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Form **990**

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
GREATER BERKS FOOD BANK

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1011 TUCKERTON COURT

City or town, state or country, and ZIP + 4
READING, PA 19605

D Employer identification number
22-2456238

E Telephone number
(610)926-5802

G Gross receipts $ 8,725,252

F Name and address of principal officer
MARGARET BIANCA
1011 TUCKERTON COURT
READING,PA 19605

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ WWW BERKSFOODBANK ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1983 | **M** State of legal domicile PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO FEED THE HUNGRY BY AQUIRING AND DISTRIBUTING FOOD TO PEOPLE IN NEED

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	16
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	16
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	**5**	17
6	Total number of volunteers (estimate if necessary)	**6**	1,050
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	0

		Prior Year	Current Year
Revenue	**8** Contributions and grants (Part VIII, line 1h)	7,405,367	8,352,769
	9 Program service revenue (Part VIII, line 2g)	347,463	356,654
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,346	4,777
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,798	11,052
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,767,974	8,725,252
Expenses	**13** Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,551,471	7,033,080
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	550,357	581,123
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶137,359		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	491,086	608,737
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	7,592,914	8,222,940
	19 Revenue less expenses Subtract line 18 from line 12	175,060	502,312

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20** Total assets (Part X, line 16)	3,389,879	3,847,506
	21 Total liabilities (Part X, line 26)	187,161	140,805
	22 Net assets or fund balances Subtract line 21 from line 20	3,202,718	3,706,701

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

****** 2012-11-09
Signature of officer — Date

MARGARET BIANCA EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: WILLIAM G KOCH JR CPA	Date 2012-11-09	Check if self-employed ☐	Preparer's taxpayer identification number (see instructions) P00045938
Firm's name (or yours if self-employed), address, and ZIP + 4: WILLIAM G KOCH & ASSOCIATES, 2650 WESTVIEW DRIVE, WYOMISSING, PA 196101187			EIN ▶ 23-2641012; Phone no ▶ (610) 678-9700

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

THE MISSION OF THE GREATER BERKS FOOD BANK (GBFB) IS TO FEED THE HUNGRY BY ACQUIRING AND DISTRIBUTING FOOD TO PEOPLE IN NEED GBFB IS A NON-PROFIT, HUNGER RELIEF ORGANIZATION FOUNDED IN 1983 AND SERVES BERKS AND SCHUYLKILL COUNTIES CONTINUED ON SCHEDULE O GBFB 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 FOOD DRIVES THROUGH THE EFFORTS OF THE GBFB OPERATIONS APPROXIMATELY 5 8 MILLION POUNDS OF GROCERY PRODUCTS WERE DISTRIBUTED TO LOW INCOME INDIVIDUALS AND FAMILIES THE FOOD COLLECTED IS DISTRIBUTED FREE OF CHARGE TO THOSE IN NEED

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 organization's program service accomplishments for each of its three largest program services, as measured 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 $ 7,043,391 including grants of $ 6,292,339) (Revenue $ 298,080)

GBFB DISTRIBUTES FOOD AND GROCERY PRODUCTS THROUGH A NETWORK OF OVER 300 GRASSROOTS AND COMMUNITY AGENCIES THAT ARE EXEMPT UNDER IRC 501(C)(3), THAT OFFER A BROAD VARIETY OF SERVICES INCLUDING HOMELESS SHELTERS, SOUP KITCHENS, FOOD CUPBOARDS, AND AFTER SCHOOL PROGRAMS FOOD SUPPLIED BY THE GBFB PROVIDED MORE THAN 1,500,000 MEALS AT SOUP KITCHENS AND SHELTERS AN AVERAGE OF 32,500 INDIVIDUALS RECEIVED FOOD PACKAGES MONTHLY FROM A FOOD PANTRY/CUPBOARD GBFB OPERATES A WAREHOUSE AND FLEET OF DISTRIBUTION VEHICLES, AND EMPLOYS 14 INDIVIDUALS

4b (Code) (Expenses $ 186,495 including grants of $ 102,505) (Revenue $ 20,366)

THROUGH ITS KIDS CAFE PROGRAM THE GBFB SUPPLIES NUTRITIONALLY BALANCED MEALS AFTER SCHOOL TO CHILDREN THAT MIGHT NOT OTHERWISE RECEIVE A MEAL AT HOME THE GBFB SPONSORS 25 KIDS CAFES THROUGHOUT THE CITY OF READING AS MANY AS 105,500 MEALS WERE SERVED AFTER SCHOOL DURING THE SCHOOL YEAR AND MORE THAN ONE MILLION MEALS HAVE BEEN SERVED SINCE THE PROGRAM STARTED IN 1997 THE KIDS CAFES PROVIDE HOMEWORK HELP AS WELL AS RECREATIONAL AND SOCIAL ACTIVITIES THE KIDS CAFES HOST LOCATIONS DO NOT INCUR ANY EXPENSES FOR PARTICIPATION IN THIS PROGRAM THE MEALS ARE SERVED FREE OF CHARGE TO THE CHILDREN

4c (Code) (Expenses $ 422,577 including grants of $ 377,517) (Revenue $ 177)

THROUGH GBFB'S MANAGEMENT OF THE COMMODITY SUPPLEMENTAL FOOD PROGRAM NEARLY 1,300 LOW INCOME SENIOR CITIZENS LIVING IN BERKS AND SCHUYLKILL COUNTIES RECEIVE A TOTE FILLED WITH NUTRITIONAL FOOD EVERY MONTH THIS PACKAGE CONTAINS FOOD OF HIGH NUTRITIONAL VALUE AND IS A SUPPLEMENT FOR THE SENIOR CITIZENS DIETS EACH MONTH THE GBFB DELIVERS THE PREPACKAGED TOTES TO MORE THAN 88 DISTRIBUTION LOCATIONS, INCLUDING LOW INCOME SENIOR HIGH RISES

