

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2011

Department of the Treas	sur
Internal Revenue Service	Э

For Paperwork Reduction Act Notice, see the separate instructions.

benefit trust or private foundation)

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

Open to Public Inspection

Ā	ਾ th	e 2011 calend	dar year, or tax year be	ginning		, 2011, and	ending			, 20
В	neck if	applicable	C Name of organization	OOTHILLS FOOI	BANK				D Empl	oyer identification no
П	Address	change	Doing Business As						86-0	619725
\equiv	Name ch	-	Number and street (or PO	box if mail is not delivere	d to street address)		Room/s	uite	E Telep	hone number
=	Initial ret	-	PO BOX 715		•				(480) 488-1145
Ξ	Teminat		City or town, state or count	ry and ZIP + 4						,471,899
=	Amended		Carefree, AZ						1	receipts \$
믐		on pending	F Name and address of pri		a DiPietro					
L '	мррисви	on pending	Same as C abo	•			H(a)	Is this a grou affiliates?	p return for	☐ Yes 🔀 No
			501(c)(3) 501(c) () (insert no)	4947(a)(1) or	527	Н(р)	Are all affiliat	es included?	☐ Yes ☐ No
		<u> </u>	.foothillsfoodba			<u> </u>	H(c)		halist (see in	
	Website			ssociation Other		L Year of formation	1988	,	legal domicite	AZ
				essociation Other	<u> </u>	E lear or tormation		- Otate Ci	regal comicile	
Pa	rt i	Summar	y ibe the organization's m	locion or most signi	ficent estudies	Provide food a	nd fine	noial a	ecietan	co to the
6	1	-		ission or most signi	incant activities	PIOVIGE 1000 A	IIG IIIIa	IICIAI A	18818 Call	ce co me
	5	local con	munity							
c⊗e: t_oo										
					 					
ا "ا م⊗ع	2		ox ▶ ☐ if the organizati						- 1	
	3		oting members of the go						3	10
		Number of in	dependent voting memb	pers of the governin	ig body (Part VI, k	ne 1b)		• • • • 🖳	4	10
5 C	5	Total number	of individuals employed	i in calendar year 2	011 (Part V, line 2	a)		• • • • 崖	5	1
& 📆	6	Total number	of volunteers (estimate	if necessary)					6	1,701
	7a	Total unrelate	ed business revenue fro	m Part VIII, column	(C), line 12			[]	7a	0
25	ь	Net unrelated	d business taxable incon	ne from Form 990-1	Γ, line 34			🏳	7b	0
C.)						Pri	ior Year		Current Year
R∰.	4	Contributions	and grants (Part VIII, III	ne 1h)				40,1	28	5,000
	9		rice revenue (Part VIII, I					1,071,5	15	1,415,055
n	10	•	come (Part VIII, column						88	189
u	11		e (Part VIII, column (A),	, .	•				735)	50,192
•	12		- add lines 8 through 1					1,110,9	<u>-</u>	1,470,436
	13		milar amounts paid (Pa	_ ` _ `				863,3		1,262,423
	14		to or for members (Parl		5 '				<u></u>	721
E	1	•	er compensation, emplo		•			30,3	40	38,797
P	15	•		•		•	_	30,3		
е П	1		fundraising fees (Part IX				- 1. C 1 ^{th 1} . 2 a 16.3) (1 V ₂ (-3)		
5	1		ing expenses (Part IX, o			SIVED	34. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			学者では高時間
S	1		es (Part IX, column (A),		B 6	10		57,5		74,666
		-	es Add lines 13-17 (mu					951,2		1,376,607
	19	Revenue less	expenses Subtract lin	e 18 from line 12.	. 3EP. 1	·을·2012 · [약]		159,7	93	93,829
vlet Asseta	Ì						Beginning o	Current Year		End of Year
×	20	Total assets (Part X, line 16)		· · · · OGD			480,5	92	579,454
und Sal-	21		(Part X, line 26)					1,6	76	2,013
nces		Net assets or	fund balances Subtrac	t line 21 from line 2	20			478,9	16	577,441
Par		Signatur			·					
			e that I have examined this return of preparer (other than off				knowledge an	d belief, it is		_
	1.00,0			4/14	77.				-/1-	
٠,	- []		DiPietro Jal	ma Do	Orel	w			8/30	112
Sign)	Signature	of officer					D	ate /	,
łerę	· >		DiPietro, Execu	tive Director	<u> </u>					
	[]	Type or pri	int name and title							
		Print/Type prepa	erer's name	Preparer's signature	in Chilar	Date	Ch	eck ıf	PTIN	
aid		Lisa G J	ohnston	Lisa G Johns	ess GARMU	m 8/15/20	la sel	f-employed	P004	46448
•	ırer	Firm's name	Custom A	ccounting & !	Tax		Firm's EIN	•		
، ددا	Only	Firm's address	▶ 37617 N	Cave Creek Ro	<u> </u>		Phone no			
	,		Cave Cre	ek AZ 85331					480-488	-4397
lay tr	ne IRS	discuss this n	eturn with the preparer s	hown above? (see	instructions)					Yes No

Form 990 (2011)

Fon	m 990 (2011) FOOTHILLS FOOD BANK	86-0619725	Page 2
_	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		
	Provide food and financial assistance to the local community		
2	Did the organization undertake any significant program services during the year which were not listed on the		
•	prior Form 990 or 990-EZ?		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	□ vos ਓ	Na
	services?		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, a	as measured by	
	expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the	ne amount of	
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a		evenue \$ 1,127,93	34)
	Provided emergency supply of food to individuals and families in the foo	thills area who are	
	in a crisis situation.		
			•
			
_			
		venue \$	_)
	Provided emergency financial assistance and referal information to indivi	duals and families	
	in the foothills area who are in a crisis situation.		* -
			
		<u> </u>	
4c	(Code) (Expenses \$ 103,436 including grants of \$) (Rev	venue \$	_)
	Assisting the local community through assistance of donations received.		
			
			
-	01		
	Other program services. (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ 1,365,859		

86-0619725

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	X	↓
	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)?	2	X	<u> </u>
-	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	-	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	}		
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	ļ	X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	1		
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C,		1	
	Part ill	5	ļ	ļ
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	ļ	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		ļ	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		İ	
	complete Schedule D, Part III	8		_X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			ĺ
	complete Schedule D, Part IV	9		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		1	
	VII, VIII, IX, or X as applicable	400		
ē	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
t	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		<u>X</u>
	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		X
C	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Χ	
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	_	X
i 2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	ĺ		
	Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	ļ		
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		<u>X</u> _
3	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investmetnt, and program service activities outlisde the United States, or aggregate	İ		
	foreign investments valued at \$100,000 or more? If "Yes,' complete Schedule F, Parts I and IV	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u> _
7	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 (see instructions)	17		<u>X</u> _
8	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	X	
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		T	_
	I	19		X
- u	<u></u>	20a		X
D	If "Yes" to line 20a, did the organization attach its audited financial statements to this return?	20b	1	_

