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DLN: 93493069003854

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection , 2012, and ending 06-30-2013 A For the 2012 calendar year, or tax year beginning 07-01-2012 D Employer identification number B Check if applicable GREATER PITTSBURGH COMMUNITY FOOD BANK Address change 25-1420599 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 1 NORTH LINDEN STREET ☐ Terminated (412)460-3663 Amended return City or town, state or country, and ZIP + 4 DUOUESNE, PA 15110 Application pending **G** Gross receipts \$ 40,476,295 Name and address of principal officer Is this a group return for LISA SCALES ┌ Yes 🗸 No affiliates? 1 NORTH LINDEN STREET DUQUESNE, PA 15110 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status H(c) Group exemption number ▶ Website: ► WWW PITTSBURGHFOODBANK ORG L Year of formation 1982 M State of legal domicile PA Part I Summary Briefly describe the organization's mission or most significant activities COMMITTED TO ELIMINATING HUNGER THROUGHOUT SOUTHWESTERN PENNSYLVANIA Activities & Governance Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 31 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 31 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 121 Total number of volunteers (estimate if necessary) 6 13,333 0 7a Total unrelated business revenue from Part VIII, column (C), line 12. 7a **b** Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Prior Year Current Year** 36,283,900 37,733,949 Contributions and grants (Part VIII, line 1h) . . . 2,425,754 2,479,549 Program service revenue (Part VIII, line 2g) . . . 76,810 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 10 -25,153 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 38,761,311

79,813 -68,126 40,225,185 0 13 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines **15 Expenses** 5,419,211 5,450,405 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 0 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright \underline{602,178}$ 33,713,440 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 35,435,690 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 39,132,651 40,886,095 18 -660,910 19 Revenue less expenses Subtract line 18 from line 12 . -371,340 (Assets or id Balances **Beginning of Current End of Year** 12,915,245 20 Total assets (Part X, line 16) . . 12,301,872 21 2,155,328 Total liabilities (Part X, line 26) . . . 1,217,062 22 Net assets or fund balances Subtract line 21 from line 20 11,084,810 10,759,917

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

	I.	*****			2014-03-07		
Sign	7	Signature of officer			Date		
Here	k	LISA SCALES CHIEF EXECUTIVE OFFICE	R				
	7	Type or print name and title					
Doid		Print/Type preparer's name SUSAN M KIRSCH	Preparer's signature	Date	I CHECK I II I	PTIN P00341397	
Paid Prepare	r	Firm's name FSCHNEIDER DOW	DOWNS & CO INC		Firm's EIN 🟲 25-3	1408703	
Use Onl		Firm's address - ONE PPG PLACE S	UITE 1700		Phone no (412) 2	261-3644	
		PITTSBURGH, PA	15222				

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

▽Yes **□**No

Part III	Statement of Program Service Accomplishments					
	Check if Schedule O contains a response to any question in this Part III					

Briefly describe the organization's mission

OUR MISSION IS TO FEED THE HUNGRY IN SOUTHWEST PENNSYLVANIA THROUGH A NETWORK OF PARTNERS AND TO MOBILIZE OUR REGION TO END HUNGER WE ACCOMPLISH THIS MISSION BY 1 SERVING AS A CENTRAL COLLECTION FACILITY FOR GROCERY PRODUCTS AND DISTRIBUTING THEM TO MEMBER AGENCIES SERVING THE NEEDY IN SOUTHWESTERN PENNSYLVANIA, 2 INVOLVING THE COMMUNITY AS FOOD DONORS, VOLUNTEERS AND FINANCIAL SUPPORTERS OF THE FOOD BANK AND OUR MEMBER AGENCIES, 3 WORKING COLLABORATIVELY WITH OTHERS ON PROGRAMS THAT EMPOWER THE NEEDY TO MEET THEIR OWN NUTRITIONAL NEEDS, 4 COMMUNICATING THE NATURE OF AND SOLUTIONS TO THE PROBLEM OF HUNGER

2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	┌ Yes ┌ No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	┌ Yes ┌ No

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 35,781,250 including grants of \$) (Revenue \$ 2,272,507

THROUGH THE REGULAR FOOD DISTRIBUTION PROGRAM, THE FOOD BANK ACCEPTS GOVERNMENT COMMODITIES, PRODUCE, FOOD AND NON-FOOD GROCERY PRODUCTS DONATED BY BOTH NATIONAL AND LOCAL FOOD MANUFACTURERS AND DISTRIBUTORS, AS WELL AS CONCERNED COMMUNITY INDIVIDUALS WHO CONDUCT LOCAL FOOD DRIVES IN ADDITION TO THE GOVERNMENT COMMODITIES AND DONATED PRODUCT, THE FOOD BANK PURCHASES 30% OF THE FOOD IT DISTRIBUTES ADDITIONALLY, AGENCIES HAVE THE OPTION TO PURCHASE PRODUCTS FROM THE FOOD BANK'S WHOLESALE BUYING PROGRAM THROUGH THE EFFORTS OF THE FOOD BANK'S OPERATIONS, APPROXIMATELY 27,432,000 POUNDS OF GROCERY PRODUCTS WERE DISTRIBUTED TO LOW-INCOME INDIVIDUALS AND FAMILIES THROUGH ITS 400+ MEMBER AGENCIES DURING FY2012-13 OVER 9,600,000 POUNDS OF THAT PRODUCT WAS DISTRIBUTED IN OUR REGIONAL AREA OUTSIDE OF ALLEGHENY COUNTY IN FY2012-13 OUR DISTRIBUTION PROGRAMS DÉPARTMENT IS RESPONSIBLE FOR PROCUREMENT OF FRESH PRODUCE, RETAIL STORE DONATIONS, AND A VARIETY OF PROGRAMS, LISTED BELOW -PRODUCE TO PEOPLE WAS ESTABLISHED IN 2006 TO MOVE PRODUCE, PERISHABLE FOOD, AND OCCASIONALLY OVERSTOCKED ITEMS OFF THE WAREHOUSE SHELVES BEFORE THEY GO TO WASTE AND DISTRIBUTE THEM DIRECTLY TO PEOPLE IN NEIGHBORHOODS OF HIGH NEED THIS PROGRAM ALSO HELPS TO CLOSE THE GAP IN AREAS WHERE PANTRIES MAY HAVE LIMITED STORAGE AND DISTRIBUTION CAPABILITIES THE FOOD BANK DISTRIBUTED NEARLY 3,700,000 MILLION POUNDS AT 16 SITES IN 8 COUNTIES TO AN AVERAGE OF 7,250 HOUSEHOLDS (16,539 INDIVIDUALS) PER MONTH IN FY 2012-13 -THE COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) IS A USDA PROGRAM BENEFITING AT-NEED SENIORS IN FY 2012-13, CSFP DISTRIBUTED SENIOR BOXES TO APPROXIMATELY 6,402 SENIOR CITIZENS EACH MONTH IN ALLEGHENY, ARMSTRONG, BEAVER, GREENE, LAWRENCE AND SOMERSET COUNTIES -MEALS FOR MINDS IS A SCHOOL-BASED PANTRY FUNDED BY TARGET, WHICH FOCUSES ON PROVIDING HEALTHY FOOD TO ALL STUDENTS IN LOW-INCOME SCHOOLS IN FY 12-13, MEALS FOR MINDS DISTRIBUTED OVER 21,000 POUNDS OF FOOD TO CHILDREN AT WOOLSLAIR ELEMENTARY IN PITTSBURGH -DROP N GO IS A PILOT PROGRAM SIMILAR TO PRODUCE TO PEOPLE (ABOVE), BUT ONE IN WHICH OUR MEMBER AGENCIES RECEIVE A MONTHLY "DROP" OF FRESH PRODUCE AND OTHER GROCERY ITEMS, AND OUR MEMBER AGENCIES, RATHER THAN FOOD BANK VOLUNTEERS AND STAFF, DISTRIBUTE THE PRODUCT IN FY 2012-13, 62,189 POUNDS WERE DISTRIBUTED VIA "DROP N GO" -THE COMMUNITY TABLE PROGRAM (CT) CONNECTS RESTAURANTS, CATERERS, AND OTHER FOOD SERVICES WITH ON-SITE FEEDING AGENCIES IN THEIR AREA AND ESTABLISHES THE DONATION OF SCHEDULED PREPARED MEALS, CURRENTLY OVER 10,000 MEALS PER MONTH -THE RETAIL STORE DONATION PROGRAM THE FOOD BANK HAS ESTABLISHED AN ONGOING DONATION PROGRAM WHICH INCLUDES 170 RETAIL STORES UNSOLD FOOD PRODUCTS AS WELL AS MEAT THAT HAS BEEN FROZEN BEFORE ITS "BEST IF USED BY" DATE IS PICKED UP, RETURNED, INSPECTED, AND REDISTRIBUTED TO OUR 300 MEMBER AGENCIES SINCE ITS INCEPTION IN 2008, A TOTAL OF 14,378,610 POUNDS OF FOOD HAS BEEN DONATED BY OUR RETAIL STORES -THE FARM STAND PROJECT MAKES FRESH, AFFORDABLE PRODUCE AVAILABLE IN LOW-INCOME NEIGHBORHOODS WITH LIMITED ACCESS TO GROCERY STORES THE FOOD BANK OPERATES FARM STANDS IN THE CITY OF PITTSBURGH AND THE MON VALLEY AND PARTNERS WITH NON-PROFIT COMMUNITY AGENCIES WHO OVERSEE THE STANDS, WITH ASSISTANCE OF VOLUNTEERS FROM THE COMMUNITY THE PROGRAM ALSO HELPS THE COMMUNITY BY BUYING LOCAL PRODUCT, ACCEPTING FARMERS' MARKET NUTRITION PROGRAM (FMNP) CHECKS AND FOOD STAMPS AS WELL AS CASH, AND PROMOTING THE CONSUMPTION OF PRODUCE THROUGH NUTRITION EDUCATION IN 2012-13, THE FARM STANDS SOLD OVER \$91,000 WORTH OF FRESH, MOSTLY LOCALLY-GROWN PRODUCE AT 13 FARM STANDS IN UNDERSERVED NEIGHBORHOODS - LOCAL FARM DONATIONS LOCAL FARMS DONATE EXCESS AND SECONDS TO THE FOOD BANK THROUGHOUT THE GROWING SEASON THROUGH ON FARM PICK-UPS, OR BY DONATING AT THE END OF A FARMERS' MARKET DIRECTLY TO A MEMBER AGENCY ADDITIONALLY, WHEN FARMERS HAVE FINISHED THEIR HARVESTING, THE GLEANING PROGRAM ORGANIZES VOLUNTEERS TO HARVEST THE EXCESS LARGE SCALE GROWERS ALSO PICK AND PACK PRODUCE FOR DONATION TO THE FOOD BANK AND THE GROWER IS REIMBURSED FOR COSTS ASSOCIATED WITH THE DONATION OVER 496,000 POUNDS OF FRESH PRODUCE CAME TO THE FOOD BANK IN FY 2012-13 THROUGH THESE FARMING CONNECTIONS -PRODUCE PROGRAM IN ADDITION TO OUR LOCAL FARM DONORS, THE FOOD BANK WORKS WITH PRODUCE DISTRIBUTORS, WHOLESALERS, OTHER FOOD BANKS, AND PRODUCE BROKERS AT THE LOCAL, REGIONAL, AND NATIONAL LEVEL TO PROCURE DONATIONS THE FOOD BANK SOMETIMES INCURS COSTS ASSOCIATED WITH THESE DONATIONS, OVER 5 5 MILLION POUNDS OF FRESH PRODUCE MOVED THROUGH THE FOOD BANK IN FY 2012-13 THROUGH THIS PROGRAM -COMMUNITY HARVEST IS A PROGRAM THAT ENCOURAGES BACKYARD GARDENERS TO GROWN EXTRA FRESH PRODUCE AND PROVIDES CENTRAL DROP-OFF LOCATIONS AT GARDEN CENTERS TO MAKE IT EASIER TO DONATE