(Code) (Expenses $ 291,838 including grants of $ 260,719) (Revenue $ 40,575)

THE GREATER BERKS FOOD BANK DEVELOPS AND SUPPLIES THE RESOURCES NEEDED FOR OPERATION OF THE BACKPACK PROGRAM THIS PROGRAM PROVIDES A BACKPACK OF FOOD TO ELEMENTARY SCHOOL STUDENTS EVERY FRIDAY AT THE END OF THE SCHOOL DAY OUTREACH IS CONDUCTED AT THE SCHOOL, TYPICALLY BY THE SCHOOL NURSE WHO IDENTIFIES THE CHILDREN ELIGIBLE TO PARTICIPATE GBFB SUPPORTS TEN BACKPACK PROGRAM SITES THROUGHOUT BERKS COUNTY BY PROVIDING THE FOOD AND GROCERY PRODUCTS NEEDED TO FILL A TOTAL OF ALMOST 1,200 BACKPACKS WEEKLY GBFB IS ACTIVELY WORKING TO EXPAND THIS PROGRAM TO SERVE MORE CHILDREN

4d Other program services (Describe in Schedule O)

(Expenses $ 291,838 including grants of $ 260,719) (Revenue $ 40,575)

4e **Total program service expenses** ▶ $ 7,944,301

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)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
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? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
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, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
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? *If "Yes," complete Schedule D, Part VII.*	11b		No
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? *If "Yes," complete Schedule D, Part VIII.*	11c		No
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? *If "Yes," complete Schedule D, Part IX.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e		No
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)? *If "Yes," complete Schedule D, Part X.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Part I*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III and IV*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	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 owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	**34**		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	**35a**		No
b	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*	**35b**		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*	**36**		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check 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	**1a**	0		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	**1b**	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		**1c**		
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	**2a**	17		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		**2b**	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		**3a**		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		**3b**		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?		**4a**		No
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? . .		**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		**5b**		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?		**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		**6b**		
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?		**7a**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .		**7f**		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		**7g**		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		**7h**		No
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		**8**		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		**9a**		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		**9b**		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	**10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	**11a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**			
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.** All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state		**13a**		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**			
c	Enter the aggregate amount of reserves on hand	**13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .		**14b**		

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

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	1a	16		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	16		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		No
6	Did the organization have members or stockholders?		6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

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

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

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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made 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 made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

THE ORGANIZATION
1011 TUCKERTON COURT
READING, PA 19605
(610) 926-5802

Part VII Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check 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, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, 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, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) MARY KAY BERNOSKY BOARD MEMBER	1 00	X						0	0	0
(2) REV RICH LEIBY BOARD MEMBER	1 00	X						0	0	0
(3) JAY MAHONEY VICE PRESIDENT	5 00	X		X				0	0	0
(4) ADRIENNE TREGO BOARD MEMBER	1 00	X						0	0	0
(5) RAY AUCHTER BOARD MEMBER	1 00	X						0	0	0
(6) JOHN BADAL BOARD MEMBER	1 00	X						0	0	0
(7) ED WILLIAMS TREASURER	5 00	X		X				0	0	0
(8) JUDY DETEMPLE BOARD MEMBER	1 00	X						0	0	0
(9) RICK OTT BOARD MEMBER	1 00	X						0	0	0
(10) BOB RIPPLEY BOARD MEMBER	1 00	X						0	0	0
(11) BRIAN LOWE SECRETARY	5 00	X		X				0	0	0
(12) ROBERT BARTO PRESIDENT	5 00	X		X				0	0	0
(13) ANN HOWE BOARD MEMBER	1 00	X						0	0	0
(14) THERESE BOGIA BOARD MEMBER	1 00	X						0	0	0
(15) ERIC WHITE BOARD MEMBER	1 00	X						0	0	0
(16) ISABELLE MOON BOARD MEMBER	1 00	X						0	0	0
(17) MARGARET BIANCA EXECUTIVE DIRECTOR	40 00			X				77,549	0	8,322

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 (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
1b **Sub-Total** . . . . . ▶										
c **Total from continuation sheets to Part VII, Section A** . . . . ▶										
d **Total (add lines 1b and 1c)** . . . . . ▶								77,549	0	8,322

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

			Yes	No
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*	**3**		No
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*	**4**		No
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*	**5**		No

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 Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c 28,010				
	d	Related organizations . . . 1d				
	e	Government grants (contributions) 1e 1,928,771				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f 6,395,988				
	g	Noncash contributions included in lines 1a-1f $ 6,461,716				
	h	**Total.** Add lines 1a-1f . . . . . ▶	8,352,769			
Program Service Revenue		Business Code				
	2a	FOOD DISTRIBUTION 624200	356,654	356,654		
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	**Total.** Add lines 2a–2f . . . . . ▶	356,654			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶	4,777			4,777
	4	Income from investment of tax-exempt bond proceeds . . ▶				
	5	Royalties . . . . . ▶				
		(i) Real / (ii) Personal				
	6a	Gross rents 8,508				
	b	Less rental expenses 0				
	c	Rental income or (loss) 8,508				
	d	Net rental income or (loss) . . . . . ▶	8,508			8,508
		(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory				
	b	Less cost or other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss) . . . . . ▶				
	8a	Gross income from fundraising events (not including $ 28,010 of contributions reported on line 1c) See Part IV, line 18 . . . a 0				
	b	Less direct expenses . . . b 0				
	c	Net income or (loss) from fundraising events . . ▶	0			
	9a	Gross income from gaming activities See Part IV, line 19 . . . a				
	b	Less direct expenses . . . b				
	c	Net income or (loss) from gaming activities . . ▶				
	10a	Gross sales of inventory, less returns and allowances . a				
	b	Less cost of goods sold . . b				
	c	Net income or (loss) from sales of inventory . . ▶				
		Miscellaneous Revenue / Business Code				
	11a	MISCELLANEOUS 900099	2,544	2,544		
	b					
	c					
	d	All other revenue				
	e	**Total.** Add lines 11a–11d . . . . . ▶	2,544			
	12	**Total revenue.** See Instructions . . . ▶	8,725,252	359,198	0	13,285

