHED ONGOING DONATIONS FROM 135 RETAIL GROCERY STORES. UNSOLD FOOD AND MEAT THAT HAS BEEN FROZEN

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BEFORE ITS BEST IF USED BY DATE IS PICKED UP BY THE FOOD BANK.

5,113,143 POUNDS OF FOOD HAS BEEN DISTRIBUTED SINCE THE PROGRAM BEGAN,
INCLUDING 3,083,700 POUNDS OF MEAT, A VITAL PROTEIN THAT HAD BEEN
HISTORICALLY ABSENT FROM DONATIONS TO THE FOOD BANK.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

ESTABLISHED PARTNER DISTRIBUTION ORGANIZATIONS (PDO) IN THE 10 RURAL
COUNTIES OF OUR SERVICE AREA. THE PDOS INCLUDE SMALLER FOOD BANKS
LOCATED IN WASHINGTON AND GREENE COUNTIES, THE COMMUNITY ACTION
AGENCIES IN ARMSTRONG, FAYETTE AND INDIANA COUNTIES, A SALVATION ARMY
BRANCH IN BEAVER COUNTY AND A SMALL FOOD BANK IN CAMBRIA COUNTY THAT
SERVES CAMBRIA AND SOMERSET COUNTIES. WE HELP EACH PARTNER BUILD ITS
OWN CAPACITY BY PROVIDING TECHNICAL ASSISTANCE, ACCESS TO RESOURCES AND
TRAINING MODELS FOR STAFF/VOLUNTEERS ON:

- HOW TO ESTABLISH AND OPERATE AN EFFICIENT FOOD DISTRIBUTION SYSTEM;
- MANAGING REQUIRED CLIENT AND INCOME DOCUMENTATION PAPERWORK;
- SCREENING CLIENTS FOR FOOD STAMP ELIGIBILITY AND THUS REDUCE THE
CLIENTS' RELIANCE ON THE FOOD ASSISTANCE AGENCY;
- RECRUITING AND RETAINING VOLUNTEERS;
- IMPROVING INFRASTRUCTURE;
- BOARD DEVELOPMENT; AND
- BUILDING A DONOR BASE THROUGH DIRECT MAIL AND OTHER FUNDRAISING
ACTIVITIES.

ALLEGHENY COUNTY OUTREACH - A GAP STUDY CONDUCTED FOR ALLEGHENY COUNTY
IN 2007 SHOWED AREAS OF UNEVENLY SERVED COMMUNITIES THERE AS WELL,
INCLUDING PEOPLE LIVING WITH DISABILITIES AND THE WORKING POOR.

OUTREACH AND CAPACITY BUILDING EFFORTS HAVE INCLUDED BRINGING TOGETHER

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DIVERSE MUNICIPAL LEADERS IN TARGETED COMMUNITIES, SOCIAL SERVICE PROVIDERS, AND SUCCESSFULLY ESTABLISHING NEW PARTNERSHIPS AND FORMING COALITIONS IN ALLEGHENY COUNTY.

BY LEADING A COMPREHENSIVE, EFFECTIVE, COMMUNITY-DRIVEN EFFORT, GREATER PITTSBURGH COMMUNITY FOOD BANK WILL ACHIEVE NOT ONLY ITS STATED ORGANIZATIONAL OBJECTIVES, BUT WILL ALSO HELP ENSURE THE STABILITY OF OUR NEIGHBORHOODS AND THE LONG-TERM WELL-BEING OF ALL CITIZENS. WE WILL BE BETTER POSITIONED TO TARGET OUR RESOURCES WHERE THEY WILL BE MOST EFFECTIVE, ELIMINATE DUPLICATION OF SERVICE AND HAVE AN ESTABLISHED NETWORK OF COMMUNITY ADVOCATES AND ACTIVISTS FOCUSED ON ELIMINATING HUNGER IN OUR REGION.