4b (Code) (Expenses \$ 1,222,293 including grants of \$) (Revenue \$ 77,362)

UNDER THE NETWORK OUTREACH, OUR NETWORK DEVELOPMENT IS CHARGED WITH MAINTAINING THE NUTRITIONAL VALUE OF FOOD DISTRIBUTION THE TEAM PREVENTS WASTING EFFORT, MONEY AND PRODUCT BY DEFILY MATCHING FOOD WITH PEOPLE, PROVIDING RECIPES, AND CONDUCTING COOKING DEMONSTRATIONS AT AGENCIES AND FARM STANDS THE NUTRITION EDUCATION PROGRAMS INCLUDE -CHOOSING HEALTHY OPTIONS PROGRAM (CHOP) PROMOTES THE ACQUISITION, DISTRIBUTION, AND CONSUMPTION OF HEALTHIER FOOD THE PROGRAM WAS DEVELOPED TO INCREASE THE PERCENTAGÉ OF HEALTHY FOODS AVAILABLE ON THE FOOD BANK'S INVENTORY, AND TO EDUCATE FOOD BANK, AGENCY, AND PARTNER DISTRIBUTION ORGANIZATION STAFF, VOLUNTEERS, AND EMERGENCY FOOD RECIPIENTS ON THE NUTRITIONAL QUALITY OF DIFFERENT FOODS AND CHOOSING A HEALTHY DIET ALSO IT HELPS INCREASE CONSUMPTION OF HEALTHIER FOOD AMONG NUTRITIONALLY AT-RISK EMERGENCY FOOD RECIPIENTS CHOP INCLUDES A FOOD RANKING SYSTEM THAT IDENTIFIES THE HEALTHIEST FOOD CHOICES ON THE INVENTORY AND IS USED AS A TEACHING TOOL FOR THE ACQUISITION OF HEALTHIER FOODS BY FOOD SOURCING STAFF AT THE FOOD BANK AND AGENCY STAFF WHO ARE RESPONSIBLE FOR ORDERING FOOD FOR DISTRIBUTION IN THE COMMUNITY THE CHOP SYSTEM HAS BEEN ADOPTED BY SEVERAL OTHER FOOD BANKS IN THE FEEDING AMERICA NETWORK -KIDS COOK PROVIDES HANDS ON COOKING AND NUTRITION EDUCATION CLASSES TO CHILDREN IN SCHOOLS, AFTER SCHOOL PROGRAMS, AND SUMMER DAY CAMPS IN OUR REGION THESE CLASSES FOCUS ON AREAS WHERE A HIGH PERCENTAGE OF STUDENTS QUALIFY FOR FREE OR REDUCED LUNCH, IN ORDER TO EFFECTIVELY PROVIDE NUTRITION EDUCATION TO FAMILIES WHO QUALIFY FOR OUT OTHER SERVICES DURING FY 2012-2013, WE LED 96 KIDS COOK SESSIONS FOR OVER 1,700 EDUCATIONAL HOURS TO AREA STUDENTS THE COOKING, ACTIVITY, AND NUTRITION (CAN) NEWSLETTER IS DISTRIBUTED TO EVERY PANTRY CLIENT IN ALLEGHENY COUNTY AND TO MANY PANTRY CLIENTS IN OUR REGIONAL COUNTIES WITH AN AVERAGE CIRCULATION OF OVER 20,000 COPIES, THIS IS THE PRIMARY METHOD BY WHICH WE PROVIDE NUTRITION EDUCATION TO A WIDE SWATH OF OUR CLIENTELE EACH ISSUE PROVIDES NUTRITION/COOKING TIPS, RECIPES USING OUR AVAILABLE INVENTORY, AND TIPS FOR LEADING AN ACTIVE LIFESTYLE OR CONNECTING WITH OTHER AVAILABLE RESOURCES (SUCH AS PRODUCE TO PEOPLE OR THE FARM STAND PROJECT) - LITERATURE FOR SENIOR CITIZENS RECEIVING ASSISTANCE THROUGH THE COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) PERSONS RECEIVING CSFP BOXES GET A BALANCED VARIETY OF NUTRITIOUS FOOD SOME OF THE ITEMS MAY BE UNFAMILIAR TO RECIPIENTS, OR PERSONS MAY BE STRUGGLING WITH ISSUES RELATED TO COOKING FOR A HOUSEHOLD THAT HAS BEEN REDUCED TO 1 OR 2 PERSONS NUTRITION LITERATURE INCLUDED IN CSFP BOXES ADDRESSES THESE CONCERNS, AND GIVE RECIPIENTS RECIPES TO HELP THEM INTERPRET THE INGREDIENTS THEY RECEIVE INTO TASTY, HEALTHFUL MEALS -FOOD SAFETY FOR FOOD PANTRIES WE RELY ON A NETWORK OF OVER 400 AGENCIES TO DISTRIBUTE GROCERIES TO PEOPLE IN NEED IN ORDER TO MITIGATE RISK ASSOCIATED WITH THIS VOLUNTEER-DRIVEN FOOD DISTRIBUTION NETWORK, WE PROVIDE TRAINING TO ALL OF THE PANTRIES THAT DISTRIBUTE GROCERIES DIRECTLY TO CONSUMERS THESE CLASSES SPECIFICALLY ADDRESS ISSUES RELATED TO AVOIDING TIME/TEMPERATURE ABUSE AND CROSS-CONTAMINATION IN REAL WORLD SCENARIOS THEY ADDRESS A NEED FOR FOOD SAFETY TRAINING THAT SPEAKS TO WHAT OUR PANTRIES EXPERIENCE AND IS GEARED TOWARD EFFECTIVE DISTRIBUTION OF GROCERIES (AGENCIES PREPARING OR SERVING FOOD TO CLIENTS RECEIVE RESTAURANT-LEVEL CERTIFICATION IN SAFE PREPARATION TECHNIQUES)