<u> </u>			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part iX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	. 21		<u> </u>
	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States	1	1	1
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	<u></u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			1
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	<u> </u>	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	-		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	\perp	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			-
	to defease any tax-exempt bonds?	24c	1	1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Pod 45			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
ь	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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		f [
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Contract of	X
h	and the second s			
·	Schedule L, Part IV.	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		_	
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		-+	
•	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31		Х
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	ļ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,		$\neg +$	
•	IV, and V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	-	-+	_ v _
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	j	х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
30	related organization? If "Yes," complete Schedule R, Part V, line 2	36		3.7
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u>X</u>
J.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	}	-	
	Part VI	37		v
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	-3/	-+	<u>X</u>
50	19? Note . All Form 990 filers are required to complete Schedule O	38	Y	
	THE THEOREM THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CASE OF THE CASE OF THE CONTROL OF	- 1	A ,	

Fo	m 990 (2011) FOOTHILLS FOOD BANK 86-06	19725	Pag	e 5
	art V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V		[7
	Check it contains a response to any queen		Yes N	<u></u>
4	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	d.	4 14	78.7
1a		_ ਰੈ≹::		9
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
•	Did the organization comply with backup withholding rules for reportable payments to vendors and	- 1£ >.		
	reportable gaming (gambling) winnings to prize winners?	1c	<u> </u>	<u> </u>
2a		- 50		ेड्डिड ।
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	1 90		فجب
b		. 2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	. 12		ڙ. ،
3a			X	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	. 3b		
4a				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	- 1		
	account)?	. 4a	l x	
b		11:00	### C 555.	÷.3
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	- 23		-
E -	and the second s			
5a	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X	
þ			<u> </u>	<u></u>
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	. <u>5c</u>	 	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	- 1]]	
	organization solicit any contributions that were not tax deductible?	. 6a	<u> </u>	
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).	23.4		1,3
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7	物行"。	1
	and services provided to the payor?	. 7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		_
^	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			-
	required to file Form 8282?	. 7c	x	
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		7
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X	
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	` —	X	_
g		. 7g	X	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	. 7h	X	5 5
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			当
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	3	到一个人	4
	organization, have excess business holdings at any time during the year?	. 8	X	_
9	Sponsoring organizations maintaining donor advised funds.			5
а	Did the organization make any taxable distributions under section 4966?	. 9a	X	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	•	X	_
10	Section 501(c)(7) organizations. Enter	3.00	Marke Taggara	7
а	Initiation fees and capital contributions included on Part VIII, line 12	1.7	14 14 14 15	1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		杨军营的党	1
11	Section 501(c)(12) organizations. Enter	1	TO A PORT OF THE	일 4
а	Gross income from members or shareholders	Links.	San Park	î.
b	Gross income from other sources (Do not net amounts due or paid to other sources	다 (학교	7 - 1	j
-	against amounts due or received from them)	,	建 山北	j
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	[75] Acres	ز
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	128	#900200.#1 FT 47 mp	ī
			10.00	[
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		Torr Man	!
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O			i
b	Enter the amount of reserves the organization is required to maintain by the states in which		No.	/
	the organization is licensed to issue qualified health plans			
·	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u> </u>	

Pärt VI

Page 6 FOOTHILLS FOOD BANK Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

	Check if Schedule O contains a response to any question in this Part VI	•••••	· ·	• • •	• • •	• <u>LX</u>
Se	ction A. Governing Body and Management				Yes	N.
	Enter the number of voting members of the governing body at the end of the tax year	1a	10		777	11
. ط	If there are material differences in voting rights among members of the governing body, or			***		
	If the governing body delegated broad authority to an executive committee or similar					
	committee, explain in Schedule O				37.0	
	Enter the number of voting members included in line 1a, above, who are independent	1b	10	1	200	
b	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					J. P. L. T. (
2	any other officer, director, trustee, or key employee?			2		x
2	Did the organization delegate control over management duties customanly performed by or under the direct		••	<u> </u>		_^
3	supervision of officers, directors, or trustees, or key employees to a management company or other person?.			3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was file	ed?]]	4		X
5			ſ	5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint		• • •			
'a	one or more members of the governing body?		j	7a		X
	Are any governance decisions of the organization reserved to (or subject to approval by) members,		• • •			
U	stockholders, or persons other than the governing body?			7b		Х
	Did the organization contemporaneously document the meetings held or written actions undertaken during	• • • • • • •	г		200	<u> </u>
8	the year by the following					N. N.
_	The governing body?			ะ 8a		
a	Each committee with authority to act on behalf of the governing body?			8b	X	
9 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	• • • • • • •	⊦	- 65	_^_	
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	1	v
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C		• • 1			<u>X</u>
<u> </u>	tion b. I oncles (This occion b requests information about policies for required by the member revenue o			 -T	Yes	No
1 0 9	Did the organization have local chapters, branches, or affiliates?		Г	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		, . F			_^_
				10ь		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before file	- · · · · · · · ·	'	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	ing the form.		TOTAL Sec. 3		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	ĺ	v
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give re	.		12b		X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	so to commoto.	F			
·	describe in Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			13		
14	Did the organization have a written document retention and destruction policy?		` -	14		X
15	Did the process for determining compensation of the following persons include a review and approval by	• • • • • • •	-		+	_^_
. •	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	,	1	12 <u>5</u>	- }	
а	The organization's CEO, Executive Director, or top management official		j.	15a		v
b	Other officers or key employees of the organization		_	15b	 -	$\frac{X}{X}$
_	if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		14	477.3	-+	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
104	with a taxable entity during the year?		33	16a		v
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			Toa .	\dashv	<u>X</u>
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			4	1	
	organization's exempt status with respect to such arrangements?		1	16b		
Sect	ion C. Disclosure	••••	•	OD		
7	List the states with which a copy of this Form 990 is required to be filed AZ					
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	01(c)(3)e only)				
	available for public inspection. Indicate how you make these available. Check all that apply	- / (U)(U)U UIIIY)				
	Own website Another's website X Upon request					
,	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of int	erest nolicy				
	and financial statements available to the public during the tax year	orost policy,				
	State the name, physical address, and telephone number of the person who possesses the books and records o	the				
	organization ▶ Palma DiPietro (480)488-1145 PO BOX 715 Carefree, AZ 8					

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

		1	
Form	990	(2011)	

94	:_n	61	07	25	

202 7

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

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

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

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

(A)	(B)			(C)	>)		(D)	(E)	(F)	
Name and Title	Average hours per week (describe	1 ,		eck m		han one s both an		Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation	
	hours for related organizations in Schedule O)	office I t d n r i d u r r s e v t c d e o u r a o I r	l t n r s u t s i t	Office	K e y e m p l o y e e	H c e I o m g mp l e e o s n y t s e t e d	0 1 0 0 1	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) Dave Flatt				<u> </u>	_						
Board Member	2.00	X						a	0	0	
(2) Gina Durbin	}					}					
Board Member	2.00	X						q	0	0	
(3) Jeff Skoglind											
Board Member	2.00	X				ļI		a	0	0	
(4) Karen Harris									_	_	
Board Member	2.00	X				 		q	0	0	
(5) Allan Babendure Board Member	2.00			Х				q	o	0	
(6) David Shirey											
Secretary	5.00			X				q	0	0	
(7) Jeanne Panhorst											
President	2.00			X				q	0	0	
(8) Palma DiPietro											
Executive Director	40.00			X	_X	Х		36,040	0	0	
(9) Patt Smith											
Treasurer	5.00			<u> </u>				q	0	0	
(10)Robert Bean	1	i	I								
Board Member	2.00		_	X	_		_	q	0	00	
(11)Robert Hutson			-	ĺ	ł						
Vice President	5.00		_	_X	_		\perp	<u> </u>	0	0	
(12)				-	-						
(14)		+	+	\dashv	\dashv	_	+				