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)

Check if Schedule O contains a response to any question in this Part IX . . . . . ☐

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 United States See Part IV, line 21	7,033,080	7,033,080		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	85,954	68,763	7,376	9,815
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	391,561	313,249	31,325	46,987
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	18,471	14,776	2,586	1,109
9	Other employee benefits	43,035	34,428	6,025	2,582
10	Payroll taxes	42,102	33,682	5,894	2,526
11	Fees for services (non-employees)				
a	Management				
b	Legal	4,404	881	3,523	
c	Accounting	19,425	3,885	15,540	
d	Lobbying				
e	Professional fundraising *See Part IV, line 17* . .				
f	Investment management fees				
g	Other	10,569	2,114	8,455	
12	Advertising and promotion	300		300	
13	Office expenses	18,275	16,448	1,827	
14	Information technology				
15	Royalties . .				
16	Occupancy	47,726	33,379	8,116	6,231
17	Travel	5,201	5,201		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	14,463		8,099	6,364
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	68,254	50,508	12,285	5,461
23	Insurance	15,877	12,703	3,174	
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	CONTRACT LABOR-TEMPORAR	86,157	68,925	17,232	
b	TRUCK EXPENSE	75,809	75,809		
c	KID'S CAFE	71,755	71,755		
d	COMMUNITY DEVELOPMENT	60,073	60,073		
e					
f	All other expenses	110,449	44,642	9,523	56,284
25	**Total functional expenses.** Add lines 1 through 24f	8,222,940	7,944,301	141,280	137,359
26	**Joint costs.** Check here ▶ ☐ 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		400	1	400
	2	Savings and temporary cash investments		1,512,985	2	1,536,090
	3	Pledges and grants receivable, net		179,328	3	118,937
	4	Accounts receivable, net		15,381	4	21,310
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		883,723	8	1,205,968
	9	Prepaid expenses and deferred charges		15,001	9	8,285
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 1,493,773			
	b	Less accumulated depreciation	10b 562,518	745,460	10c	931,255
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11		10,898	13	12,569
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		26,703	15	12,692
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		3,389,879	16	3,847,506
Liabilities	17	Accounts payable and accrued expenses		39,164	17	33,295
	18	Grants payable			18	
	19	Deferred revenue		147,997	19	107,510
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		187,161	26	140,805
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		3,192,718	27	3,706,701
	28	Temporarily restricted net assets		10,000	28	0
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		3,202,718	33	3,706,701
	34	Total liabilities and net assets/fund balances		3,389,879	34	3,847,506

Part XI Reconcilliation 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	8,725,252
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,222,940
3	Revenue less expenses Subtract line 2 from line 1	3	502,312
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	3,202,718
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1,671
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	3,706,701

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 ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b	Yes	

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
GREATER BERKS FOOD BANK

Employer identification number
22-2456238

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

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

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

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

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

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

_____

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of support?
Total									

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	5,254,993	5,720,441	6,466,915	7,405,367	8,352,769	33,200,485
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	5,254,993	5,720,441	6,466,915	7,405,367	8,352,769	33,200,485
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)						5,719,671
6 **Public Support.** Subtract line 5 from line 4						27,480,814

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	5,254,993	5,720,441	6,466,915	7,405,367	8,352,769	33,200,485
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	36,147	27,661	20,988	12,854	13,285	110,935
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	4,507	3,215	1,018	2,290	2,544	13,574
11 **Total support** (Add lines 7 through 10)						33,324,994

12 Gross receipts from related activities, etc (See instructions)	12	1,665,343

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	82 460 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	85 220 %

16a **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2010.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2011** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2010** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2011.** 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—2010.** 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 ▶☐

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

Additional Data

Software ID:
Software Version:
EIN: 22-2456238
Name: GREATER BERKS FOOD BANK

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services

(Code) (Expenses $ 291,838 including grants of $ 260,719) (Revenue $ 40,575)

THE GREATER BERKS FOOD BANK DEVELOPS AND SUPPLIES THE RESOURCES NEEDED FOR OPERATION OF THE BACKPACK PROGRAM THIS PROGRAM PROVIDES A BACKPACK OF FOOD TO ELEMENTARY SCHOOL STUDENTS EVERY FRIDAY AT THE END OF THE SCHOOL DAY OUTREACH IS CONDUCTED AT THE SCHOOL, TYPICALLY BY THE SCHOOL NURSE WHO IDENTIFIES THE CHILDREN ELIGIBLE TO PARTICIPATE GBFB SUPPORTS TEN BACKPACK PROGRAM SITES THROUGHOUT BERKS COUNTY BY PROVIDING THE FOOD AND GROCERY PRODUCTS NEEDED TO FILL A TOTAL OF ALMOST 1,200 BACKPACKS WEEKLY GBFB IS ACTIVELY WORKING TO EXPAND THIS PROGRAM TO SERVE MORE CHILDREN

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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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
GREATER BERKS FOOD BANK

Employer identification number
22-2456238

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–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 Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

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

(ii) Assets included in Form 990, Part X ▶ $ _____

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

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

b Assets included in Form 990, Part X ▶ $ _____

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

3 Using the organization's 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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

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

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	10,898	9,805	7,964	12,279	
b Contributions					
c Investment earnings or losses	1,671	1,093	1,841	-4,315	
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	12,569	10,898	9,805	7,964	