4c (Code) (Expenses \$ 909,338 including grants of \$) (Revenue \$ 58,641)

THE FOOD BANK'S COMMUNITY OUTREACH AND EDUCATION IS EDUCATING THE PUBLIC AND CHILDREN ABOUT THE ISSUES OF HUNGER AND POVERTY, WHILE EMPHASIZING THE VALUE OF COMMUNITY SERVICE THE HUNGER EDUCATION PROGRAMS INCLUDE -ADVOCACY REALIZING THAT PUBLIC POLICY AFFECTS OUR WORK JUST AS SURELY AS ANY OTHER FACTOR, WE HAVE DEVELOPED A PLAN TO MOBILIZE SUPPORT AND WORK WITH GOVERNMENT REPRESENTATIVES AT EVERY LEVEL TO MARSHAL RESOURCES TO ALLEVIATE HUNGER IN SOUTHWESTERN PENNSYLVANIA -COMMUNICATIONS THE FOOD BANK HAS EMBARKED UPON AN AGGRESSIVE PUBLIC AWARENESS AND EDUCATION CAMPAIGN, KNOWN AS THE CAMPAIGN TO END HUNGER AS THE TITLE SUGGESTS, THIS CAMPAIGN IS A CALL TO ACTION FOR EVERY CITIZEN AND EVERY RELEVANT AGENCY, GOVERNMENT AND PRIVATE, TO WORK TOGETHER TO ELIMINATE HUNGER IN OUR REGION SUPPORTED BY CORPORATE AND FOUNDATION UNDERWRITING AND LOCAL MEDIA PARTNERS, THE CAMPAIGN TO END HUNGER HAS ENHANCED THE SUCCESS OF ALL FOOD BANK OPERATIONS AND PROGRAMS, AND SUPPORTS THE ADVOCACY PROGRAM TO MAKE OUR REGION AND OUR STATE A MODEL FOR THIS NATION TO END HUNGER RAISING AWARENESS AND COMMUNITY EDUCATION HAVE ALSO HELPED THOSE IN NEED FIND THE FOOD BANK AND RECEIVE FOOD ASSISTANCE THE KIDS CAMPAIGN TO END HUNGER WAS LAUNCHED IN 2008 THIS PROGRAM ENCOURAGES THE EMPOWERMENT OF CHILDREN IN HELPING TO END HUNGER IN THEIR COMMUNITIES INDIVIDUALLY AND IN GROUPS, KIDS HAVE HAD FOOD DRIVES AND FUNDRAISERS THAT HELP THE FOOD BANK -EDUCATION THROUGH THE FOOD BANK SPEAKERS BUREAU, STAFF, BOARD MEMBERS, AND OTHER VOLUNTEERS GO OUT TO COMMUNITY GROUPS, SCHOOLS, CONGREGATIONS, AND OTHER PUBLIC EVENTS AND FORUMS AND FORUMS AND RAISE AWARENESS ABOUT THE FOOD BANK AND HUNGER ISSUES

(Code) (Expenses \$ 1,130,990 including grants of \$) (Revenue \$ 71,039)

THE FOOD BANK REPACK/VOLUNTEER PROGRAM WORKS IN PARTNERSHIP WITH HUNDREDS OF LOCAL CORPORATIONS, CHURCHES, SCHOOLS, INDIVIDUALS, AND CIVIC ORGANIZATIONS TO SUPPORT DAILY CLERICAL AND REPACK OPERATIONS AT THE WAREHOUSE, AS WELL AS STAFFING SPECIAL EVENTS AND COMMUNITY FOOD DROPS IN ADDITION TO MAINSTREAM VOLUNTEERS, THE FOOD BANK ALSO HELPS DISADVANTAGED YOUTH, PEOPLE WITH DISABILITIES, WELFARE TO WORK PARTICIPANTS, AND SENIOR RETRAINING PARTICIPANTS PREPARE FOR WORKFORCE READINESS IN THIS WAY, FOOD GETS OUT TO HUNGRY PEOPLE WHILE AT THE SAME TIME DIVERSE POPULATIONS ARE BROUGHT TOGETHER, EMPHASIZING THE IMPORTANCE AND RELEVANCE OF COMMUNITY SERVICE MORE THAN 18,086 VOLUNTEERS GAVE 72,140 HOURS OF SERVICE TO THE FOOD BANK IN FY 2012-13 SOUTHWESTERN PENNSYLVANIA FOOD SECURITY PARTNERSHIP THIS INITIATIVE WAS CONCEIVED AS A WAY TO BRING MORE NONTRADITIONAL STAKEHOLDERS TO THE TABLE, AND COLLABORATE ON LARGER STRATEGIES TO ADDRESS HUNGER THE STRATEGY BEHIND THIS WORK INVOLVES ENGAGING PARTNER ORGANIZATIONS FROM A VARIETY OF SECTORS (E.G. NONPROFIT, FOR-PROFIT, GOVERNMENT, EDUCATION, AND FAITH-BASED) TO REACH OUT TO THE PEOPLE THEY ALREADY SERVE WITH FOOD ASSISTANCE RESOURCES AND INFORMATION, ENCOURAGE THEIR MEMBERS TO SUPPORT FOOD ASSISTANCE PROGRAMS, AND PARTICIPATE IN COLLABORATIONS BETWEEN THE SECTORS TO INCREASE PARTICIPATION IN FOOD ASSISTANCE PROGRAMS THE OFFICIAL GOAL OF THE PARTNERSHIP IS TO REDUCE HUNGER IN THE 12 COUNTIES OF SOUTHWESTERN PENNSYLVANIA BY HALF IN FIVE YEARS SOME COUNTIES ARE FOCUED ON SNAP ENROLLMENT, SOME WITH SCHOOL MEAL PROGRAMS, SOME WITH SUMMER FOOD AND SOME WITH RESOLVING BARRIERS TO FOOD ASSISTANCE, SUCH AS TRANSPORTATION, SERVING IN A RURAL POPULATION, AND DISSEMINATING INFORMATION ABOUT AVAILABLE ASSISTANCE TO ISOLATED RURAL TOWNS. THE NATURE OF THE INITIATIVE ENCOURAGES EACH COUNTY TO TAKE "OWNERSHIP" OF THE PROBLEM OF HUNGER AND WAYS TO REDUCE IT THE AGENCY OUTREACH WORK IS FOCUSED ON IMPROVING THE QUALITY OF DISTRIBUTED PRODUCT AND TO PROVIDE EQUAL ACCESS TO FOOD ASSISTANCE TO ELIGIBLE LOW-INCOME PEOPLE IN ALLEGHENY COUNTY AND OUR REGIONAL SERVICE AREA. THE AGENCY RELATIONS TEAM IS ALSO CHARGED WITH THE DEVELOPMENT AND MAINTENANCE OF THE FOOD BANK'S RELATIONSHIP WITH ITS 400+ MEMBER AGENCIES WHICH SERVE AS EMERGENCY OR REGULAR FOOD DISTRIBUTION CENTERS, AFTER SCHOOL PROGRAM SITES AND ON-SITE FEEDING PROGRAMS. THIS DEPARTMENT MONITORS AGENCIES FOR COMPLIANCE WITH CLIENT INCOME GUIDELINES, FOOD HANDLING,STORAGE AND SAFETY, PARTICIPATORY REQUIREMENTS FOR FEDERALLY-FUNDED MEAL AND SNACK PROGRAMS, ORDERING AND DISTRIBUTING FOOD, AND REPORTING REQUIREMENTS THE FOOD BANK ALSO SECURES GRANTS TO HELP MEMBER AGENCIES UPGRADE EQUIPMENT LIKE REFRIGERATORS, SHELVING, COMPUTERS, AND PRINTERS AND THE LIKE REGIONAL OUTREACH A 2004 GAP STUDY PROVIDED HARD DATA SHOWING THAT OUR FOOD ASSISTANCE EFFORTS WERE INSUFFICIENT IN OUR REGIONAL COUNTY SERVICE AREA, BASED ON THE REPORTED NEED THE STUDY ALSO SHOWED THAT THE INFRASTRUCTURE NECESSARY TO MEET THE NEEDS OF THE LOW-INCOME POPULATIONS IS FRAGILE AND IN MANY CASES, INADEQUATE THE OUTREACH TEAM HAS WORKED TO STRENGTHEN AND BETTER UTILIZE OUR ESTABLISHED PARTNER DISTRIBUTION ORGANIZATIONS (PDO) IN THE 10 RURAL COUNTIES OF OUR SERVICE AREA THE PDOS INCLUDE SMALLER FOOD BANKS LOCATED IN WASHINGTON AND GREENE COUNTIES, THE COMMUNITY ACTION AGENCIES IN ARMSTRONG, FAYETTE AND INDIANA COUNTIES, A SALVATION ARMY BRANCH IN BEAVER COUNTY AND A SMALL FOOD BANK IN CAMBRIA COUNTY THAT SERVES CAMBRIA AND SOMERSET COUNTIES WE HELP EACH PARTNER BUILD ITS OWN CAPACITY BY PROVIDING TECHNICAL ASSISTANCE, ACCESS TO RESOURCES, AND TRAINING MODELS FOR STAFF/VOLUNTEERS ON -HOW TO ESTABLISH AND OPERATE AN EFFICIENT FOOD DISTRIBUTION SYSTEM,-MANAGING REQUIRED CLIENT AND INCOME DOCUMENTATION PAPERWORK,-SCREENING CLIENTS FOR FOOD STAMP ELIGIBILITY AND THUS REDUCE THE CLIENTS' RELIANCE ON THE FOOD ASSISTANCE AGENCY, -RECRUITING AND RETAINING VOLUNTEERS, IMPROVING INFRASTRUCTURE, -BOARD DEVELOPMENT, AND-BUILDING A DONOR BASE THROUGH DIRECT MAIL AND OTHER FUNDRAISING ACTIVITIES ALLEGHENY
COUNTY OUTREACH A GAP STUDY CONDUCTED FOR ALLEGHENY COUNTY IN 2007 SHOWED AREAS OF UNEVENLY SERVED COMMUNITIES THERE AS WELL,
INCLUDING PEOPLE LIVING WITH DISABILITIES AND THE WORKING POOR OUTREACH AND CAPACITY BUILDING EFFORTS HAVE INCLUDED BRINGING TOGETHER DIVERSE MUNICIPAL LEADER IN TARGETED COMMUNITIES, SOCIAL SERVICE PROVIDERS, AND SUCCESSFULLY ESTABLISHING NEW PARTNERSHIPS AND FORMING COALITIONS IN ALLEGHENY COUNTY BY LEADING A COMPREHENSIVE, EFFECTIVE, COMMUNITY-DRIVEN EFFORT, GREATER PITTSBURGH COMMUNITY FOOD BANK WILL ACHIEVE NOT ONLY ITS STATED ORGANIZATIONAL OBJECTIVES, BUT WILL ALSO HELP ENSURE THE STABILITY OF OUR NEIGHBORHOODS AND THE LONG-TERM WELL-BEING OF ALL CITIZENS WE WILL BE BETTER POSITIONED TO TARGET OUR RESOURCES WHERE THEY WILL BE MOST EFFECTIVE, ELMINATE DUPLICATION OF SERVICE AND HAVE AN ESTABLISHED NETWORK OF COMMUNITY ADVOCATES FOCUSED ON ELIMINATING HUNGER IN OUR REGION OUR FOOD STAMP OUTREACH