86-0619725

Part VII	Section A. Officers, Directors, Trustee	s, Key Empl	oyees	, an	d Hi	ghe	st Cor	npe	nsated Employee	s (continued)		
	(A) Name and Title	(B) Average hours per week	Average Position (do not check more than one box, unless person is both an officer, and director/fluistee)							Reportable compensation for related	rom	(F) Estimated amount of other
		(describe hours for related organizations in Schedule O)	i t d n r i d u r i s e v t c	I I t	0 1 1 0 0	Key employee	H c e c o m g m p i e e o s s s e t e d	L W	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		compensation from the organization and related organizations
(15)												
(16)					-	-				· · · · · · · · · · · · · · · · · · ·		
(17)		 		-							_	
(18)		 			-						1	
(19)					-							<u> </u>
(20)											-	
(21)												
(22)								1				
(23)											\top	
(25)												
c Total fr	al						!	>	36,040		0	o
2 Total nu	mber of individuals (including but not limited to	o those listed	above	e) w	ho r	ecen	ved mo	ore t	han \$100,000 in		0	
	organization list any former officer, director of	r trustee key	emple	waa		high	est co	mne	nested			Yes No
employe	ee on line 1a? If "Yes," complete Schedule J fe	or such indivi	dual .									3 X
organiza	individual listed on line 1a, is the sum of reposition and related organizations greater than \$1	150,000? If "Y										
5 Did any	person listed on line 1a receive or accrue con	npensation fro					-	atıo	n or individual	• • • • • •	,,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	ces rendered to the organization? If "Yes," col	mplete Sched	lule J	tor s	ucn	pers	son	• •	· · · · · · · · · · · · · · · · · · ·	• • • • • • •	5	5 X
1 Complet	. Independent Contractors te this table for your five highest compensated sation from the organization Report compens											
year	(A)								(B)			(C)
	Name and business address								Description of serv	rices	Cor	mpensation
												
	nber of independent contractors (including but		_	e list	ed a	abov	e) who)		3	102	Taranton Contraction

86-0619725

Part	VIII	Statement of Reven	ue					
	15 . ' 15 . ' 15 . '	The state of the s	The same of the sa		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1	a Federated campaigns	1a		1 1 1 1 1 1 1 1 1 1 1 1	34	To the state of the	4 19 22 34
	•	b Membership dues		1	7		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	《 一種知识)。
Contri- butions,	1	c Fundraising events		 	100 (3)		一个	- Control of the second
Grits,		d Related organizations		 	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	引。这是"个		10000000000000000000000000000000000000
Grants		e Government grants (contribu		5,000		"双流" 。	1. Sea	16 15
end Other		f All other contributions, gifts,		 		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
Semilar		and similar amounts not incli	_		A Same of the Same			- Produce
Amounts	1.	Noncash contributions include	L	 k			1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	. or 1737
	1 3	. =			5,000			
	┿.	II Total. Add lines la-ii	• • • • • • • • • • • • • • • • • • • •	Business Code	शिक्ष अस्तर व	The same of the sa	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Page Carlotte
	1 2	a Church Contributions	-	624200	31,529	31,529	I was a state of the state of t	Barrell Marie .
		b Civic Contributions	<u> </u>	624200	36,622			
Program	1 -	Business Contributions		624200	16,387			
Service	1					 		
Ravenue	1 7	d In-kind Contribution		624200	1,127,934			
	6	Individual Contribut		624200	150,293		 	
	1	f All other program service reve		624200	52,290			F gen = 1 - 40 80 F
	<u></u> 9	Total. Add lines 2a-2f	• • • • • • • •	<u> </u>	1,415,055		1 - 41 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	3	, ,					[
		and other similar amounts) .		_	189	189		
	4	Income from investment of tax						
	5	Royalties		🕨				
			(ı) Real	(ii) Personal	Fr. Carrier		编品公司等例	
	6a	Gross rents	L			建工程	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	美洲魔 女子
	b	Less. rental expenses						
	C	Rental income or (loss)						T. TEXTER T
	d	Net rental income or (loss)		▶				
	7a	Gross amount from sales of	(i) Securities	(II) Other				6. 网络基础的
		assets other than inventory				4 objects to	· · my fair and is	AND THE PARTY OF
	b	Less. cost or other basis			والمنافعة والمنافعة والمنافعة والمنافعة والمنافعة والمنافعة والمنافعة والمنافعة والمنافعة والمنافعة والمنافعة		Control of the contro	er in the second of the
_		and sales expenses			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	TO THE STATE OF		m Lighter the fact of
ť	C	Gain or (loss)				全部扩张的	《 图图》(图图)	是是"是这个"
ħ	d	l Net gain or (loss)						
ř	8a	Gross income from fundraising	ı				The same of the sa	
-		events (not including \$						A DOMESTIC OF THE PARTY OF THE
Re		of contributions reported on line	e 1c)		3. S.		La Care Maria	1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
v		See Part IV, line 18	a	30,290		And the state of the state of the state of	The second of th	er Storm (man bayer) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
e	b	Less direct expenses	b	1,463		化工作的		人類群人 "舞"
n u	C	Net income or (loss) from fund	raising events	▶	28,827			28,827
e	9a	Gross income from gaming act	tivities		1-1-1-1	11 July 12	5	" 12+" , 1
1		See Part IV, line 19	a			THE STATE OF		e de la companya de l
1	b	Less direct expenses	ь		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			Miller with the Tolling
		Net income or (loss) from gami	<u>-</u>	▶	/ ` -/			لد حدد اسام
		Gross sales of inventory, less				50 12 11 12 12 1 E		27 / 1 2- 1
	104	returns and allowances	a	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			"我说"
	b	Less cost of goods sold	b			AND THE PARTY OF T		227
		Net income or (loss) from sales	ļ <u>.</u>			اد مادة تاكنانكانده	. 555 mm al _ 165 al	
t		Miscellaneous Revenue		Business Code	7 . 5 F. J. J.	· 大型品、物心	17 61 87 83 85 TV 29	ो क्षाप्तिक संस्कृता । स्रोतिक संस्कृता स्थापिक स्थापिक स्थापिक स्थापिक स्थापिक स्थापिक स्थापिक स्थापिक स्थापिक स्थापिक स्थापिक स्थापिक
1	11a	Memorial Gifts		624200	1,365	1,365	= ' '	لا شندسسته دد.
		Capital Contribution		624200	20,000	20,000		
	c		 -					
	_	All other revenue						
		Total. Add lines 11a-11d	- · · · · · ·		21,365		The same of the same	
		Total revenue. See instructions	· · · · · · · · · · · · · · · · · · ·	•	1,470,436	1,436,609	m 4. 3. 3 3 3 4	20 027
					_, , ,	-,0,009	ų	28,827