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

- a Board designated or quasi-endowment ▶ 100 000 %
- 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

		Yes	No
(i) unrelated organizations	3a(i)	Yes	
(ii) related organizations	3a(ii)		No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 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 property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	173,665			173,665
b Buildings	806,772		242,171	564,601
c Leasehold improvements				
d Equipment	513,336		320,347	192,989
e Other				
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				931,255

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		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

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

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

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

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

2. 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 (ASC740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	8,725,252
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	8,222,940
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	502,312
4	Net unrealized gains (losses) on investments	4	1,671
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 - 8	9	1,671
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	503,983

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	8,726,923
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	1,671		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	1,671
3	Subtract line **2e** from line **1**			3	8,725,252
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 should equal Form 990, Part I, line 12)			5	8,725,252

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

1	Total expenses and losses per audited financial statements			1	8,222,940
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			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	8,222,940
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 should equal Form 990, Part I, line 18)			5	8,222,940

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, 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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ENDOWMENT FUND REPRESENTS DESIGNATED FUNDS HELD AND INVESTED BY THE BERKS COUNTY COMMUNITY FOUNDATION THE EARNINGS MAY BE APPLIED TOWARDS THE GENERAL PURPOSES AS DETERMINED FROM TIME TO TIME BY THE ORGANIZATION'S GOVERNING BODY
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ORGANIZATION ACCOUNTS FOR UNCERTAIN TAX POSITIONS IN ACCORDANCE WITH THE INCOME TAXES TOPIC ASC 740 ASC 740 PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AND ALSO PROVIDES GUIDANCE ON VARIOUS RELATED MATTERS SUCH AS DERECOGNITION, INTEREST, PENALTIES AND DISCLOSURE REQUIRED THE ORGANIZATION RECOGNIZES INTEREST AND PENALTIES, RELATED TO UNRECOGNIZED TAX BENEFITS IN TAX EXPENSE THERE WERE NO INTEREST OR PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010

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SCHEDULE G
(Form 990 or 990-EZ)

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

2011

Open to Public Inspection

Name of the organization
GREATER BERKS FOOD BANK

Employer identification number
22-2456238

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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

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

2a 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 Form 990-EZ filers are not required to complete this table

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

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

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

		(a) Event #1 WORLD FOOD DAY (event type)	(b) Event #2 (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	28,010			28,010
	2 Less Charitable contributions	28,010			28,010
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs	4,142			4,142
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	2,678			2,678
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(6,820)
	11 Net income summary Combine lines 3 and 10 in column (d) ▶				-6,820

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

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

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 Provide 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

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 distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
GREATER BERKS FOOD BANK

Employer identification number
22-2456238

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☐ Yes ☑ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . ▶ ☐

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

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 164

3 Enter total number of other organizations listed in the line 1 table . . . ▶

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

Identifier	Return Reference	Explanation

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 22-2456238
Name: GREATER BERKS FOOD BANK

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
AGENCY DEVELOPMENT GBFB 1011 TUCKERTON COURT READING,PA 19605	22-2456238	501C3		78,500	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
AMERICAN RED CROSS701 CENTRE AVENUE READING,PA 19601	23-1352015	501C3		17,765	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ANIMAL RESCUE LEAGUEROUTE 724 MORGANTOWN BY-PASS READING,PA 19607		501C3		15,278	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
ASHLAND FOOD PANTRY35 N 9TH ST ASHLAND,PA 17921	23-1670456	501C3		6,230	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
AVENUESPORT CARBON2 PARK ST POTTSVILLE,PA 17901	23-1670456	501C3		6,202	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
BCCACT PROGRAM 645 PENN ST 2ND FLOOR READING,PA 19601	23-2043478	501C3		6,783	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BCCCOTTON STREET1018 COTTON STREET READING,PA 19602	23-2043478	501C3		5,207	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
BCCPERKIOMEN AVENUE1220 PERKIOMEN AVENUE READING,PA 19602	23-2043478	501C3		6,794	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BERKS AREA YOUTH RECREATION INC 843 PARK ROAD ELVERSON,PA 19608	23-3070480	501C3		20,328	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
BERKS ENCORE WERNERSVILLE CENTERPO BOX 300 BRENNER BUILDING WERNERSVILLE,PA 19565	23-1656050	501C3		34,392	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BERKS ENCORE-MIFFLIN30 LIBERTY STREET SHILLINGTON,PA 19607	23-1656050	501C3		50,923	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
BERKS WOMEN IN CRISIS255 CHESTNUT STREET READING,PA 19602	23-2087191	501C3		10,715	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BERNVILLE ELEMENTARY SCHOOL24 SHARTLESVILLE ROAD READING,PA 19506	23-6050725	501C3		9,710	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
BETHANY LUTHERAN CHURCH 336 FRANKLIN STREET WEST READING,PA 19611	23-2265966	501C3		25,598	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BETHEL AME CHURCH330 W WINDSOR STREET READING, PA 19601	53-0204696	501C3		10,579	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
BETHEL AME - CSFP330 W WINDSOR ST READING, PA 19601	53-0204696	501C3		58,801	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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BETHEL ELEMENTARY SCHOOL8390 LANCASTER AVE BETHEL,PA 19507	23-6050275	501C3		15,360	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
BETHEL-TULPEHOCKEN FOOD PANTRY8601 LANCASTER AVENUE BETHEL,PA 19550	23-2236158	501C3		68,812	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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BIRDSBORO ELEMENTARY CENTER321 N FURNACE ST BIRDSBORO,PA 19508	23-1669194	501C3		14,941	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
BOYERTOWN AREA MULTI-SERVICE200 WEST SPRING STREET BOYERTOWN,PA 19512	23-7289405	501C3		5,310	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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BOYERTOWN SALVATION ARMY 409 S READING AVENUE BOYERTOWN,PA 19512	13-5562351	501C3		40,009	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
BOYERTOWN SALVATION ARMY 409 S READING AVENUE BOYERTOWN,PA 19512	13-5562351	501C3		100,008	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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CALVARY COMMUNITY CENTER201 NOBLE STREET READING,PA 19611	20-5285689	501C3		15,387	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
CAMP FIRECAMP ADAHI172 HARTZ STORE ROAD MOHNTON,PA 19601	23-1365197	501C3		47,736	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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CATHOLIC CHARITIES DIOCESE OF ALLENTOWN400 WASHINGTON STREET SUITE 100 READING,PA 19601	23-1598117	501C3		6,534	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
CATHOLIC SOUP KITCHEN530 SPRUCE STREET READING,PA 19602	27-4094688	501C3		9,408	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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CHRIST LUTHERAN CHURCH1301 LUZERNE STREET READING,PA 19601	23-2149121	501C3		30,728	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
GLENSIDE BLESSINGS AVENUE A BACK OF READING,PA 19601	23-2149121	501C3		65,069	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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CHRISTIAN ASSOCIATION VISION FOR TODAY145 S 8TH STREET READING, PA 19602	23-2611678	501C3		46,675	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
CIRCLE OF FRIENDS DROP IN CENTER11 NORTH 5TH STREET 2ND FLOOR READING, PA 19601	23-2735283	501C3		30,498	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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CITY LIGHT MINISTRY246 N NINTH ST READING, PA 19601	25-1157393	501C3		63,911	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
CITY REACH MEN'S RECOVERY HOME 329 SOUTH 13TH STREET READING, PA 19602	45-3514262	501C3		24,107	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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CITY REACH PANTRY1011 1/2 COTTON STREET READING,PA 19602	45-3514262	501C3		55,212	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
CLARKE ELEMENTARY SCHOOL601 N 16TH ST POTTSVILLE,PA 17901				37,381	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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CONEWAGOFIRETREE LTD202 S CENTRE ST POTTSVILLE,PA 17901	23-2976370	501C3		50,897	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
CONRAD WEISER FOOD PANTRY108 S ROBESON STREET ROBESONIA,PA 19551	22-2461725	501C3		65,330	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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CONRAD WEISER WEST ELEMENTARY 102 S 3RD STREET WOMELSDORF, PA 19551	23-6005756	501C3		16,016	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
CSFP-DIRECT DISTRIBUTION 1011 TUCKERTON COURT READING, PA 19605	22-2456238	501C3		7,477	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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DANKEN HOUSE448 PRESTON ROAD WERNERSVILLE,PA 19565	23-2814032			18,422	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
DAYSPRING HOMES INC430 HAZEL STREET READING,PA 19611	23-2622102	501C3		23,514	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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EASY DOES IT - HILLTOP - MEN'S PROGRAM1300 HILLTOP ROAD LEESPORT, PA 19533	23-2550089	501C3		13,647	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
EASY DOES IT- HILLTOP - WOMEN'S PROGRAM1300 HILLTOP ROAD LEESPORT, PA 19533	23-2550089	501C3		10,990	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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EASY DOES IT-WALNUT STREET 647 WALNUT STREET READING,PA 19601	23-2550089	501C3		20,172	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
EPISCOPAL HOUSE50 N 9TH STREET READING,PA 19601	23-6463768	501C3		15,222	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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EVANGELICAL MENNONITE CHURCH900 N 12TH ST READING, PA 19604		501C3		45,119	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
EXETER AREA FOOD PANTRY 3670 PERKIOMEN AVE READING, PA 19606	23-1946582	501C3		18,027	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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FAMILY FIRST RESOURCE CENTER416 S 7TH STREET READING,PA 19602	23-2208733	501C3		8,199	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
FAMILY FIRST RESOURCE CENTER416 S 7TH STREET READING,PA 19602	23-2208733	501C3		83,011	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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FIRST ECCVIDA NUEVA18 N 8TH ST READING, PA 19601		501C3		15,319	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
FIRST UNITARIAN UNIVERSALIST416 FRANKLIN STREET READING, PA 19602	23-2038931	501C3		80,760	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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FLEETWOOD AREA FOOD PANTRY110 W ARCH STREET FLEETWOOD,PA 19510	23-2274967	501C3		49,195	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
FREEDOM GATE MINISTRY INC131 S 9TH STREET READING,PA 19602	23-1912750	501C3		12,823	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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FRIEND INC658 D NOBLE STREET KUTZTOWN,PA 19530	23-1924643	501C3		138,813	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
FRIENDSHIP HOUSECLOUD HOME351 N 2ND ST POTTSVILLE,PA 17901	24-0795422	501C3		6,566	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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GRACE & HOPE MISSION117 N 9TH STREET READING, PA 19601	52-6045537	501C3		21,358	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
HAMBURG SDA CHURCH22 WILLOW ROAD HAMBURG, PA 19526	23-6002044	501C3		87,865	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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HAMPDEN HEIGHTS SDA CHURCH2706 OLD PRICETOWN ROAD TEMPLE,PA 19560	23-6002044	501C3		48,515	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
HARVEST FELLOWSHIP OF COLEBROOKDALE 584 COLEBROOKDALE ROAD BOYERTOWN,PA 19512	23-1988522	501C3		70,153	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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HENSLER HOMES 1301 SCHUYLKILL AVENUE READING,PA 19601	23-6003364			7,115	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
HIGH POINT CAMP 200 CHAPLE RD GEIGERTOWN,PA 19523		501C3		8,744	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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HISPANIC CENTER 501 WASHINGTON STREET READING, PA 19601	23-2041081	501C3		31,130	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
HOGAR CREA INC 302 S 5TH STREET READING, PA 19602	23-2014027	501C3		40,068	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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HOLY SPIRIT LUTHERAN CHURCH423 WINDSOR STREET READING, PA 19601	23-1365232	501C3		20,146	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
HOLY TRINITY CHURCH OF GOD 130 W BUTTONWOOD STREET READING, PA 19601	23-2628418	501C3		18,984	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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HOLY TRINITY COG 130 W BUTTONWOOD STREET READING, PA 19601	23-2628418	501C3		6,497	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
HOPE LUTHERAN CHURCH601 N FRONT STREET READING, PA 19601	23-6001181	501C3		139,504	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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HOPE RESCUE MISSION645 N 6TH STREET READING, PA 19601	23-1413677	501C3		134,634	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
HUB OF HOPE PANTRY1116 PERRY STREET READING, PA 19604	23-6266274	501C3		19,358	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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HUBERT APARTMENTS125 N 10TH STREET READING, PA 19601	23-6003364			6,241	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
HUGH CARSELLA APARTMENTS505 N 10TH STREET READING, PA 19604	23-1923419	501C3		15,935	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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IGLESIA BAUTISTA BETANIA PANTRY 164 DOUGLASS STREET READING,PA 19601	23-2799716	501C3		9,294	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
INCARNATION LUTHERAN1101 LANCASTER AVENUE READING,PA 19607	23-6005289	501C3		16,930	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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JEWISH FAMILY SERVICE1100 BERKSHIRE BLVD WYOMISSING,PA 19610	23-1728784	501C3		35,931	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
KENNEDY HOUSE 530 SPRUCE STREET READING,PA 19602	23-1598117	501C3		166,421	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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KENNEDY TOWERS300 S 4TH STREET READING, PA 19602	23-2041081	501C3		29,005	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
KIDS PEACE BERKS CAMPUS 8TH HAY ROADS TEMPLE, PA 19560	23-2654908	501C3		8,084	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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LAC HELPING HANDS601 HEISTERS LANE READING, PA 19605	23-2962223	501C3		168,048	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
LIVING WORD FELLOWSHIP18 N 8TH ST READING, PA 19609	45-3514262	501C3		16,963	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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MAHANOY ELDERLY10 W CENTRE ST MAHONEY CITY, PA 17948	22-3020146			9,086	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
MANNA FOOD PANTRY421 WEST MAIN STREET KUTZTOWN,PA 19530	23-6433584	501C3		55,600	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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MARKET SQUARE APARTMENTS ASSOCIATES801 PENN STREET READING,PA 19601	23-2821865			5,934	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
MARY'S SHELTER 325 S 12TH STREET READING,PA 19602	23-2722494	501C3		11,149	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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