4d Other program services (Describe in Schedule O)

(Expenses \$ 1,130,990 including grants of \$) (Revenue \$ 71,039)

COORDINATORS PROVIDES SNAP (SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM - FOOD STAMPS) PRE-SCREENING AND EDUCATION OF POTENTIALLY

4e Total program service expenses ► 39,043,871

ELIGIBLE SNAP HOUSEHOLDS THROUGHOUT OUR FOOD ASSISTANCE NETWORK

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	140
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	ı	1	
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2 \cdot \cdot \cdot$.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

GI I	Statements Regarding Other 1RS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 33		1 65	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
)	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
3	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
)	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
•	2. 105/ to fine but of 55/ and the organization mention 0000-1	5c		
3	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	-		
1	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	[
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Se	ection A. Governing Body and Management				V	NI-
1a	Enter the number of voting members of the governing body at the end of the tax				Yes	No
	year	1a	31			
	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					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	31			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3		d by d		3		No
4	Did the organization make any significant changes to its governing documents since filed?			4		No
5	Did the organization become aware during the year of a significant diversion of the or	raanız	ation's assets?	5		No
6	Did the organization have members or stockholders?	rgamz	ation's assets.	6		No
	Did the organization have members, stockholders, or other persons who had the pow			-		INO
/a	more members of the governing body?	erto.	elect or appoint one or	7a		Νo
	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ui	ndertaken during the			1
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not a	requi	ired by the Internal I	Reveni	ıe Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the act	on's e	xempt purposes?	10b	Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it	on's e s gov	xempt purposes? erning body before filing	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e s gov orm 9	xempt purposes? erning body before filing	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e s gov · · ·	xempt purposes? erning body before filing	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's ess gov form 9 ly inte the p	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe	10b 11a 12a 12b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's ess gov form 9 ly inte the p	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	on's ess gov form 9 ly inte the p	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	on's ess gov	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe dapproval by	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe id approval by beration and decision?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the	on's e	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe dapproval by beration and decision?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	on's e	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe dapproval by beration and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	on's e	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe id approval by beration and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Form the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in contribute assets to the organization in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization in the o	on's e	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe d approval by beration and decision? ilar arrangement with a ito evaluate its s to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	on's e	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe d approval by beration and decision? ilar arrangement with a ito evaluate its s to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	on's e	xempt purposes? erning body before filing 190 erests that could give olicy? If "Yes," describe d approval by beration and decision? ilar arrangement with a ito evaluate its s to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

interest policy, and financial statements available to the public during the tax year

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of

Form	990	(2012
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

	1									
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-M13C)	MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	tion (han d in is l	ne l both	box, an d	heck unless officer stee)		(E Repor comper from organiza	table isation the tion (W-	(E) Reportable compensation from related organizations (W	-	(F) Estima amount of compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)	0	rganizati relate organiza	ed l
												+		
												-		
												+		
												-		
												_		
1b	Sub-Total			•										
c	Total from continuation sheet	· ·			•	•	•			395,711		0		47,875
	Total (add lines 1b and 1c) . Total number of individuals (in							ا ۱۸۰۱	ho receive			<u> </u>		47,673
2	\$100,000 of reportable compe						u abov	C) WI	no receive	u more ti	iaii			
													Yes	
3	Did the organization list any f o	ormer officer, dir	ector o	r trus	tee,	key	emplo	yee,	, or highes	t compen	sated employee		1	
	on line 1a? If "Yes," complete S	chedule J for suc	ch indivi	dual	•	•		•				3		No
4	For any individual listed on line organization and related organ													
	ındıvıdual			•	•	•		•				4		No
5	Did any person listed on line 1								_		or individual for			
	services rendered to the organ	iization <i>' IT Te</i> s	, сотрі	ete Si	спеа	uie J	TOFSU	сп ре	erson .		[5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												tax vear	
		(A)	-	4 (1011	101	CITE C	arende	41 ye	ar enamy		(B)	011 5	(C)
BIG PI	N CTURE MEDIA SOLUTIONS ONE ALTOO	ame and business NA PLACE PITTSBU		5228							cription of services NG/PROF SVCS	\dashv	Compen	332,676
	ORT CREATIVE COMMUNICATIONS 33				MA 0	2332				DIRECT MA		ightharpoons		286,024
												\dashv		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization -2