IN ADDITION TO THE OUTREACH WORK, THE AGENCY RELATIONS TEAM IS CHARGED WITH THE DEVELOPMENT AND MAINTENANCE OF THE FOOD BANK'S RELATIONSHIP WITH ITS 380+ MEMBER AGENCIES WHICH SERVE AS EMERGENCY OR REGULAR FOOD DISTRIBUTION CENTERS, AFTER SCHOOL PROGRAM SITES AND ON-SITE FEEDING PROGRAMS. THIS DEPARTMENT MONITORS AGENCIES FOR COMPLIANCE WITH CLIENT INCOME GUIDELINES; FOOD HANDLING, STORAGE AND SAFETY; PARTICIPATORY REQUIREMENTS FOR FEDERALLY-FUNDED MEAL AND SNACK PROGRAMS; ORDERING AND DISTRIBUTING FOOD, AND REPORTING REQUIREMENTS. OUR FOOD STAMP OUTREACH COORDINATORS PROVIDES SNAP (SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM - FOOD STAMPS) PRE-SCREENING AND EDUCATION OF POTENTIALLY ELIGIBLE SNAP HOUSEHOLDS THROUGHOUT OUR FOOD ASSISTANCE NETWORK. THE COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) WAS EXPANDED TO INCLUDE THREE ADDITIONAL COUNTIES WHICH INCREASED OUR MONTHLY FOOD BOXES TO 6,480 SENIOR CITIZENS AND WIC ELIGIBLE MOTHERS (AN INCREASE FROM LAST YEAR OF 865 BOXES PER MONTH) IN ALLEGHENY, ARMSTRONG, BEAVER, GREENE, LAWRENCE

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AND SOMERSET COUNTIES. THE AFTER SCHOOL PROGRAM NETWORK REACHES
APPROXIMATELY 20,000 UNDUPLICATED CHILDREN THROUGH AN AVERAGE OF 70
AFTER SCHOOL PROGRAMS THROUGHOUT THE YEAR.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
HALF A MILLION DOLLARS IN STAFF TIME.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

UNDER THE NUTRITIONAL EDUCATION PROGRAM, PROMAR IS ALSO CHARGED WITH
MAINTAINING THE NUTRITIONAL VALUE OF FOOD DISTRIBUTED AT 75%. THE
PROMAR TEAM PREVENTS WASTING EFFORT, MONEY AND PRODUCT BY DEFTLY
MATCHING FOOD WITH PEOPLE, PROVIDING RECIPES, AND CONDUCTING COOKING
DEMONSTRATIONS AT AGENCIES AND FARM STANDS. THE NUTRITION EDUCATION
PROGRAMS INCLUDE:

CHOOSING HEALTHY OPTIONS PROGRAM (CHOP) PROMOTES THE ACQUISITION,
DISTRIBUTION, AND CONSUMPTION OF HEALTHIER FOOD. THE PROGRAM WAS
DEVELOPED TO INCREASE THE PERCENTAGE OF HEALTHY FOODS AVAILABLE ON THE
FOOD BANK'S INVENTORY, AND TO EDUCATE FOOD BANK, AGENCY, AND PARTNER
DISTRIBUTION ORGANIZATION STAFF, VOLUNTEERS, AND EMERGENCY FOOD
RECIPIENTS ON THE NUTRITIONAL QUALITY OF DIFFERENT FOODS AND CHOOSING A
HEALTHY DIET. ALSO IT HELPS INCREASE CONSUMPTION OF HEALTHIER FOOD
AMONG NUTRITIONALLY AT-RISK EMERGENCY FOOD RECIPIENTS. CHOP INCLUDES A
FOOD RANKING SYSTEM THAT IDENTIFIES THE HEALTHIEST FOOD CHOICES ON THE
INVENTORY AND IS USED AS A TEACHING TOOL FOR THE ACQUISITION OF
HEALTHIER FOODS BY FOOD SOURCING STAFF AT THE FOOD BANK AND AGENCY
STAFF WHO ARE RESPONSIBLE FOR ORDERING FOOD FOR DISTRIBUTION IN THE
COMMUNITY.