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MINERSVILLE AREA FOOD CUPBOARD4TH LEWIS STS MINERSVILLE,PA 17954	23-1670456	501C3		6,773	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
MT PENN ELEMENTARY SCHOOL2310 CUMBERLAND AVENUE READING,PA 19606	23-1667957			26,669	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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MUHLENBERG CHURCHES FOOD PANTRY1301 E BELLVUE AVE READING,PA 19605	45-5335491	501C3		122,107	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
MUHLENBERG ELEM CENTER KUTZTOWN RD READING,PA 19605				14,977	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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NEW FIRST BAPTIST CHURCH 216 N MILL STREET BIRDSBORO, PA 19508	23-2280106	501C3		31,955	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
NEW JOURNEY UNITED METHODIST CHURCH138 S 6TH STREET READING, PA 19602	36-4630419	501C3		14,202	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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NEW JOURNEY UNITED METHODIST CHURCH138 S 6TH STREET READING, PA 19602	36-4630419	501C3		131,482	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
NEW PERSON CENTER317 N 6TH STREET READING, PA 19601	45-1757609	501C3		33,297	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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NORTH 6TH STREET CHURCH OF GOD123 N 6TH ST READING, PA 19601	23-2268032	501C3		74,540	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
NORTH 6TH STREET CHURCH OF GOD - CSFP 123 N 6TH ST READING, PA 19601	23-2268032	501C3		16,756	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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NORTH SCHUYLKILL ELEMENTARY SCHOOL38 LINE ST ASHLAND,PA 17921	23-1671438	501C3		5,346	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
NORTHEAST LOUISIANA FOOD BANK400 CENTRAL AVE MONROE,LA 71211		501C3		45,069	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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NORTHERN BERKS FOOD PANTRY WINDSOR STREET HAMBURG,PA 19526	23-2614092	501C3		87,576	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
NUREMBERG FOOD PANTRY185 MAHONEY ST NUREMBERG,PA 18241	23-1670456	501C3		6,592	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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OAKBROOK HOUSING601 MCCLELLAN STREET READING,PA 19607	23-7249552	501C3		29,981	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
OLEY VALLEY FOOD PANTRY 1076 MEMORIAL HIGHWAY OLEY,PA 19547	23-7199273	501C3		111,137	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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OLIVET BOYS & GIRLS CLUBPALKIDS5325 WALNUT STREET READING,PA 19601	23-1365380	501C3		78,928	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
OPPORTUNITY HOUSE430 N 2ND STREET READING,PA 19601	23-2543677	501C3		55,778	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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OPPORTUNITY HOUSETH441 & 3RD FLOOR430 N 2ND STREET READING,PA 19601	23-2543677	501C3		7,752	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
PA MIGRANT EDUCATION PROGRAM800 PENN ST READING,PA 19602	23-2397926	501C3		29,089	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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PINE GROVE AREA FOOD PANTRY200 SCHOOL ST PINE GROVE,PA 17963	23-2683569	501C3		7,071	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
PORT CARBON FOOD PANTRY2 PARK ST POTTSVILLE,PA 17901	23-1670456	501C3		7,151	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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POTTSTOWN SALVATION ARMY PO BOX 378 POTTSTOWN,PA 19464	13-5562351	501C3		13,269	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
POTTSVILLE AREA FOOD PANTRY7TH LAUREL BLVD POTTSVILLE,PA 17901	23-1670456	501C3		48,650	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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POTTSVILLE SALVATION ARMY 400 SANDERSON ST POTTSVILLE,PA 17901	13-5562351	501C3		5,438	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
POTTSVILLE SALVATION ARMY 400 SANDERSON ST POTTSVILLE,PA 17901	13-5562351	501C3		22,500	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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PRODUCE FOR KIDSGBFB 1011 TUCKERTON COURT READING, PA 19605	22-2456238	501C3		43,505	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
QUEEN OF ANGELS22 ROTHERMEL STREET READING, PA 19605	23-2325706			7,333	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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READING ELDERLY HOUSING100 NORTH FRONT STREET READING,PA 19601	22-2251607			33,795	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
READING HISPANIC SDA 1228 N 10TH ST READING,PA 19601				41,546	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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READING SALVATION ARMY 301 S 5TH STREET READING, PA 19601	13-5562351	501C3		258,235	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
RHODES APARTMENTS815 FRANKLIN STREET APT 1101 READING, PA 19601	23-6003364	501C3		12,121	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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RHODES APARTMENTS815 FRANKLIN STREET APT 1101 READING,PA 19601	23-6003364			16,052	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
RINGTOWN FOOD PANTRY155 ZION GROVE RD RINGTOWN,PA 17967	23-1670456	501C3		22,344	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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ROMANIAN COMMUNITY CHRISTIAN CHURCH515 CHESTNUT ST READING,PA 19601				28,968	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
SCHUYLKILL COMMUNITY ACTION PROGRAM225 N CENTRE ST POTTSVILLE,PA 17901	23-1670456	501C3		182,401	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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SCHUYLKILL COUNTY OFFICE OF SENIOR SERVICES110 LAUREL BLVD POTTSVILLE,PA 17901	23-6003048			8,294	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
SCHUYLKILL DISASTER RECOVERY225 N CENTRE ST POTTSVILLE,PA 17901	23-1670456	501C3		14,451	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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SCHUYLKILL HAVEN FOOD PANTRY - CSFPPO BOX 303 SCHUYLKILL HAVEN,PA 17972	23-1670456	501C3		5,553	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
SCHUYLKILL VALLEY ELEMENTARY SCHOOL62 ASHLEY WAY LEESPORT,PA 19533	23-1670251			18,226	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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SCHUYLKILL VALLEY FOOD PANTRY15 MCCOMB ST NEW PHILADELPHIA,PA 17959	23-1670456	501C3		8,039	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
SCHUYLKILL VALLEY PASTOR'S ASSN102 APPLE LANE LEESPORT,PA 19533	23-2766689	501C3		45,861	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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SENCIT TOWNE HOUSE APARTMENTS20 S SUMMIT AVENUE SHILLINGTON,PA 19607	23-2584838			8,260	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
SHENANDOAH FOOD PANTRY MOUNT OAK STS SHENANDOAH,PA 17976	23-1670456	501C3		9,653	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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SHENANDOAH VALLEY ELEMENTARY SCHOOL805 W CENTRE ST GIRARDVILLE,PA 17935	23-1697134			43,233	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
SPANISH SPEAKING SENIORSHISPANIC CENTER501 WASHINGTON STREET READING,PA 19601	23-2041081	501C3		67,847	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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SPRING VALLEY CHURCH OF GOD 2727 OLD PRICETOWN ROAD READING, PA 19612	23-1988874	501C3		29,754	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
SPRING VALLEY CHURCH OF GOD 2727 OLD PRICETOWN ROAD READING, PA 19612	23-1988874	501C3		89,590	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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SPRING VALLEY STUDENT MINISTRIES2727 OLD PRICETOWN RD TEMPLE,PA 19612	23-1988874	501C3		17,929	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
SSCKIDS CAFE VENDOR501 WASHINGTON STREET READING,PA 19601	23-2041081	501C3		90,178	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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ST CLAIR AREA ELEMENTARY SCHOOL227 S MILL ST ST CLAIR,PA 17970	23-1671498			25,574	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
ST BENEDICT'S RCC2020 CHESTNUT HILL ROAD MOHNTON,PA 19540	23-2583851	501C3		6,812	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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ST JAMES CHAPEL COGIC 11-15 S 9TH STREET READING, PA 19602	23-2389425	501C3		10,381	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
ST JAMES CHAPEL COGIC 11-15 S 9TH STREET READING, PA 19602	23-2389425	501C3		102,237	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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ST JOHN'S LUTHERAN CHURCH521 WALNUT STREET READING, PA 19601	23-1489824	501C3		47,071	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
ST JOSEPH'S RCC1018 NORTH 8TH STREET READING, PA 19604	23-1370431	501C3		75,890	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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ST LUKE'S LUTHERAN449 N 9TH ST READING,PA 19604	23-1494777	501C3		109,897	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
ST PAUL'S LUTHERAN CHURCH1559 PERKIOMEN AVENUE READING,PA 19602	23-6478890	501C3		61,770	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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ST PAUL'S UCC1312 OLD SWEDE ROAD DOUGLASSVILLE, PA 19518	23-1365124	501C3		22,980	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
STS CONSTANTINE AND HELEN GREEK ORTHODOX CHURCH 1001 EAST WYOMISSING BLVD READING, PA 19611	23-1412035	501C3		41,755	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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TAMAQUA HIGH RISE222 BROAD ST TAMAQUA,PA 18252	23-3044917			16,657	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
TAMAQUA PRIMITIVE METHODIST CHURCH57 HUNTER ST TAMAQUA,PA 18252	23-2271903	501C3		19,541	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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TEEN CHALLENGE TRAINING CENTER 33 TEEN CHALLENGE ROAD REHERSBURG,PA 19550	23-1695361	501C3		54,312	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
TREMONT FOOD PANTRY139 CLAY ST TREMONT,PA 17981	23-1670456	501C3		11,275	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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TRINITY UCC405 FRIEDNSBERG RD READING,PA 19606	23-1353353	501C3		36,419	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
TWIN VALLEY FOOD PANTRY2779 MAIN ST MORGANTOWN,PA 19543	23-7129887	501C3		111,961	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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VICTORY CHRISTIAN CENTER CHURCH 242 N WHITEOAK ST KUTZTOWN,PA 19530		501C3		19,879	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
WEST WYOMISSING ELEMENTARY SCHOOL2173 GARFIELD AVE W LAWN,PA 19609				13,140	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
WILLIAMS VALLEY FOOD PANTRY418 WICONISCO ST MUIR,PA 17957	23-2261354	501C3		17,734	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
WILSON FOOD PANTRY - CSFP15 WOODSIDE AVE WEST LAWN,PA 19608	46-0909537	501C3		58,826	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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WYNDCLIFFE APARTMENTS100 CHESTNUT ST HAMBURG,PA 19526	23-2015425			7,743	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
YMCA DUIPO BOX 1622 READING,PA 19601	23-1244009	501C3		13,018	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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YMCA HONOR HOUSEPO BOX 1622 READING,PA 19601	23-1244009	501C3		5,726	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
YMCA MEN'S BRIDGE HOUSE PO BOX 1622 READING,PA 19601	23-1244009	501C3		13,725	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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YMCA MEN'S SAFE HOUSEPO BOX 1622 READING, PA 19601	23-1244009	501C3		20,794	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
YMCA WOMEN'S BRIDGE HOUSEP O BOX 1622 READING, PA 19601	23-1244009	501C3		5,573	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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YMCA WOMEN'S SAFE HOUSEPO BOX 1622 READING, PA 19601	23-1244009	501C3		6,087	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
YMCA Y-HAVEN 631 WASHINGTON STREET READING, PA 19601	23-1244009	501C3		6,557	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
YORK COUNTY FOOD BANK254 PRINCESS ST YORK,PA 17404	23-2456238	501C3		389,284	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
ZION BLUE MTN UNITED CHURCH OF CHRISTOLD RTE 22 STRAUSSTOWN,PA 19559	23-2021133	501C3		42,550	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
21ST CENTURY GRANT ADMINISTRATION VARIOUS SITES READING,PA 19601				8,158	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED
3RD & SPRUCE RECREATION CENTERKIDS6320 SOUTH 3RD STREET READING,PA 19602	38-3860043			7,951	USDA & AVG WHOLESALE	FOOD	TO HELP FEED THE IMPOVERISHED

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
GREATER BERKS FOOD BANK

Employer identification number
22-2456238

Part I Types of Property

		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining 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				
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	352	6,461,716	USDA AND AVG WHOLESALE/L
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (_____)				
26	Other ▶ (_____)				
27	Other ▶ (_____)				
28	Other ▶ (_____)				

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

			Yes	No
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?	30a		No
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?	31		No
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a		No
b	If "Yes," describe in Part II			
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

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.

Identifier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493319032432

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 to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
GREATER BERKS FOOD BANK

Employer identification number
22-2456238

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	BEFORE THE 990 WAS FINALIZED A DRAFT OF THE ORGANIZATION'S 990 WAS SENT BY THE PREPARER TO THE ENTIRE BOARD OF DIRECTORS FOR THEIR REVEIW AND COMMENT THE ORGANIZATION'S TREASURER UTILIZED A 990 CHECKLIST AND SHARED HIS COMMENTS WITH THE PREPARER AND THE ENTIRE BOARD OF DIRECTORS THE PREPARER RESPONDED TO THE BOARD OF DIRECTORS ADDRESSING ALL COMMENTS UPON FURTHER REVIEW THE ENTIRE BOARD OF DIRECTORS AUTHORIZED THE PREPARER TO FINALIZE THE RETURN
	FORM 990, PART VI, SECTION B, LINE 12C	BY ANNUAL REVIEW OF CONFLICT OF INTEREST STATEMENTS AND SOLICITING BIDS ON SAME SERVICE/COVERAGE
	FORM 990, PART VI, SECTION B, LINE 15A	THE EXECUTIVE DIRECTOR COMPLETES A 9 PAGE PERFORMANCE EVALUATION WHICH IS PART QUESTIONS TO RATE SPECIFIC CATEGORIES SUCH AS LEADERSHIP WHICH IS SUBMITTED TO THE EXECUTIVE COMMITTEE THEY REVIEW IT, DISCUSS IT AND PRESENT THEIR OPINION TO THE BOARD OF DIRECTORS THE EXECUTIVE COMMITTEE THEN MAKES A RECOMMENDATION FOR COMPENSATION TO THE BOARD A PERCENTAGE OR A PERCENTAGE PLUS A BONUS WHEN THE COMPENSATION IS AGREED UPON THEN ONE OR TWO OF THE MEMBERS OF THE EX COMMITTEE SIT DOWN AND DISCUSS THE EVALUATION AND THE RESULTS WITH EXECUTIVE DIRECTOR
	FORM 990, PART VI, SECTION C, LINE 19	THE FOOD BANK HAS AN OPEN BOOK POLICY OF DISCLOSURE OF INFORMATION TO THE PUBLIC GOVERNING DOCUMENTS ARE MADE AVAILABLE TO ANY ONE WHO ASKS FOR THEM
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 1,671
	990, PART XII, LINE 2C	NO CHANGES