Part V	1 0 0 1	Statement of Revenue					<u> </u>
		Check if Schedule O contains a respo	nse to any question I		(B)	(C)	
				(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
s	1a	Federated campaigns 1a	229,589				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	16,650				
. B	c	Fundraising events 1c	162,047				
ffs, FA	d	Related organizations 1d					
nija	e	Government grants (contributions) 1e					
Sin							
utic ier	t	All other contributions, gifts, grants, and similar amounts not included above	29,659,808				
ള	g	Noncash contributions included in lines 1a-1f \$	21,921,722				
Cont	h	Total. Add lines 1a-1f		37,733,949			
			Business Code				
Program Serwce Revenue	2a	WHOLESALE FOOD PROGRAM	900099	2,077,323	2,077,323		
e ve	ь	SHARED MAINTENANCE FEES	900099	370,538	370,538		
Э. Н	С	TRUCKING SERVICES	900099	31,688	31,688		
er vic	d			,	,		
ă =	е						
gran	f	All other program service revenue					
Š	g	Total. Add lines 2a-2f		2,479,549			
	3	Investment income (including dividen					
		and other similar amounts)		80,471			80,471
	4	Income from investment of tax-exempt bond	proceeds				
	5	Royalties	(II) Personal				
	6a	Gross rents	(II) F ersonar				
	b	Less rental					
	С	expenses Rental income					
	d	or (loss) Net rental income or (loss)					
	-	(i) Securities	(II) Other				
	7a	Gross amount from sales of 42,805	, ,				
		assets other than inventory					
	b	Less cost or	F42				
		other basis and sales expenses 42,920	543				
	c	Gain or (loss) -115	-543	-658		1	-658
	d 8a	Net gain or (loss)	· · · · •	030			
Other Revenue		events (not including \$162,047 of contributions reported on line 1c) See Part IV, line 18					
노		a	125,778				
ţ.		Less direct expenses b		200		ı	a t = -
o	c 9a	Net income or (loss) from fundraising Gross income from gaming activities See Part IV, line 19	events 🛌	-81,869			-81,869
		а					
	Ь	Less direct expenses b					
	с 10а	Net income or (loss) from gaming acti Gross sales of inventory, less	vicies				
	200	returns and allowances .					
		а					
	b		antoru -			1	
	С	Net income or (loss) from sales of inv Miscellaneous Revenue	entory Business Code				
	11a	MISC	900099	13,743			13,743
	ь	11100		•			<u> </u>
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d	►	13,743			
	12	Total revenue. See Instructions .	🕨		2		
			- 1	40,225,185	2,479,549	0	11,687

Pari	IX Statement of Functional Expenses				- 1 age 10
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizati	ons must comp	lete column (A)	
	Check if Schedule O contains a response to any question in this Pa	rt IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	522,238	243,459	250,861	27,918
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	3,834,072	3,212,410	461,081	160,581
8	Pension plan accruals and contributions (include section 401(k)				
_	and 403(b) employer contributions)	78,684	64,601	10,279	3,804
9	Other employee benefits	679,185	608,862	47,880	22,443
10	Payroll taxes	336,226	282,153	40,456	13,617
11	Fees for services (non-employees)				
a	Management	6.657		6.657	
b	Legal	6,657	27.627	6,657	707
c C	Accounting	39,766	37,627	1,352	787
d e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	11,072		11,072	
' a	Other (If line 11g amount exceeds 10% of line 25,	11,072		11,072	
9	column (A) amount, list line 11g expenses on Schedule O)	596,652	326,047	72,546	198,059
12	Advertising and promotion	327,066	161,715	165,351	
13	Office expenses	677,669	460,114	72,464	145,091
14	Information technology	117,724	82,898	22,012	12,814
15	Royalties				
16	Occupancy	302,602	294,335	6,363	1,904
17	Travel	75,617	62,165	10,514	2,938
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	31,917	26,192	3,434	2,291
20	Interest				
21	Payments to affiliates	16,192	13,033	2,458	701
22	Depreciation, depletion, and amortization	550,596	524,822	19,698	6,076
23	Insurance	56,033	54,038	1,535	460
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	FOOD DISTRIBUTION	31,968,611	31,968,611		
b	FREIGHT AND TRUCKING	401,843	401,153	276	414
c	AGENCY SUPPORT	213,030	188,030	25,000	
d	WAREHOUSE EXPENSE	22,753	22,753		
e	All other expenses	19,890	8,853	8,757	2,280
25	Total functional expenses. Add lines 1 through 24e	40,886,095	39,043,871	1,240,046	602,178
26	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 ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response to any question in thi	s Part)	×	(A) Beginning of year		• • • • • • • • • • • • • • • • • • •
	1	Cash—non-interest-bearing			1,509,677	1	1,665,759
	2	Savings and temporary cash investments			1,319,367	2	531,766
	3	Pledges and grants receivable, net			208,507	3	218,963
	4	Accounts receivable, net			301,007	4	167,400
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees Complete Paschedule L	lırector		,	5	
Assets	6	Loans and other receivables from other disqualified persons (a 4958(f)(1)), persons described in section 4958(c)(3)(B), and and sponsoring organizations of section 501(c)(9) voluntary e organizations (see instructions) Complete Part II of Schedule	contrib mploye	utıng employers		6	
Š	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use			1,707,701	8	2,670,080
	9	Prepaid expenses and deferred charges			58,738	9	63,181
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1	9,717,055			
	ь	Less accumulated depreciation	10b	5,335,765	4,370,026	10c	4,381,290
	11	Investments—publicly traded securities	· · ·		2,826,849	11	3,216,806
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	_
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			12,301,872	16	12,915,245
	17	Accounts payable and accrued expenses			676,313	17	691,355
	18	Grants payable				18	
	19	Deferred revenue			540,749	19	1,463,973
	20	Tax-exempt bond liabilities				20	
ي ور	21	Escrow or custodial account liability Complete Part IV of Sch	edule D			21	
ilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	ors, tru				
Liabili		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s.			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X of	Schedule			
		D				25	
	26	Total liabilities. Add lines 17 through 25			1,217,062	26	2,155,328
S D D		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	▽ and	complete			
<u>8</u>	27	Unrestricted net assets			9,957,453	27	10,010,375
e E	28	Temporarily restricted net assets		-	1,127,357	28	749,542
Ξ	29	Permanently restricted net assets				29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check h complete lines 30 through 34.	ere ►	and and			
S	30	Capital stock or trust principal, or current funds				30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other f	unds			32	
₹	33	Total net assets or fund balances			11,084,810	33	10,759,917
_	34	Total liabilities and net assets/fund balances			12,301,872	34	12,915,245

Par	TEXT Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		40,2	225,185
2	Total expenses (must equal Part IX, column (A), line 25)	2		40.8	386,095
3	Revenue less expenses Subtract line 2 from line 1	3			60,910
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				-
5	Net unrealized gains (losses) on investments	5		-	336,017
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		10,7	759,917
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
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?	ne	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	require	3b	Yes	

Software ID: **Software Version:**

EIN: 25-1420599

Name: GREATER PITTSBURGH COMMUNITY FOOD BANK

Form 990, Part VII - Compensation of Compensated Employees, and Indepe	Officers, Dir	ectors	s,Tru	uste	ees,	, Key	/ En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list	dıre	than	o not one son i er an trus	box s bo d a tee)	, th		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
	any hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
LORI ASHBY BOARD MEMBER	80 0 00	х						0	0	0
MONTY BEDI BOARD MEMBER	30 0 00	х						0	0	0
MARVA BROWN BOARD MEMBER	1 30 0 00	х						0	0	0
WILLIAM M COTTER BOARD MEMBER	1 00 0 00	х						0	0	0
LISA FLORO BOARD MEMBER	40 0 00	х						0	0	0
SUSAN FLYNN BOARD MEMBER	5 00 0 00	х						0	0	0
ANNE FOULKES BOARD MEMBER	1 00 0 00	х						0	0	0
HENRY GORMAN BOARD MEMBER	1 00 0 00	х						0	0	0
TERRI GOULD BOARD MEMBER	6 00 0 00	х						0	0	0
COSETTE GRANT-OVERTON BOARD MEMBER	30 0 00	х						0	0	0
JAMES GROSJEAN BOARD MEMBER	1 00 0 00	х						0	0	0
KEN JOHNSTON BOARD MEMBER	30 0 00	х						0	0	0
RYAN KELLY BOARD MEMBER	90 0 00	х						0	0	0
SCOTT LAMMIE BOARD MEMBER	40 0 00	х						0	0	0
GREGORY LINTNER BOARD MEMBER	80 0 00	х						0	0	0
JOHN MCCLELLAND BOARD MEMBER	30 0 00	х						0	0	0
BILL MCCLOY BOARD MEMBER	70 0 00	х						0	0	0
JIM MCDONALD BOARD MEMBER	1 00 0 00	х						0	0	0
GEORGE MCGRADY BOARD MEMBER	1 50 0 00	х						0	0	0
MICHAEL MULLEN BOARD MEMBER	20 0 00	х						0	0	0
CAROL ROBINSON BOARD MEMBER	2 00 0 00	х						0	0	0
MIM SEIDEL BOARD MEMBER	50 0 00	х						0	0	0
LAURA SOLLER BOARD MEMBER	30 0 00	х						0	0	0
MATT SWIDER BOARD MEMBER	1 10 0 00	х						0	0	0
REV DAVID TAYLOR BOARD MEMBER	40 0 00	х						0	0	0