Page 10

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 q		(B)		· · · · · · · · L
	not include amounts reported on lines 6b, 7b,	(A) Total expenses	Program service	Management and	(U) Fundraising
٠.,	9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21.				The state of the s
2	Grants and other assistance to individuals in			The state of the s	
	the United States See Part IV, line 22	1,262,423	1,262,423		A STATE OF THE PARTY OF THE PAR
3	Grants and other assistance to governments,			100 · 100 ·	
	organizations, and individuals outside the		ļ	12 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /	The state of the s
	United States See Part IV, lines 15 and 16		ļ		W. J. Barrell
4	Benefits paid to or for members	721	721	Entra market to the	學而而言, 我是學學
5	Compensation of current officers, directors,				
	trustees, and key employees	36,040	32,436	2,883	721
6	Compensation not included above, to disqualified			į.	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		<u> </u>	<u> </u>	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include			j	
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				<u> </u>
10	Payroll taxes	2,757	2,481	221	55
11	Fees for services (non-employees)]	
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
÷	Professional fundraising services See Part IV, line 17.		A STATE OF THE STA	The state of the s	
	Investment management fees				
g	Other	2,836	2,552	227	57
12	Advertising and promotion	8,339	7,505	667	167
13	Office expenses	6,376	5,738	510	128
14	Information technology	546	491	44	11
15	Royalties				<u>.</u>
16	Occupancy	38,041	34,237	3,043	761
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				·
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates		 	ļ <u>.</u>	
22	Depreciation, depletion, and amortization	6,207	6,187	20	
23	Insurance	1,921	1,729	154	38
24	Other expenses litemize expenses not covered				
	above (List miscellaneous expenses in line 24e If	12 11 元 五分形式			
	line 24e amount exceeds 10% of line 25, column				The second second
	(A) amount, list line 24e expenses on Schedule O)	A Children to a Rich	A STATE OF THE STA	建设公务 点线	是30%。10%。
а	Fees	933	839	75	19
b	Dues, Subscriptions, Lic.	986	887	79	20
C	Van, Maintenance, Equip	7,840	7,056	627	157
d	Volunteer Appreciation	949	854	76	19
е	All other expenses	(308)	(277)	(25)	(6)
25	Total functional expenses. Add lines 1 through 24e .	1,376,607	1,365,859	8,601	2,147
	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here	,			
	following SOP 98-2 (ASC 958-720)			t	

Parl	X	Balance Sheet	(A)	Т	(B)
		•	Beginning of year	1	End of year
			207 250	1	195,572
	1	Cash - non-interest-bearing		2	212,376
	2	Savings and temporary cash investments		3	
	3	Pledges and grants receivable, net		4	-
	4	Accounts receivable, net	• • •	4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of		_	
ĺ		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
A S		employers and sponsoring organizations of section 501(c)(9) voluntary		-	
S		employees' beneficiary organizations (see instructions)		6	
В	7	Notes and loans receivable, net		7	
c S	8	Inventories for sale or use	150,656	8	147,064
	9	Prepaid expenses and deferred charges		9	_
	10a	Land, buildings, and equipment cost or			
	100	other basis Complete Part VI of Schedule D 10a 38,8	350		
	b	Less accumulated depreciation		10c	22,842
	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		13	
		Intangible assets		14	
	14	-		15	1,600
	15	Other assets See Part IV, line 11		16	579,454
	16	Total assets. Add lines 1 through 15 (must equal line 34)		17	
	17	Accounts payable and accrued expenses		18	
	18	Grants payable		19	
L	19	Deferred revenue		20	
i	20	Tax-exempt bond liabilities		21	
b	21	Escrow or custodial account liability Complete Part IV of Schedule D	• • •	21	·
į	22	Payables to current and former officers, directors, trustees, key			
		employees, highest compensated employees, and disqualified persons			
t		Complete Part II of Schedule L		22	
i	23	Secured mortgages and notes payable to unrelated third parties	• • •	23	
S	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	2,013
	26	Total liabilities. Add lines 17 through 25	1,676	26	2,013
		Organizations that follow SFAS 117, check here ▶ 🔀 and complete			
F	[lines 27 through 29, and lines 33 and 34.	, ,		x
u n	27	Unrestricted net assets	478,916	27	577,441
ď	28	Temporarily restricted net assets		28	
-	29	Permanently restricted net assets		29	
B a		Organizations that do not follow SFAS 117, check here ▶ ☐ and			
ī	İ	complete lines 30 through 34.			
a	30	Capital stock or trust principal, or current funds		30	•
n C	31	Paid-in or capital surplus, or land, building, or equipment fund	····	31	
8	32	Retained earnings, endowment, accumulated income, or other funds		32	-
S	33	Total net assets or fund balances	177	33	577,441
	34	Total liabilities and net assets/fund balances	· · · · · · · · · · · · · · · · · · ·	34	579,454
	J-4	FEA			Form 990 (201

Fórm	990 (2011) FOOTHILLS FOOD BANK	86-061972	25	Page '	2
Pai	T'XI Reconciliation of Net Assets				
	. Check if Schedule O contains a response to any question in this Part XI		<u></u>	<u> X</u>	_
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1.4	70,436	
2	Total expenses (must equal Part IX, column (A), line 25)			76,607	-
3	Revenue less expenses Subtract line 2 from line 1			93,829	-
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4	78,916	-
5	Other changes in net assets or fund balances (explain in Schedule O)			4,696	-
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	5	77,441	
Pai	t XII [®] Financial Statements and Reporting			· : •	-
	Check if Schedule O contains a response to any question in this Part XII			🗀	
			T	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				日本日本の大学の
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
þ	Were the organization's financial statements audited by an independent accountant?		2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		機関		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		'	A Property of the Control of the Con	1
_	issued on a separate basis, consolidated basis, or both		-1-1-1		-
	Separate basis Consolidated basis Both consolidated and separate basis			Aut was	1
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	l x	
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		3ь	1	
	EEA		Form	990 (2011)	-

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

▶ Attach to Form 990 or Form 990-EZ.

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

► See separate instructions.

OMB No 1545-0047

2011

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

FOO	THI	LS FOOD BANK							86-0	619725			_
Pa	rt I	Reason for	Public Charity	Status (All organiz	ations mus	t complete	this part	See instr	uctions				_
The	orgar			use it is (For lines 1 thi									
1	\Box	A church, convention	n of churches, or a	ssociation of churches	described i	n section	170(b)(1)(A)(i).					
2	\Box	A school described i	n section 170(b)(1)(A)(ii). (Attach Schedu	ule E)								
3	$\bar{\sqcap}$	A hospital or a coop	erative hospital se	rvice organization descr	ribed in sec	tion 170(l	b)(1)(A)(iii).					
4	$\overline{\Box}$	A medical research	organization opera	ited in conjunction with a	a hospital o	lescribed i	n section	170(b)(1)	(A)(iii) . En	ter the hos	pital's n	ame,	
	_	city, and state											_
5		An organization ope	rated for the benef	it of a college or univers	sity owned	or operate	d by a gov	ernmenta	l unit desc	ribed in			
		section 170(b)(1)(A)(iv). (Complete Pa	art II)									
6	П			r governmental unit des	cribed in s	ection 170)(b)(1)(A)(v).					
7	X	An organization that	normally receives	a substantial part of its	support fro	m a gove	rnmental u	nit or from	the gene	ral public			
		described in section	170(b)(1)(A)(vi).	(Complete Part II)									
8				n 170(b)(1)(A)(vi). (Con									
9		An organization that	normally receives	(1) more than 33 1/3%	of its supp	ort from c	ontribution	s, membe	rship fees	, and gross	S		
		receipts from activiti	es related to its ex	empt functions - subjec	t to certain	exception	s, and (2)	no more th	nan 33 1/3	% of its			
		support from gross (nvestment income	and unrelated business	s taxable in	come (les	s section 5	11 tax) fro	m busines	sses			
				e 30, 1975 See section									
10				ed exclusively to test for									
11				ed exclusively for the be									
				orted organizations des						section			
		509(a)(3). Check the	box that describe	s the type of supporting					ough 11h				
		a 🗌 Typel	b 🗌 Type		Type III				d	<u> </u>	II-Other		
е				organization is not contr									
		persons other than f	oundation manage	ers and other than one o	or more put	licly supp	orted orga	nizations o	described i	n section			
		509(a)(1) or section											
f		If the organization re	eceived a written de	etermination from the IF	RS that it is	a Type I,	Type II, or	Type III su	pporting			_	_
		organization, check										<u>.</u> L	J
g		Since August 17, 20	06, has the organi	zation accepted any gift	t or contribi	ution from	any of the						
		following persons?											_
				controls, either alone of								Yes No	_
				y of the supported organ							11g(ı)		_
				cribed in (i) above?						• • • • •	11g(II)	 	_
		•		on described in (i) or (ii)							11g(III)	<u> </u>	_
h				t the supported organiza			1 4254		T	I - 4b -	6X	A	_
	(i) N	ame of supported organization	(II) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the o	-	(v) Did you the organi		organizati	is the on in col		Amount of support	
		-		above or IRC section	governing o		col (i)	-	(i) organiz				
				(see instructions)	V	No	Yes	No No	Yes	No No			
					Yes	NO	163	NU	163	NO			-
(A)													
(B)			··										-
(0)													
(C)													-
(Ο,						1							
(D)						 							-
,													
(E)				-		 							-
. ,													
													_
			I	l .	1	I	ŀ		1	1	ı		