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THE FOOD BANK'S HUNGER EDUCATION PROJECT IS EDUCATING THE PUBLIC AND CHILDREN ABOUT THE ISSUES OF HUNGER AND POVERTY, WHILE EMPHASIZING THE VALUE OF COMMUNITY SERVICE. THE HUNGER EDUCATION PROGRAMS INCLUDE:

-ADVOCACY - REALIZING THAT PUBLIC POLICY AFFECTS OUR WORK JUST AS SURELY AS ANY OTHER FACTOR, WE HAVE DEVELOPED A PLAN TO MOBILIZE SUPPORT AND WORK WITH GOVERNMENT REPRESENTATIVES AT EVERY LEVEL TO MARSHAL RESOURCES TO ALLEVIATE HUNGER IN SOUTHWESTERN PENNSYLVANIA.

-COMMUNICATIONS: THE FOOD BANK HAS EMBARKED UPON AN AGGRESSIVE PUBLIC AWARENESS AND EDUCATION CAMPAIGN, KNOWN AS THE CAMPAIGN TO END HUNGER. AS THE TITLE SUGGESTS, THIS CAMPAIGN IS A CALL TO ACTION FOR EVERY CITIZEN AND EVERY RELEVANT AGENCY, GOVERNMENT AND PRIVATE, TO WORK TOGETHER TO ELIMINATE HUNGER IN OUR REGION. SUPPORTED BY CORPORATE AND FOUNDATION UNDERWRITING AND LOCAL MEDIA PARTNERS, THE CAMPAIGN TO END HUNGER HAS ENHANCED THE SUCCESS OF ALL FOOD BANK OPERATIONS AND PROGRAMS, AND SUPPORTS THE ADVOCACY PROGRAM TO MAKE OUR REGION AND OUR STATE A MODEL FOR THIS NATION TO END HUNGER. RAISING AWARENESS AND COMMUNITY EDUCATION HAVE ALSO HELPED THOSE IN NEED FIND THE FOOD BANK AND RECEIVE FOOD ASSISTANCE. THE KIDS CAMPAIGN TO END HUNGER WAS LAUNCHED IN 2008. THIS PROGRAM ENCOURAGES THE EMPOWERMENT OF CHILDREN IN HELPING TO END HUNGER IN THEIR COMMUNITIES. INDIVIDUALLY AND IN GROUPS, KIDS HAVE HAD FOOD DRIVES AND FUNDRAISERS THAT HELP THE FOOD BANK.

-EDUCATION: THROUGH THE FOOD BANK SPEAKERS BUREAU, STAFF, BOARD MEMBERS AND OTHER VOLUNTEERS GO OUT TO COMMUNITY GROUPS, SCHOOLS, CONGREGATIONS

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AND OTHER PUBLIC EVENTS AND FORUMS AND RAISE AWARENESS ABOUT THE FOOD BANK AND HUNGER ISSUES.

EXPENSES \$ 805,460. INCLUDING GRANTS OF \$ 0. REVENUE \$ 167,014.

FORM 990, PART VI, SECTION A, LINE 4: THE EXECUTIVE COMMITTEE SHALL BE COMPRISED OF THE OFFICERS OF THE FOOD BANK, AS WELL AND UP TO THREE (CHANGED FROM UP TO TWO) ADDITIONAL DIRECTORS WHO SHALL BE APPOINTED TO SERVE BY MAJORITY VOTE OF THE OFFICERS OF THE FOOD BANK.

FORM 990, PART VI, SECTION B, LINE 11: PRIOR TO THE FORM 990 BEING FILED, IT WILL BE REVIEWED BY THE FOOD BANK'S AUDIT COMMITTEE. THE AUDIT COMMITTEE WILL IN TURN PROVIDE A COPY OF THE COMPLETED FORM 990 TO EACH MEMBER OF THE BOARD OF DIRECTORS BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS, STAFF AND SELECTED VOLUNTEERS ARE SUBJECT TO THE FOOD BANK'S CONFLICT OF INTEREST POLICY. IN ACCORDANCE WITH THE POLICY THESE INDIVIDUALS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT AT THE BEGINNING OF EACH FISCAL YEAR. IN ADDITION, UPON BEGINNING THEIR TERM, EACH NEW BOARD MEMBER IS REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT. THE CEO'S ASSISTANT TRACKS THE RECEIPT OF THE STATEMENTS AND SUBMITS THE STATEMENTS TO THE CEO AND THE CHAIR OF THE BOARD DEVELOPMENT COMMITTEE FOR THEIR REVIEW. UPON REVIEW OF THE STATEMENTS, ANY ACTUAL OR POTENTIAL CONFLICTS ARE BROUGHT TO THE ATTENTION OF THE BOARD CHAIR. PROCEDURES FOR ADDRESSING CONFLICTS OF INTEREST ARE OUTLINED IN THE POLICY.

IN ADDITION, THE HUMAN RESOURCES MANAGER OF THE ORGANIZATION REVIEWS THE CONFLICT OF INTEREST STATEMENT WITH EVERY NEW EMPLOYEE DURING NEW EMPLOYEE

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ORIENTATION. EACH YEAR, ALL EMPLOYEES REVIEW AND SIGN A CONFLICT OF INTEREST STATEMENT WHICH IS INCLUDED IN THEIR PERSONNEL FILE.

FORM 990, PART VI, SECTION B, LINE 15: THE FOOD BANK HAS AN INDEPENDENT EXECUTIVE COMPENSATION COMMITTEE COMPRISED OF THE PRESIDENT, VICE PRESIDENT, AND CHAIR OF THE PERSONNEL COMMITTEE OF THE BOARD. THESE INDIVIDUALS MEET ANNUALLY TO EVALUATE THE CEO AND OTHER OFFICERS OF THE ORGANIZATION AND TO REVIEW THEIR COMPENSATION PACKAGES. TO ASSIST THE COMMITTEE SALARY RANGES AND DATA FROM OTHER COMPARABLE FOOD BANKS THROUGHOUT THE FEEDING AMERICA NETWORK AS WELL AS FROM WITHIN THE REGION'S HUMAN SERVICES NON-PROFIT COMMUNITY (STUDY PROVIDED BY THE UNITED WAY AND THE BAYER CENTER FOR NON-PROFIT MANAGEMENT) ARE UTILIZED. UPON EVALUATION AND DELIBERATION OF THIS INFORMATION THE COMMITTEE ADVANCES THEIR RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE BOARD FOR APPROVAL.

FORM 990, PART VI, SECTION C, LINE 19: THE FOOD BANK'S ANNUAL WRITTEN REPORT CONTAINS A SUMMARY OF THE MOST RECENT AUDITED FINANCIAL POSITION. CONFLICT OF INTEREST AND OTHER GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS: 382,965.

FORM 990, PART XII, LINE 2C

FINANCIAL STATEMENT AND REPORTING

THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED BY AN INDEPENDENT ACCOUNTING FIRM. THE PROCESS INVOLVING OVERSIGHT OF THE AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS AND THE SELECTION OF THE

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INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEAR.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ☒ **X**
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization	Employer identification number
	GREATER PITTSBURGH COMMUNITY FOOD BANK	25-1420599
	Number, street, and room or suite no. If a P.O. box, see instructions. 1 NORTH LINDEN STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. DUQUESNE, PA 15011	

Enter the Return code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

SHARON HARM

- The books are in the care of ► **1 NORTH LINDEN STREET - DUQUESNE, PA 15110**

Telephone No. ► **412-460-3663**

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2012**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

► ☐ calendar year or

► ☒ tax year beginning **JUL 1, 2010**, and ending **JUN 30, 2011**.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)