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

CHIEF OPERATIONS OFFICER

D JERMAINE HUSSER EXIT 712

CHIEF EXECUTIVE OFFICER

compensated Employees, and indepen	ilaent contr	COIS							ı	
(A) Name and Title	(B) A verage hours per week (list	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	any hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
KEVIN T HOLDEN EMERITUS BOARD MEMBER	20 0 00	х						0	0	0
HERB SHEAR EMERITUS BOARD MEMBER	20 0 00	х						0	0	0
ROCCO D'ANGELO PRESIDENT	2 00 0 00	х		х				0	0	0
MEL STEALS VICE PRESIDENT	1 00 0 00	х		х				0	0	0
MAUREEN SWEENEY SECRETARY	2 00 0 00	х		х				0	0	0
AMY LEWIS TREASURER	2 00 0 00	х		х				0	0	0
LISA SCALES EFFECTIVE 812 CHIEF EXECUTIVE OFFICER	50 00 0 00			х				109,119	0	11,395
SHARON HARM CHIEF FINANCIAL OFFICER	48 00 0 00			х				89,727	0	16,932
ANNE HAWKINS CHIEF DEVELOP OFFICER	45 00 0 00			х				87,951	0	9,106
RON CICHOWICZ EFFECTIVE 113 CHIEF COMMUNICATIONS OFFICER	45 00 0 00			х				0	0	0
LAURA RANDOLPH	45 00			v				25.252	0	0

Χ

0 00 50 00

0 00

25,352

83,562

0

0

0

10,442

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As Filed Data -

DLN: 93493069003854

OMB No 1545-0047

OM

Employer identification number

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

GREATER PITTSBURGH COMMUNITY FOOD BANK

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

2012

Open to Public Inspection

									25-14205		
	rt I			blic Charity Sta			•			<u>nstructior</u>	ns.
The	organı	zatıon ıs	not a privat	e foundation becaus	eitis (Forl	ınes 1 throı	ugh 11, check	only one b	ox)		
1	Г		-	on of churches, or a				ection 170(b)(1)(A)(i).		
2	Г	A scho	ol described	in section 170(b)(1	l)(A)(ii). (At	tach Sched	ule E)				
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descr	ibed in sectio	n 170(b)(1)(A)(iii).		
4	Γ	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in se	ction 170(b)(1)(A)(iii).	. Enter the
_	_			ty, and state							
5	ı	_	•	erated for the benefi	-	or universi	ty owned or o	perated by	a government	tal unit des	scribed in
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)						
6		A feder	al, state, or	local government or	government	al unit desc	rıbed ın secti	on 170(b)(1)(A)(v).		
7	✓	_		at normally receives		•	support from	a governm	ental unit or fi	rom the ge	neral public
8	Г			on 170(b)(1)(A)(vi). described in sectior			mplete Part II	:)			
9	Ē		-	at normally receives			•	-	butions, mem	bership fee	es, and gross
	·	_		ities related to its ex					· ·		· -
		•		oss investment inco	· ·	=					
				janızatıon after June						•	
10	Г	•	,	, ganızed and operateo	•			•	•		
11	Ė	_		ganized and operated						o carry ou	t the nurnoses of
	,			ly supported organiz							
				bes the type of supp							
	_			b							
e	Г		_	ox, I certify that the	_		,		, ,		•
			nan roundati i 509(a)(2)	on managers and ot	ner than one	or more put	olicly support	ea organiza	tions describe	ea in secti	on 509(a)(1) or
f				received a written de	etermination	from the IR	S that it is a	Type I. Typ	e II. or Type	III suppo	rtıng organization.
			his box					. ,	, , , , ,		гу от у али
g				2006, has the organi	ızatıon accep	ted any gift	or contributi	on from any	of the		
			ig persons?								
		. ,		rectly or indirectly o	•		J	persons de	iscribed in (ii)		Yes No
				governing body of th		_	n /				lg(i)
				er of a person descri							.g(ii)
_		• •		lled entity of a perso						11	g(iii)
h		Provide	the followi	ng information about	the supporte	ed organizat	:ion(s)				
(i) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is t	:he	(v) Did you	notify	(vi) Is	the	(vii) A mount of
	suppor			organization	organızatı		the organiz		organizati	ion in	monetary
0	rganiza	ation		(described on	col (i) list		ın col (i) o	•	col (i) org		support
				lines 1-9 above or IRC section	your gove docume	_	suppor	t?	ın the U	5 7	
				(see	docume	HC'					
				instructions))		N-	Was.	NI.	¥	NI-	\dashv
					Yes	No	Yes	No	Yes	No	
							1				
	_										
T - 4			1		•		1				i

supported organization

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 31,844,905 30,857,762 35,138,007 36,283,900 37,733,949 171,858,523 not include any "unusual grants ") 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 31,844,905 30,857,762 35,138,007 36,283,900 37,733,949 171,858,523 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 3,535,456 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 168,323,067 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (a) 2008 (f) Total beginning in) 🟲 31,844,905 35,138,007 36,283,900 37,733,949 Amounts from line 4 30,857,762 171,858,523 Gross income from interest, dividends, payments received on 80,471 87,069 securities loans, rents, royalties 117,499 102,231 77,757 465,027 and income from similar sources 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 103,250 106,383 135,303 171,148 139,521 655,605 capital assets (Explain in Part IV) 11 Total support (Add lines 7 172,979,155 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 97 310 % Public support percentage for 2011 Schedule A, Part II, line 14 15 95 680 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
/a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	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)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493069003854

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

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

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

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

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

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** GREATER PITTSBURGH COMMUNITY FOOD BANK 25-1420599 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes ┌ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

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

Check	▶	ıf the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, E	ĪN,
		expenses	and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	167	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	42	
c	Total lobbying expenditures (add lines 1a and 1b	o)	209	
d	O ther exempt purpose expenditures		39,043,662	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	39,043,871	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ente	er -0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 472	0 reporting	□ Ves □ No

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

	Lobbying Expe	nditures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	8,392	4,908	3,100	209	16,609
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	6,714	3,926		167	13,287

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge S
	Week Week was a second of the	(6	a)		(b)	
activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	1	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c)(5), (or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?					
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

OMB No 1545-0047

DLN: 93493069003854

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.