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

(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)

	tion A. Public Support						45. T	4-1
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008_	(c) 2009	(d) 2010	(e) 2011	(f) To	otai
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	97,165	147,161	265,276	1,074,515	1,421,116	3,00	5,233
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	97,165	147,161	265,276	1,074,515	1,421,116	3,00	5,233
5	The portion of total contributions by each					-		
	person (other than a governmental unit or		İ					
	publicly supported organization) included					•		
	on line 1 that exceeds 2% of the amount		İ	-	, .			
	shown on line 11, column (f)				- ,	, , , ,		
6	Public support. Subtract line 5 from In 4			,			3,00	5,233
Sec	tion B. Total Support		-					
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) To	
7	Amounts from line 4	97,165	147,161	265,276	1,074,515	1,421,116	3,00	5,233
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	125	116	107	88	189		625
9	Net income from unrelated business activities, whether or not the business is regularly carried on			***	;			
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10 .						3,00	5,858
12	Gross receipts from related activities, etc. (see instructions).				12		
13	First five years. If the Form 990 is for the organization, check this box and stop here							>
Sec	tion C. Computation of Public Su							
14	Public support percentage for 2011 (line 6,	- · ·	=				99.98	<u>%</u>
15	Public support percentage from 2010 Sche					15	99.96	%
16a	and stop here. The organization qualifies a	as a publicly suppo	rted organization					►⊠
b	33 1/3% support test - 2010. If the organiz							
	box and stop here. The organization qualif							▶□
17a	10%-facts-and-circumstances test - 2011							
	more, and if the organization meets the "fac-							. .
	organization meets the "facts-and-circumst		_				• • • •	▶□
b	10%-facts-and-circumstances test - 2010							
18	more, and if the organization meets the "factorganization meets the "facts-and-circumst Private foundation . If the organization did	ances" test The o	rganızatıon qualıfie	s as a publicly su	pported organizati	on		▶ □
	Filvate roundation. If the organization dio	not offect a box o		, ira, or irb, one				- L

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

(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)
--------------------------------------	------------------------------	----------------------------

Sec	ction A. Public Support						
Cale	endar 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 bus under sec 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)	·			4		
_	ction B. Total Support						
	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b				<u></u>		<u> </u>
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	organization, check this box and stop here		<u></u>	rth, or fifth tax yea	ar as a section 501	(c)(3)	▶□
	ction C. Computation of Public Su	pport Percen	tage	- (5)		45	
15	Public support percentage for 2011 (line 8, c						<u>%</u>
16	Public support percentage from 2010 Sched				<u> </u>	16	%
	ction D. Computation of Investmen			column (6)		17	
17	Investment income percentage for 2011 (line Investment income percentage from 2010 S						<u>%</u>
18 19a	33 1/3% support tests - 2011, if the organi	zation did not che	ck the box on line	14. and line 15 is	more than 33 1/39	%, and line	
b	17 is not more than 33 1/3%, check this box 33 1/3% support tests - 2010. If the organialine 18 is not more than 33 1/3%, check this	zation did not che	ck a box on line 1	4 or line 19a, and	line 16 is more tha	an 33 1/3%, and	
20	Private foundation. If the organization did						

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 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		Employer identification number
	OTHILLS FOOD BANK		86-0619725
	irt I Organizations Maintaining Donor A	dvised Funds or Other Similar Fund	
	the organization answered "Yes" to Form 990, F		
	the digunization anowered for to the early	(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 advise	ors in writing that the assets held in donor advise	ed
•	funds are the organization's property, subject to the org		
6	Did the organization inform all grantees, donors, and d		
•	used only for charitable purposes and not for the benef		
Pa	rt il Conservation Easements. Complete		
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation	<u> </u>	orically important land area
	Protection of natural habitat	Preservation of a certific	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in the form	of a conservation
	easement on the last day of the tax year		
	,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified histo		
d	Number of conservation easements included in (c) acq		
			2d
3	Number of conservation easements modified, transferr	ed, released, extinguished, or terminated by the	organization during
	the tax year		
4	Number of states where property subject to conservation	on easement is located 🕨	
5	Does the organization have a written policy regarding ti	he periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easem	ents it holds?	
6	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation easements du	ring 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	· · · · · · · · · · · · · · · · · · ·	
_	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports cons		
	balance sheet, and include, if applicable, the text of the	•	nts that describes
_	the organization's accounting for conservation easeme		<u> </u>
Pa		ions of Art, Historical Treasures, or (Otner Similar Assets.
4.0	Complete if the organization answered "Yes" t		and and halance about works of
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for		
	provide, in Part XIV, the text of the footnote to its finance	•	erance or public service,
b	If the organization elected, as permitted under SFAS 11		and halance shoot works of ort
	historical treasures, or other similar assets held for pub	•	•
	•	inc exhibition, education, or research in furtherar	ice of public service,
	provide the following amounts relating to these items (i) Payenus included in Form 990 Part VIII line 1		▶\$
	(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, historic		
_			i gaiii, provide tile
2	following amounts required to be reported under SFAS Revenues included in Form 990, Part VIII, line 1	, ,	> ¢
	Assets included in Form 990, Part X		
_	radela illeluccu ili i viili adv. Fail A	. 	

4 Pai	Describe in Part XIV the intended uses of the organize tVI Land, Buildings, and Equipmen				·
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land				
b	Buildings				
С	Leasehold improvements				
d	Equipment		38,850	16,008	22,84
е	Other				
Tota	. Add lines 1a through 1e (Column (d) must equal Fo	orm 990, Part X, column	(B), line 10(c))		22,84

Part VII Investme	nts - Other Securities. See	Form 990, Part X, line 12		<u> </u>
•(a) Description of s		(b) Book value	(c) Method of valuation Cost or end-of-year market vi	
(1) Financial derivatives				
(2) Closely-held equity interes				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)			·	
(F)				
(G)				
(H)				
(I)				· · · · · · · · · · · · · · · · · · ·
Total (Column (b) must equal Form 9				
Part VIII Investme	nts - Program Related. See	Form 990, Part X, line 13		
(a) Description of	of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market va	alue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 9				
Part IX Other Ass	ets. See Form 990, Part X, line 15	<u> </u>		
	(a) Desc	cription		(b) Book value
(1) Security Deposit	<u>t</u>			1,600
(2)				
(3)				· · · · · · · · · · · · · · · · · · ·
(4)				
(5)		****		
(6)				
(7)				
(8)				
(10)		. <u></u>		1 600
	al Form 990, Part X, col (B) line 15)			1,600
	ilities. See Form 990, Part X, line			
	tion of liability	(b) Book value		
(1) Federal income taxes		2 012		
(2) Payroll Liabilit	ties	2,013		
(3)				
(4)				1
(5)				:
(6)				
(7)	,			
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 9		2,013	<u> </u>	· · · · · · · · · · · · · · · · · · ·
7 EIN 40 (ARC 740) England	a in Dart XIV provide the text of the	TOOTOOLO TO THE OTGENIZATION'S	financial statements that reports the	

Schee	dule D (Form 990) 2011 FOOTHILLS FOOD BANK	86-0619725	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta	atements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,470,436
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,376,607
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	93,829
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	<u> </u>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	93,829
	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Total revenue, gains, and other support per audited financial statements		1,470,436
1		 	1,470,430
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	/ 1	
b	Donated services and use of facilities	$\rightarrow : \cdots $	
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)	, <u>*</u> r	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,470,436
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1, 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	_	
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	_ 5	1,470,436
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1	Total expenses and losses per audited financial statements	1	1,376,603
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	_	
b	Prior year adjustments	_] .]	
C	Other losses		
d	Other (Describe in Part XIV)	_]	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,376,603
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
þ	Other (Describe in Part XIV)] - ,	
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,376,603
Pa	rt XIV Supplemental Information		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1	b	
and :	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete	•	
this	part to provide any additional information		
-			
			<u> </u>

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding **Fundraising or Gaming Activities**

e 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

Attach to Form 990 or Form 990-EZ.

Internal Revenue Service Employer identification number 86-0619725 FOOTHILLS FOOD BANK Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply e Solicitation of non-government grants a Mail solicitations f Solicitation of government grants b Internet and email solicitations g Special fundraising events c Phone solicitations d In-person solicitations 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? ☐ No ☐ Yes 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 (v) Amount paid to (m) Did fundraiser have (vi) Amount paid to (iv) Gross receipts (i) Name and address of individual (or retained by) (or retained by) custody or control of (II) Activity from activity fundraiser tisted in or entity (fundraiser) contributions? organization col (i) Yes No 10 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

EEA

86-0619725

		than \$15,000 of fundraising gross receipts greater than		d gross income on Forn	m 990-EZ, lines 1 and 6	b List events with
			(a) Event #1 Empty Bowls	(b) Event #2 Other Events	(c) Other events	(d) Total events Add col (a) through
R			(event type)	(event type)	(total number)	col (c))
e v e n	1 2	Gross receipts	18,722	11,568		30,290
u e	3	contributions	18,722	11,568		30,290
	4	Cash prizes				
L C	5	Noncash prizes				
e c t	6	Rent/facility costs				
Exp	7	Food and beverages				
p e n s	8	Entertainment,				
e s	9	Other direct expenses		1,463		1,463
	10	Direct expense summary Add lines			_	28,827
-	11	Net income summary Combine line Gaming. Complete if the				
Га	rt II	than \$15,000 on Form 990		103 10 1 01111 000, 1 01	try, mile re, or reported	2 111010
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
n	1	Gross revenue				
D	-	Gloss levelide	<u></u> · · · · · · · · · · · · · · · · ·			
	2	Cash prizes				
rect Exp	3	Noncash prizes				
Den ses	4	Rent/facility costs				
š	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No	% No	% No	the contract of
	7	Direct expense summary Add lines	s 2 through 5 in column (d)		()
	8	Net gaming income summary Com	nbine line 1, column d, and	d line 7	>	
9 a t	ls t	ter the state(s) in which the organization licensed to operate No," explain		of these states?	• • • • • • • • • • • • • • • • • • • •	🗌 Yes 🗌 No
10-		ere any of the organization's gaming	licenses revoked, suspen	ded or terminated during th	ne tax vear?	Yes No
10a		W II	mediada tatakat, adapar			

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more

ins, OMB No 1545-0047		Employer identification number 86-061 972 R			No X sax	organization answered "Yes" pient received more than \$5,000	(f) Method of valuation (g) Description of (h) Purpose of grant (book, Fiber) non-cash assistance or assistance							
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	Complete if the organization answered Tes to Form 990, Part IV, line 21 or 22. Attach to Form 990.			rants or assistance, the grantees' eligibility for the grants or assistance, and	the United States	the United States. Complete if the O00. Check this box if no one rec	(d) Amount of cash grant cash assistance							able
Governments, and Inc	Complete if the organization answers		d Assistance	stantiate the amount of the grants or assis	the selection criteria used to award the grants of assistance?	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 Part II can be duplicated if additional space is needed	(c) IRC section if applicable							enier total number of section 501 (c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table
SCHEDULE ! (Form 990)	Department of the Treasury Internal Revenue Service	Name of the organization FOOTHILLS FOOD BANK	General Information on Grants and Assistance	Does the organization maintain records to substantiate the amount of the g	ins selection checia used to award the grants or assistance. Describe in Part IV the organization's procedures for monitori	Grants and Other Assistance to Governments and to Form 990, Part IV, line 21, for any recipient that rec Part II can be duplicated if additional space is needed	(a) Name and address of organization of government						of codes of codes End(a)(2)	Enter total number of section 501(c)(3) and government organizar Enter total number of other organizations listed in the line 1 fable

86-0619725 990) (2011) FOOTHILLS FOOD BANK
Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Schedule I (Form 990) (2011)

Part III

Page 2

Schedule I (Form 990) (2011) (f) Description of non-cash assistance Food Items Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (a) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance 2 Monetary Assistance 1 Food Assistance Part IV ო 2

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service
Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

FOOTHILLS FOOD BANK

86-0619725

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

Attach to your tax return.

OMB No 1545-0172 2011

Attachment

► See separate instructions. Business or activity to which this form relates Sequence No 179

Identifying number Name(s) shown on return 86-0619725 FORM 990 -FOOTHILLS FOOD BANK **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions)............... 1 2 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 8 8 9 9 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 . 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service 15 Property subject to section 168(f)(1) election 15 5,144 MACRS Depreciation (Do not include listed property) (See instructions) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2011 45 If you are electing to group any assets placed in service during the tax year into one or more general Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (business/investment use (e) Convention (a) Depreciation deduction vear placed in (f) Method (a) Classification of property only-see instructions) service 19a 3-year property e prima 5-year property 7-year property 10-year property 15-year property 20-year property S/L 25 yrs 25-year property S/L 27 5 yrs MM Residential rental MM S/L 27 5 yrs property 39 yrs MM S/L Nonresidential real S/L MM property Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs MM 40-year Summary (See instructions) 1,018 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instructions For assets shown above and placed in service during the current year, enter the 23 23

86-0619725 Form 4562 (2011) FOOTHILLS FOOD BANK Page 2 Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) No 24b If "Yes," is the evidence written? Yes No Yes 24a Do you have evidence to support the business/investment use claimed? (i) (e) m (g) (h) (a) Business/ investment Elected Basis for depreciation Method/ Depreciation Type of property (list Date placed Cost or other basis section 179 (business/investment penod vehicles first) Convention deduction cost percentage 25 Special depreciation allowance for qualified listed property placed in service during #. 25 the tax year and used more than 50% in a qualified business use (see instructions) 26 Property used more than 50% in a qualified business use S/L-HY 5,091 1,018 2009|09|16|100 5,091 % % 27 Property used 50% or less in a qualified business use S/L-% % S/L-% S/L-28 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 30 Total business/investment miles driven during the year (do not include commuting miles) . 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles 33 Total miles driven during the year Add lines 30 through 32 Yes 34 Was the vehicle available for personal use No Yes No No Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by Yes No 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)... Note: If your answer to 37, 38, 39, 40, or 41 is "Yes." do not complete Section B for the covered vehicles

110te. Il your allower to or, oo, oo	7, 40, 01 41 13 103, 401	Tot complete occitor B to	1 1110 0010100 1011101			<u> </u>
Part VI Amortization						
(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	Amortiza period o percenta	or	(f) Amortization for this year
42 Amortization of costs that begins	during your 2011 tax yea	ar (see instructions)				
				 		
43 Amortization of costs that began t	before your 2011 tax yea	ar			43	
44 Total. Add amounts in column (f)	See the instructions for	where to report			44	

Form 8868	(Rev 1-2012)					Page 2
• If you ar	e filing for an Additional (Not Automatic) 3-Mo	nth Extension	n, complete only Part II and c	neck this box .		▶ 🛽
Note. Only	complete Part II if you have already been grante	ed an automa	tic 3-month extension on a prev	ously filed Form	3868	
If you ar	e filing for an Automatic 3-Month Extension, c					
Part II	Additional (Not Automatic) 3-Mon	th Extensi				
				er's identifying		
Type or	Name of exempt organization or other filer,	see instruction	_	_ ` `		umber (EIN) or
print	FOOTHILLS FOOD BANK				61972	
File by the	e date for PO BOX 715				number (\$	SSN)
filing your						
return See		e For a foreigi	n address, see instructions			
instructions	Carefree, AZ 85377	- (5)				
Enter the R	eturn code for the return that this application is	for (file a sepa	irate application for each return)		• • • •	<u>Q 1</u>
Applicati		Return	Application			Return
Is For	on .	Code	Is For			Code
Form 990)	01				
Form 990		02	Form 1041-A			08
Form 990		01	Form 4720			09
Form 990		04	Form 5227			10
	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	O-T (trust other than above)	06	Form 8870			12
-	not complete Part II if you were not already g					
for the who	for a Group Return, enter the organization's four le group, check this box ▶ ☐ If it is for names and EINs of all members the extension	r part of the gr		If this is and atta		
4 I requ	iest an additional 3-month extension of time unti	ıl	11-15_,20	12		
	alendar year 2011 , or other tax year beginnin		, 20and endir	·		, 20
	tax year entered in line 5 is for less than 12 mor	nths, check re	ason 💹 Initial return 🔛 Fii	nal return		
	nange in accounting period					
	in detail why you need the extension	h h l				
	governing board needs time to to the pot tax return before it is subm		review the			
- exer	pt tax return before it is subm	ittea.				
8a If this	application is for Form 990-BL, 990-PF, 990-T,	4720, or 6069	, enter the tentative tax, less an	y		
	fundable credits. See instructions	•			3a \$	
b If this	application is for Form 990-PF, 990-T, 4720, or	6069, enter a	ny refundable credits and			
estim	ated tax payments made include any prior year	overpayment	allowed as a credit and any			
amou	nt paid previously with Form 8868			<u> </u>	3b \$	
c Balaı	nce due. Subtract line 8b from line 8a Include y	our payment v	with this form, if required, by usi	ng EFTPS		
(Elec	tronic Federal Tax Payment System) See instru	ctions			3c \$	
Under pena knowledge	Signature and Verificulties of perjury, I declare that I have examined the and belief, it is true, correct, and complete, and	nis form, includ	it be completed for Part ding accompanying schedules a orized to prepare this form	•	nd to the b	est of my
Compt. =			e >			
Signature		Titi	e -	Date	Farm 200	20 /Dec 4 2245
EEA					rom 886	68 (Rev 1-2012)

Audited Financial Statements FOOTHILLS FOOD BANK December 31, 2011 and 2010

Kaiser & Carolin, P.C. Certified Public Accountants

KAISER & CAROLIN, P.C.

Certified Public Accountants Michael C. Kaiser, CPA Kathleen A. Carolin, CPA

INDEPENDENT AUDITORS' REPORT

To the Board of Directors of Foothills Food Bank

We have audited the accompanying statement of financial position of Foothills Food Bank (a nonprofit organization) as of December 31, 2011 and 2010, and the related statements of activities and cash flows for the years then ended These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Foothills Food Bank as of December 31, 2011 and 2010, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of functional expenses on page 9 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Kaiser & Carolin, P.C.

jaiser + Carolin, P.C.

Scottsdale, Arizona July 16, 2012

STATEMENTS OF FINANCIAL POSITION DECEMBER 31, 2011 AND 2010

ASSETS

	2011	2010
CURRENT ASSETS Cash and cash equivalents Inventory	\$ 387,949 147,064	\$ 306,080 150,656
Total current assets	535,013	456,736
CASH RESTRICTED FOR PURCHASE OF BUILDING	20,000	-
PROPERTY AND EQUIPMENT Less accumulated depreciation	38,850 16,008	36,750 10,503
Property and equipment, net	22,842	26,247
OTHER ASSETS Deposits	1,600	1,600
	\$ 579,455	\$ 484,583
LIABILITIES AND NET ASSE	<u>TS</u>	
CURRENT LIABILITIES Accrued liabilities	\$ 2,013	\$ 1,676
Total current liabilities	2,013	1,676
NET ASSETS Unrestricted Temporarily restricted	557,442 20,000	482,907
Total net assets	577,442	482,907
	\$ 579,455	\$ 484,583

STATEMENTS OF ACTIVITIES YEARS ENDED DECEMBER 31, 2011 AND 2010

		2	011			2010
	 Inrestricted		mporarily estricted	Total	Ur	restricted
SUPPORT AND REVENUES						
Contributions	\$ 288,182	\$	20,000	308,182	\$	291,152
Grants	5,000		-	5,000		3,000
Donated food	1,127,934		-	1,127,934		780,362
Investment interest	189		-	189		88
Fundraising events, net of expenses	29,132_		<u> </u>	29,132		36,351
	 1,450,437		20,000	1,470,437		1,110,953
FUNCTIONAL EXPENSES						
Program services	1,355,936		-	1,355,936		937,444
Supporting services	 19,967			<u> </u>		14,855
	 1,375,903		_	1,375,903		952,298
CHANGE IN NET ASSETS	74,534		20,000	94,534		158,655
Net Assets, Beginning of Year	 482,908			482,908		324,252
Net Assets, End of Year	\$ 557,442	_\$	20,000	\$ 577,442	\$	482,907

STATEMENTS OF CASH FLOWS DECEMBER 31, 2011 AND 2010

	 2011	 2010
CASH FLOWS FROM OPERATING ACTIVITIES: Cash received from contributions and grants Cash paid to suppliers and employees Interest received	\$ 342,314 (238,534) 189	\$ 330,503 (210,686) 88
Net cash provided by operating activities	 103,969	119,905
CASH FLOWS FROM INVESTING ACTIVITIES: Purchases of property and equipment	 (2,100)	 (9,669)
Net increase in cash	101,869	110,236
Cash and cash equivalents, beginning of period	 306,080	 195,844
Cash and cash equilavents, end of period	\$ 407,949	\$ 306,080
RECONCILIATION OF NET INCOME TO NET CASH PROVIDED BY OPERATING ACTIVITIES:		
Net income	\$ 94,534	\$ 158,655
Adjustments to reconcile net income to net cash provided by operating activities: Depreciation and amortization (Increase) decrease in assets: Inventory Increase (decrease) in liabilities: Accrued salaries and benefits	 5,505 3,592 338	 5,180 (44,850) 920
Total adjustments	 9,435	 (38,750)
Net cash provided by operating activities	\$ 103,969	\$ 119,905

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2011 AND 2010

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Operations

Foothills Food Bank is a not-for-profit organization whose purpose is to provide food and financial assistance to the local community. The Organization was formed in June 1988 to provide an emergency supply of food, referral information and financial assistance to individuals and families in Anthem, Carefree, Cave Creek, Desert Hills, New River, North Scottsdale and North Phoenix. The Organization funds its activities primarily from food and cash contributions, grants, and special events.

Basis of Presentation

The accompanying financial statements have been prepared using the accrual basis of accounting. The Organization is required by generally accepted accounting principles to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. Temporarily restricted net assets are those whose use has been limited by donor-imposed time restrictions or purpose restrictions. Permanently restricted net assets are net assets required by donor restriction or by law to be maintained by the Organization in perpetuity. Unrestricted net assets are all other net assets.

Estimates

The process of preparing financial statements in conformity with generally accepted accounting principles requires the use of estimates and assumptions regarding certain types of assets, liabilities, revenues, and expenses. Such estimates primarily relate to unsettled transactions and events as of the date of the financial statements. Accordingly, upon settlement, actual results may differ from estimated amounts.

Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted depending on the existence and/or nature of donor restrictions. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. Contributions that are required to be reported as temporarily restricted support are then reclassified to unrestricted net assets upon expiration of time restrictions or satisfaction of donor restrictions.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2011 AND 2010

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Contributed Services and Materials

In addition to receiving cash contributions, the Organization occasionally receives inkind contributions from various donors. It is the policy of the Organization to record the estimated fair market value of certain in-kind donations as an asset or expense in its financial statements, and similarly increase donations by a like amount.

A substantial number of volunteers have donated organization's programs and supporting services. Contributions of donated services that create or enhance non-financial assets or that require specialized skills, are provided by individuals possessing these skills, and would typically need to be purchased if not provided by donation, are recorded at their fair values in the period received. No amounts have been reflected in the accompanying financial statements for certain donated volunteer services. Volunteers have donated approximately 19,000 and 14,700 hours in 2011 and 2010, respectively, in processing donated food as well as in fundraising campaigns and administrative support.

Cash and Cash Equivalents

For purposes of the statement of cash flows, cash equivalents include time deposits, certificates of deposit, and all highly liquid debt instruments with original maturities of three months or less.

Concentration of Credit Risk

Financial instruments that potentially subject the Company to credit risks consist primarily of cash and cash equivalents. The Company, periodically throughout the years ended December 31, 2011 and 2010, maintained balances in various operating accounts in excess of federally insured limits.

Inventories

Donated inventories are state at the estimated value per pound of \$2. Purchased inventories are stated at the lower of cost, as determined using the first-in, first-out (FIFO) basis, or market value. Inventories include purchased and donated food and sundry items such as toilet paper, detergent and baby diapers.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2011 AND 2010

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Property and Equipment

Property and equipment are recorded at cost, or, if donated, at the approximate fair value at the date of donation. Depreciation is computed using the straight-line method. The Organization capitalizes all property and equipment with a basis of \$1,000 or more and an estimated useful life of three or more years.

The useful lives of property and equipment for purposes of computing depreciation are:

Furniture and equipment Vehicles

5 – 10 years 5 years

Advertising

Advertising costs are expensed as incurred. Advertising expense was \$200 and zero for the years ended December 31, 2011 and 2010, respectively.

Income Taxes

The Organization qualifies as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code. Accordingly, there is no provision for income taxes. In addition, the Organization qualifies for the charitable contribution deduction under Section 170 of the Code and has been classified as an organization that is not a private foundation. Income determined to be unrelated business taxable income would be taxable.

The Organization has adopted the provisions of FASB Accounting Standards Codification Topic ASC 740-10. The Organization evaluates its uncertain tax positions, if any, on a continual basis through review of their policies and procedures, regular tax filings and discussions with outside experts. As of December 31, 2011 and 2010, the unrecognized tax benefits accruals were zero. The Organization is no longer subject to Federal tax examinations for the years before 2008, and state examinations for the years before 2007.

Functional Expense Allocation

The costs of providing the Organization's various programs and activities have been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2011 AND 2010

NOTE 1: PROPERTY AND EQUIPMENT

Following are components of property and equipment as of December 31, 2011 and 2010:

	2011	2010
Furniture and equipment Vehicles	\$ 26,559 12,291	\$ 26,559
Less accumulated depreciation	38,850 16,008	36,750 10,503
	\$ 22,842	<u>\$ 26,247</u>

Depreciation expense for the years ended December 31, 2011 and 2010 was \$5,505 and \$5,180, respectively.

NOTE 2: OPERATING LEASE

The Organization leases its food distribution facility in Cave Creek, Arizona, which also houses its administrative office, under a five year operating lease with an options to renew. Base rental is \$1,600 per month with annual increases tied to the Consumer Price Index. Minimum future rental payments are as follows:

Years Ending December 31,		
2012	\$	19,200 16,000
2013		16,000
	\$_	85,200

Total rental expense for the years ended December 31, 2011 and 2010 was \$27,793 and \$22,592, respectively.

NOTE 3: KIWANIS CLUB OF CAREFREE BENEFIT FOUNDATION CONTRIBUTIONS

The Organization has received a commitment from the Kiwanis Club of Carefree Benefit Foundation for continuing contributions funded by a bequest to the Foundation which is invested in two limited partnerships. Contributions through December 31, 2011 totaled \$82,003. Because future contributions are unknown as to amount and timing, no amounts have been recorded as contributions receivable in these financial statements.

NOTE 4: EVALUATION OF SUBSEQUENT EVENTS

The Organization has evaluated subsequent events through July 16, 2012, the date which the financial statements were available to be issued.

STATEMENTS OF FUNCTIONAL EXPENSES YEARS ENDED DECEMBER 31, 2011 AND 2010

	20	11	2010			
	Program Services	Supporting Services	Program Services	Supporting Services		
Distributed food Cash assistance Salaries and payroll taxes Rent	\$ 1,148,407 114,017 34,917 25,014	\$ - 3,880 2,779	\$ 766,513 96,808 27,313 20,333	\$ - 3,035 2,259		
Utilities and maintenance Office supplies Insurance Delivery vehicle Depreciation	7,599 10,166 961 6,843 5,460	844 1,130 961 - 45	6,866 7,241 499 4,295 4,457	763 805 499 - 723		
Newsletters Marketing and fundraising Telephone and internet Volunteers	1,605 949 \$ 1,355,936	7,328 2,822 178 \$ 19,967	1,745 1,373 \$ 937,444	5,299 1,278 194 		