Open to Public Inspection

lame of the organization REATER PITTSBURGH COMMUNITY FOOD BANK		Emp	oloyer identific	ation numbe	er
REALER PILISDUNGE COMMUNITY FUOD BANK		25-	1420599		
Part I Organizations Maintaining Donor A organization answered "Yes" to Form 9	90, Part IV, line 6.				
	(a) Donor advised funds	_	(b) Funds and	other accou	ınts
Total number at end of year		_			
Aggregate contributions to (during year)					
Aggregate grants from (during year)					
Aggregate value at end of year		Ш.			
Did the organization inform all donors and donor adv funds are the organization's property, subject to the		nor adv	ısed	☐ Yes	┌ No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit?				┌ Yes	┌ No
art II Conservation Easements. Complete	e if the organization answered "Yes"	to Forn	n 990, Part I	V, line 7.	
Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space					
Complete lines 2a through 2d if the organization he	ld a qualified conservation contribution in	the forr	n of a conserva	ation	
easement on the last day of the tax year			Hold at th	e End of the	Vest
a Total number of conservation easements		2a	neid at the	e End of the	Tear
b Total acreage restricted by conservation easement	s	2b			
Number of conservation easements on a certified hi		2c			
Number of conservation easements included in (c) a historic structure listed in the National Register	· <i>'</i>	2d			
Number of conservation easements modified, transf	ferred, released, extinguished, or terminat	ed by th	he organizatior	during	
the tax year 🛌	· · · · · · · · · · · · · · · · · · ·	,	_	_	
N					
Number of states where property subject to conserv					
Does the organization have a written policy regarding enforcement of the conservation easements it holds	5?			☐ Yes	┌ No
Staff and volunteer hours devoted to monitoring, ins	pecting, and enforcing conservation ease	ments o	during the year		
A mount of expenses incurred in monitoring, inspect	ing, and enforcing conservation easemen	ts durın	g the year		
▶ \$	200		70/12/42/02/		
Does each conservation easement reported on line and section $170(h)(4)(B)(II)$?				☐ Yes	┌ No
In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financia ments	al stater	ments that des	cribes	
Organizations Maintaining Collection Complete if the organization answered		or Ot	her Similar	Assets.	
If the organization elected, as permitted under SFA works of art, historical treasures, or other similar as service, provide, in Part XIII, the text of the footnot	ssets held for public exhibition, education	, or rese	earch in further		
If the organization elected, as permitted under SFA works of art, historical treasures, or other similar as service, provide the following amounts relating to the	S 116 (ASC 958), to report in its revenue ssets held for public exhibition, education	statem	nent and balan		lic
(i) Revenues included in Form 990, Part VIII, line	1		► \$		
(ii) Assets included in Form 990, Part X			► \$		
If the organization received or held works of art, his following amounts required to be reported under SFA			· -		
Revenues included in Form 990, Part VIII, line 1			► \$		
b Assets included in Form 990, Part X					

Part	111 Organizations Maintaining Co	<u>llections of Art</u>	t, His	<u>stori</u>	<u>cal Tı</u>	reasure	es, or O	<u>the</u>	r Similar As	sets (c	<u>ontınued)</u>
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other recor	ds, c	heck	any of	the follow	ing that a	re a	significant use	e of its	
а	Public exhibition		d	Γ	Loan	or excha	nge progr	ams			
b	Scholarly research		e	Г	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII										
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar										
	assets to be sold to raise funds rather than t									│ Yes	☐ No
Par	Part IV, line 9, or reported an an						nswered	1 "Y	es" to Form 9	9 90, ──	
1a	Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No										
b	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing t	able		_				
							-	_	1A	nount	
С.	Beginning balance						<u> </u>	1c			
d	Additions during the year						—	1d			
e	Distributions during the year						-	1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 217	?						☐ Yes	□ No
_ь	If "Yes," explain the arrangement in Part XII										<u> </u>
Pa	rt V Endowment Funds. Complete	f the organizatio (a)Current year		swer)Prior					t IV, line 10. Three years back	(a)Four	oars back
1a	Beginning of year balance	(a)Curient year	(1)	PHOL	усаі	b (c) i wo	years back	(u)	illee years back	(e)i oui	rears back
ь	Contributions										
c	Net investment earnings, gains, and losses										
								_			
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balan	ce (lır	ne 1g	, colum	n (a)) hel	ld as				
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment										
c	Temporarily restricted endowment ▶										
	The percentages in lines 2a, 2b, and 2c should equal 100%										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	atıon	that	are hel	d and adn	nınıstered	l for	the	Yes	No
	(i) unrelated organizations								3a		
_	(ii) related organizations								3a		
	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the	•						٠	3	b	<u></u>
4 Date	t VI Land, Buildings, and Equipme					10					
T G	Description of property	THE SECTION S	,0,1	(a	Cost or (inves	r other (I	b) Cost or ot basıs (othe		(c) Accumulated depreciation	d (d) B	ook value
	Land						332.	,699			332,699
	Buildings						6,676,	_	3,473,4	56	3,202,578
	Leasehold improvements							,903	13,3	_	26,592
	Equipment						1,176,	-	802,1	_	373,862
e	Other						1,492,	-	1,046,8	12	445,559
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part .	X, colu	umn (B), line	10(c).)		. '	🕨		4,381,290

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1.	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
	Form COO Dart V line	12
Part VIII Investments—Program Related. See		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
	<u> </u>	
	+	
the contract of the contract o		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, line		
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
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Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	ne 15. otion	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15. otion	(b) Book value
Part IX Other Assets. See Form 990, Part X, III (a) Description (b) must equal Form 990, Part X, col.(B) line 15	ne 15. ption	
Part IX Other Assets. See Form 990, Part X, lin (a) Description (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X	ne 15. ption .) c, line 25.	
Part IX Other Assets. See Form 990, Part X, III (a) Description (b) must equal Form 990, Part X, col.(B) line 15	ne 15. ption	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability	ne 15. ption .) c, line 25.	
Part IX Other Assets. See Form 990, Part X, lin (a) Description (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X	ne 15. ption .) c, line 25.	
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Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability	ne 15. ption .) c, line 25.	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability	ne 15. ption .) c, line 25.	
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Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability	ne 15. ption .) c, line 25.	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability	ne 15. ption .) c, line 25.	

Par	t XI Reconciliation of Revenue per Audited Financial Statements	s With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements		1	40,768,849
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	336,017		
b	Donated services and use of facilities			
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII)	207,647		
e	Add lines 2a through 2d		2e	543,664
3	Subtract line 2e from line 1		3	40,225,185
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a			
b	Other (Describe in Part XIII)			
С	Add lines 4a and 4b		4c	0
5	Total revenue Add lines ${f 3}$ and ${f 4c.}$ (This must equal Form 990, Part I, line 12) .		5	40,225,185
Part	XII Reconciliation of Expenses per Audited Financial Statement	ts With Expenses	per	Return
1	Total expenses and losses per audited financial statements		1	41,093,742
2	A mounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities			
b	Prior year adjustments			
С	Other losses			
d	Other (Describe in Part XIII)...........2d	207,647		
e	Add lines 2a through 2d		2e	207,647
3	Subtract line 2e from line 1		3	40,886,095
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			
b	Other (Describe in Part XIII)...........4b			
c	Add lines 4a and 4b		4 c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18).		5	40,886,095

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE FOOD BANK FOLLOWS THE CODIFICATION TOPIC ON INCOME TAXES THE TOPIC PRESCRIBES A MINIMUM RECOGNITION THRESHOLD AND MEASUREMENT METHODOLOGY THAT A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN FINANCIAL STATEMENTS THE FOOD BANK'S STATEMENTS OF FINANCIAL POSITION AT JUNE 30, 2013 AND 2012 DO NOT INCLUDE ANY LIABILITIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS, FURTHER, THE FOOD BANK HAS NO UNRECOGNIZED TAX BENEFITS THE FOOD BANK IS NO LONGER SUBJECT TO EXAMINATION OF ITS TAX RETURNS FOR YEARS BEFORE 2010
PART XI, LINE 2D - OTHER ADJUSTMENTS		FUNDRAISING EXPENSE 207,647
PART XII, LINE 2D - OTHER ADJUSTMENTS		FUNDRAISING EXPENSE 207,647

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GREATER PITTSBURGH COMMUNITY FOOD BANK

DLN: 93493069003854

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

Employer identification number

25-1420599

Pa	rt I Fundraising Act	ivities. Complete	ıf the or	ganızatı	on answered "Yes" t	o Form 990, Part IV	, lıne 17.
a b c d 2a	Indicate whether the organ Mail solicitations Internet and email solic Phone solicitations In-person solicitations Did the organization have a or key employees listed in If "Yes," list the ten highes to be compensated at least	citations i written or oral agree Form 990, Part VII) t paid individuals or e	ement with or entity i	e f g i any indi n connec	Solicitation of non Solicitation of gov Special fundraising vidual (including officer	-government grants ernment grants g events rs, directors, trustees undraising services?	F Yes F No ndraiser is
Tota 3	(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais custo contrib Yes	Did ser have ody or rol of utions? No	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
	licensing	organization is regist			Solicit lulius or nas De		

Sche	dule	G (Form 990 or 990-EZ) 2012				Page 2
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		5, 5, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10	(a) Event #1 BLUES EVENT	(b) Event #2 GOLF OUTING	(c) Other events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	254,364	33,461		287,825
Зеуе	2	Less Contributions	158,649	3,398		162,047
_	3	Gross income (line 1 minus line 2)	95,715	30,063	3	125,778
	4	Cash prizes				
မွာ	5	Noncash prizes				
Expenses	6	Rent/facility costs		11,110)	11,110
쯊	7	Food and beverages .	7,720	838		8,558
Direct	8	Entertainment	66,400)		66,400
Δ	9	Other direct expenses .	120,089	1,490		121,579
	10	Direct expense summary Add lir	nes 4 through 9 ın column	(d)		(207,647)
	11	Net income summary Combine I	ine 3, column (d), and line		•	-81,869
Par	t III			"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
Revenue		\$15,000 on Form 990-EZ, li	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rey	1	Gross revenue				
မွ	2	Cash prizes				
sesued	3	Non-cash prizes				
Dreat Ex	4	Rent/facility costs				
<u>□</u>	5	Other direct expenses				
	6	Volunteer labor	Г Yes Г No	Г Yes Г No	Г Yes Г No	
	7	Direct expense summary Add line	es 2 through 5 in column (d)		
	8	Net gaming income summary Con	nbine lines 1 and 7 in colu	ımn (d)		
9 a b	Ist	er the state(s) in which the organiz he organization licensed to operate No," explain	gaming activities in eac	h of these states?		「Yes 「No
10a b	Wer	re any of the organization's gaming Yes," explain	licenses revoked, susper	nded or terminated during	the tax year?	

	chedule G	(Form 99	90 or 99	0-EZ)	201
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Page	31
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Does	the organization operate gaming act	ıvıtıes with nonmembers	, ⁷					
12	Is the organization a grantor, benefi	cıary or trustee of a trus	t or a member of a partnership or other entity					
	formed to administer charitable gaming?							
13	Indicate the percentage of gaming a	ctivity operated in						
а	The organization's facility							
b	An outside facility							
14	Enter the name and address of the p	erson who prepares the	organization's gaming/special events books and records					
	Name 🟲							
	Address ►							
15a	Does the organization have a contra	ct with a third party fron	n whom the organization receives gaming					
	revenue?		Yes No					
b	If "Yes," enter the amount of gaming	g revenue received by th	e organization 🟲 \$ and the					
	amount of gaming revenue retained	by the third party 🟲 \$ _						
c	If "Yes," enter name and address of	the third party						
	Name 🟲							
	Address 🟲							
16	Gaming manager information							
	Name 🟲							
	Gaming manager compensation 🟲 \$							
	D							
	Description of services provided							
	Director/officer	F Employee	☐ Independent contractor					
17	Mandatory distributions							
а	Is the organization required under s	tate law to make charita	ble distributions from the gaming proceeds to					
	retain the state gaming license? .		· · · · · · · · · · · · · · · · · · ·					
b	Enter the amount of distributions re	quired under state law di	stributed to other exempt organizations or spent					
	ın the organization's own exempt ac		· · · · · · · · · · · · · · · · · · ·					
Pai			part to provide the explanations required by Part I, line 2b,					

columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
REPORTING FUNDRAISING REVENUE	SCHEDULE G, PART II	GREATER PITTSBURGH COMMUNITY FOOD BANK'S FUNDRAISING EVENT GENERATED CONTRIBUTION AND QUID PRO QUO REVENUE IN ACCORDANCE WITH FORM 990, SCHEDULE GINSTRUCTIONS, CONTRIBUTION REVENUE RECEIVED IN CONNECTION WITH A FUNDRAISING EVENT IS SUBTRACTED FROM THE EVENT'S GROSS RECEIPTS AND REPORTED AS CONTRIBUTION REVENUE IN THE STATEMENT OF REVENUE THE BALANCE IS REFERRED TO AS GROSS INCOME ON SCHEDULE G, PART II, LINE 3 EXPENSES DIRECTLY CONNECTED WITH THE FUNDRAISING EVENT ARE SUBTRACTED FROM GROSS INCOME AND OFTEN CREATE THE MISTAKEN IMPRESSION THAT THE EVENT WAS NOT A FINANCIAL SUCCESS THE FOOD BANK BELIEVES THAT THE FOLLOWING IS A MORE ACCURATE PRESENTATION OF THE FINANCIAL RESULTS OF THE ORGANIZATION'S FUNDRAISING EVENT GROSS RECEIPTS \$287,825 LESS EXPENSES (\$207,647) NET FUNDRAISING REVENUE \$ 80,178

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DLN: 93493069003854

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

Noncash Contributions

Name of the organization GREATER PITTSBURGH COMMUNITY FOOD BANK

Employer identification number

Б.	Tunes of Dunes.				25-1420599			
126	Types of Property	(a)	(b)	(c)	(0	: :i)		
		Check If applicable	Number of contributions or items contributed	Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of c noncash contri	determi	_	ts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
_	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property			40.000		=		
	Securities—Publicly traded .	X	8	42,920	FAIR MARKET VAI	LUE		
	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
	Collectibles							
	Food inventory	X		21,878,802	AVG WHOLESALE	VALU	Е	
	Drugs and medical supplies .							
	Taxıdermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
25	Other ► (GIFT CARDS)	X	20		N/A			
26	AUCTION Other►(ITEMS)	x	11		N/A			
	Other (MISCELLANEOUS)	X	13		N/A			
	Other ► ()				,			
	Number of Forms 8283 received	by the orga	nızatıon durıng the tax vea	r for contributions				
	for which the organization comple	eted Form 8	283, Part IV, Donee Ackno	owledgement	29			3
							Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	eriod?			30a		No
b	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us	e third parti	es or related organizations	to solicit, process, or sell	noncash			
	contributions?					32a		Νo
b	If "Yes," describe in Part II							
33	If the organization did not report	an amount	in column (c) for a type of	property for which column (a) is checked.			
	describe in Part II		, , , , , , , ,		,			

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTIONS	, , , ,	THE ORGANIZATION CALCULATES DONATED FOOD ON A MEASUREMENT OF WEIGHT DURING THE FISCAL YEAR, THE ORGANIZATION RECEIVED APPROXIMATELY 21,878,802 POUNDS OF VARIOUS FOOD ITEMS

Schedule M (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Name of the organization GREATER PITTSBURGH COMMUNITY FOOD BANK **Employer identification number**

25-1420599

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	
	FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS, STAFF AND SELECTED VOLUNTEERS ARE SUBJECT TO THE FOOD BANK'S CONFLICT OF IN TEREST POLICY IN ACCORDANCE WITH THE POLICY THESE INDIVIDUALS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT EACH FISCAL YEAR IN ADDITION, UPON BEGINNING THEIR TERM, E ACH NEW BOARD MEMBER IS REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT THE CEO'S A SSISTANT TRACKS THE RECEIPT OF THE STATEMENTS AND SUBMITS THE STATEMENTS TO THE CEO AND TH E CHAIR OF THE BOARD DEVELOPMENT COMMITTEE FOR THEIR REVIEW UPON REVIEW OF THE STATEMENTS , ANY ACTUAL OR POTENTIAL CONFLICTS ARE BROUGHT TO THE ATTENTION OF THE BOARD CHAIR PROCE DURES FOR ADDRESSING CONFLICTS OF INTEREST ARE OUTLINED IN THE POLICY
	FORM 990, PART VI, SECTION B, LINE 15	THE FOOD BANK HAS AN INDEPENDENT EXECUTIVE COMPENSATION COMMITTEE COMPRISED OF THE PRESIDE NT, VICE PRESIDENT, AND A MEMBER OF THE BOARD THESE INDIVIDUALS MEET ANNUALLY TO EVALUATE THE CEO AND OTHER OFFICERS OF THE ORGANIZATION AND TO REVIEW THEIR COMPENSATION PACKAGES TO ASSIST THE COMMITTEE SALARY RANGES AND DATA FROM OTHER COMPARABLE FOOD BANKS THROUGHOU T THE FEEDING AMERICA NETWORK AS WELL AS FROM WITHIN THE REGION'S HUMAN SERVICES NON-PROFI T COMMUNITY (STUDY PROVIDED BY THE UNITED WAY AND THE BAYER CENTER FOR NON-PROFIT MANAGEME NT) ARE UTILIZED UPON EVALUATION AND DELIBERATION OF THIS INFORMATION THE COMMITTEE ADVAN CES THEIR RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE BOARD FOR APPROVAL
	FORM 990, PART VI, SECTION C, LINE 19	THE FOOD BANK'S ANNUAL WRITTEN REPORT CONTAINS A SUMMARY OF THE MOST RECENT AUDITED FINANC IAL POSITION CONFLICT OF INTEREST AND OTHER GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON R EQUEST
FINANCIAL STATEMENT AND REPORTING	FORM 990, PART XII, LINE 2C	THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED BY AN INDEPENDENT ACCOUNTING FIRM THE PROCESS INVOLVING OVERSIGHT OF THE AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEAR