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DLN: 93493226007464

Form **990**

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)

2012

OMB No 1545-0047

Open to Public

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

A F-		2012		112			Inspection
		applicable	endar year, or tax year beginning 10-01-2012 , 2012, and ending 09-30-20 C Name of organization	,13	D Emplo	ver iden	ntification number
		applicable change	PENNSYLVAŇIA ASSOCIATION OF REGIONAL FOOD BANKS		•	•	
	me ch	_	Doing Business As HUNGER-FREE PENNSYLVANIA		23-2	303821	-
	ial ret	=					
_	mınat		Number and street (or P O box if mail is not delivered to street address) Room/suite 4050 WASHINGTON ROAD NO F		E Teleph	one numl	ber
		l return	City or town, state or country, and ZIP + 4		(724)	941-1	472
_			MCMURRAY, PA 15317				
АРІ	JIICALIC	n pending	F. Nama and address of more and officers				10,881,770
			F Name and address of principal officer SHEILA CHRISTOPHER	(a) Is this affiliat		return	for
			4050 WASHINGTON ROAD NO F MCMURRAY,PA 15317				
			Hemorral, FA 13317				ded?
I Ta	x-exe	mpt status	▼ 501(c)(3)	IT "NO	, attacr	i a iist	(see instructions)
ı w	ebsit	: e: ► WW	W HUNGERFREEPA ORG	(c) Group	exemp	tion nun	nber ►
						1	
		_	Corporation	L Year of for	nation 19	984 M	State of legal domicile PA
Pa	rt I		<u> </u>				
	1		escribe the organization's mission or most significant activities IG WITH MEMBERS TO ADDRESS HUNGER ISSUES				
e X							
ĕ							
Governance	2	Check th	nis box 📭 if the organization discontinued its operations or disposed of mo	ore than 25	5% of its	net as:	sets
ဉ် ဘ			,				
26	3	Number	of voting members of the governing body (Part VI, line 1a)			3	20
<u>≅</u>	I		of independent voting members of the governing body (Part VI, line 1b) .			4	20
Activities &	I		mber of individuals employed in calendar year 2012 (Part V, line 2a)		•	5	3
ą ą	I		mber of volunteers (estimate if necessary)		•	6	22
			related business revenue from Part VIII, column (C), line 12 lated business taxable income from Form 990-T, line 34		•	7a 7b	
	-	Tree unite	nated business taxable meanic noint of misso 1, mic s 1 1 1 1 1	Prior		175	Current Year
	8	Contri	butions and grants (Part VIII, line 1h)		10,364,	.988	10,881,765
Ę			ogram service revenue (Part VIII, line 2g)		0		C
Revenue	10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)			5	5
ď	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0	C
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		10,364,	993	10,881,770
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		10,097,		10,557,474
	14		ts paid to or for members (Part IX, column (A), line 4)		, ,	0	
	15		es, other compensation, employee benefits (Part IX, column (A), lines				
Expenses		5-10)			163,816		176,62
<u>₹</u>	16a		sional fundraising fees (Part IX, column (A), line 11e)			0	C
盃	b		ndraising expenses (Part IX, column (D), line 25) • 750		454	670	470.46
	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		131, 10,392,		170,167 10,904,264
	18 19		expenses Add lines 13-17 (must equal Part IX, column (A), line 25) ue less expenses Subtract line 18 from line 12	•	-27,		-22,494
æ ø? ऋ ø.	- -	WEACH		Beginning			
Not Assets or Fund Balances				Ye			End of Year
3.4 <u>4.</u>	20		assets (Part X, line 16)		227,	_	187,618
2 E	21		iabilities (Part X, line 26)		114,		97,847
	22		sets or fund balances Subtract line 21 from line 20		112,	265	89,771
Unde my k	nowle	alties of	ature Block perjury, I declare that I have examined this return, including accompanying belief, it is true, correct, and complete Declaration of preparer (other than chowledge				
		****	**	201	4-08-12		
Sigr		Signa	ature of officer	Dat			
Her			LA CHRISTOPHER EXECUTIVE DIRECTOR				
			or print name and title			I n====	
D-:			rint/Type preparer's name Preparer's signature Date SENNARO J DIBELLO		k ∏ıf employed	PTIN P00193	767
Paid			im's name ► SCHNEIDER DOWNS & CO INC			25-140870)3
۲re	par	er L					

Use Only

Firm's address ► ONE PPG PLACE SUITE 1700

PITTSBURGH, PA 15222

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

Phone no (412) 261-3644

✓ Yes 厂No

Par	t III	Statement of Program S Check if Schedule O contains				
1	Brief	ly describe the organization's mi	ssion			
					NTIAL, ADVOCATE FOR PUBLIC	C POLICY THAT IS
FAV	ORABL	LE AND INCREASE FOOD THA	IS AVAILABLE TO	IIS PARINER ORG	ANIZATIONS	
2		ne organization undertake any si rior Form 990 or 990-EZ? .				
	If "Ye	s," describe these new services	on Schedule O			
3	servi	ne organization cease conductin ces?			nducts, any program	┌ Yes ┌ No
4	Desc exper	ribe the organization's program s	ervice accomplishme (c)(4) organizations	are required to report	ree largest program services, as i t the amount of grants and allocat	
4a	COMI COMI TO SI ADMI FARM WEER	NISTRATION FOR THE FEDERAL COMM MONWEALTH OF PENNSYLVANIA MEMBI MONWEALTH OF PENNSYLVANIA OVER JPPLEMENT THEIR DIETS VIA NUTRITIC NISTER A PRODUCE/DAIRY AND/OR WI IER OR PACKER WITHIN A SERVICE AR	DDITY SUPPLEMENTAL FOC ERSHIP CONSISTS OF 20 R B4,119 INDIVIDUALS ARE F US USDA COMMODITY FU EKEND WITHOUT HUNGE EA WITH SURPLUS PRODU G A PROJECT OR PROGRAN	REGIONAL FOOD BANKS AF PROVIDED A MONTHLY FO NDING IN ACCORDANCE R PROJECT AS DEFINED CT THAT WOULD HAVE OF IT THAT PROVIDES FOOD TO	10,557,474) (Revenue \$ YLVANIA (CSFP) TO ITS MEMBER ORGANI ND COMMUNITY ACTION AGENCIES LOCA' OD PACKAGE (SENIORS OVER THE AGE O WITH A FOUNDATION GRANT PROGRAM, PRODUCE/DAIRY DEFINITION IS A FRESH THERWISE GONE UNUSED OR SOLD AT LO TO CHILDREN OVER THE WEEKEND WHEN	TED THROUGHOUT THE DF 60) THAT IS INTENDED THE MEMBER AGREES TO H PRODUCE OR DAIRY DWER THAN COST
4b	(Cod	e) (Expenses \$		including grants of \$) (Revenue \$)
4 c	(Cod	e) (Expenses \$	ı	including grants of \$) (Revenue \$)
4d		er program services (Describe in penses \$	Schedule O) including grants of s	\$) (Revenue \$)
4e	Tota	Il program service expenses ▶	10,869,493			

Part IV Checklist of Required Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	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,			No
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		110
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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^{\bullet}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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		No
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
	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 $11e^{2}$ 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? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		No
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	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "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			
_		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, 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	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	

	Check if Schedule O contains a response to any question in this Part V	-	Yes	<u> </u>
La	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0			
	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	1		
	gaming (gambling) winnings to prize winners?	1 c		
!a	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1	v	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		ľ
)	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
a	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		ľ
ь	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			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Γ
2	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
_	Describe annual transfer beautiful and the second s	5c		<u> </u>
а	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		
b	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		ı
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	<u> </u>			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
F	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	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.			
a	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities Section FO1(a)(12) agreeminations Enter			
	Gross income from members or shareholders	1		
U	against amounts due or received from them)	-		
a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year	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		
b	Enter the amount of reserves the organization is required to maintain by the states			
	This which the organization is incensed to issue qualified fleath plans	-		
_	Enter the amount of reserves on hand	Ì		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	i	Ιı

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	<i>ye Cod</i> Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
110a b 111a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 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 annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 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 annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 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 review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 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 annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 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 review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 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 annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 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 review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 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 or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No No No

- 17 List the States with which a copy of this Form 990 is required to be filed ►PA, AR
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - Own website Another's website Vpon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►SHEILA CHRISTOPHER 4050 WASHINGTON ROAD NO F MCMURRAY, PA (724)941-1472

<u>Part VII</u> 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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h an or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Officer Institutional Trustee Individual trustee or director		Key employee	Highest compensated employee	(W- 2/1099- (*) MISC) MISC)		(W- 2/1099- MISC)	from the organization and related organizations	
(1) BUCKS COUNTY OPPORTUNITY	40		х					0	0	0
COUNCIL - MEMBER (2) BUTLER COUNTY FOOD PROGRAM	40									
MEMBER			Х					0	0	0
(3) CHESTER COUNTY FOOD BANK MEMBER	40		х					0	0	0
(4) COMMUNITY FOOD WAREHOUSE OF	40		х					0	0	0
MERCER COUNTY - MEMBER (5) CORNER CUPBOARD FOOD BANK	40		x					0	0	0
MEMBER								0		
(6) FAYETTE COUNTY COMMUNITY ACTION AGENCY - MEMBER	40		х					0	0	0
(7) FOOD FOR FAMILIES - CAMBRIA	40		х					0	0	0
MEMBER (8) GREATER BERKS FOOD BANK	40		х					0	0	0
MEMBER (9) GREATER PITTSBURGH COMMUNITY	40									
FOOD BANK - MEMBER			Х					0	0	0
(10) GREATER WASHINGTON COUNTY FOOD BANK - MEMBER	40		х					0	0	0
(11) INDIANA COUNTY COMMUNITY ACTION	40		х					0	0	0
PROGRAM - MEMBER (12) PHILABUNDANCE FOOD BANK	40		X					0	0	0
MEMBER (13) SECOND HARVEST FOOD BANK OF	40							-	0	
LEHIGH VALLEY & NE PA - MEMBER			Х					0	0	0
(14) WEINBERG NE PA REGIONAL FOOD BANK - MEMBER	40		х					0	0	0
(15) WESTMORELAND COUNTY FOOD BANK	40		х					0	0	0
MEMBER (16) YORK COUNTY FOOD BANK	40		V							0
MEMBER (17) SHAPE FOOD PROGRAM	40		X					0	0	0
(17) SHARE FOOD PROGRAM	40		х	х				0	0	0
PRESIDENT						<u> </u>				Form 990 (2012)

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

(A) Name and Ti	tle	(B) A verage hours per week (list any hours	more pers and	than on is	one bot	not box h ar	check , unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F Estim amount o compen from	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organiz and re organiz	lated
(18) SECOND HARVEST FOOD BAI	ΝK	40		x	X				0	C		0
OF NW PA - VICE PRESIDENT	OD BANK	40										
(19) CENTRAL PENNSYLVANIA FO	OD BANK	40		х	×				0	C		0
TREASURER (20) MONTGOMERY COUNTY COM	AMILINITY ACTION	40										
& DEVELOPMENT COMMISSION - :		40		х	x				0	C		0
(21) SHEILA CHRISTOPHER	SLCKLIART	40 00										
EXECUTIVE DIRECTOR		10 00			Х				72,063	C)	2,940
1b Sub-Total							P					
c Total from continuat	ion sheets to Part	VII, Section A					▶ _					
d Total (add lines 1b ar	nd 1c)						▶ _		72,063	0		2,940
Total number of indivi \$100,000 of reportab					ed al	bove	e) who	rec	eived more than			
3 Did the organization li	ist any former offic	cer. director or	trustee	e. ke	v em	יסומר	vee.o	r hic	nhest compensate	d employee	Yes	No
on line 1a? If "Yes," co							• •					No
4 For any individual list organization and relat										om the		
ındıvıdual				•	•	•	•	•		4		No
5 Did any person listed services rendered to										ndividual for 5		No
Costion D. Indonesia	lant Cantus at a											
Section B. Independ Complete this table for compensation from the	or your five highest	t compensated										
Compensation from th	-	(A) usiness address		ine	care	iiud	, year	ent		(B) on of services	(C Comper)
	Name and D	aomeso audiess							Description	on or services	compet	
2 Total number of indepe \$100,000 of compensa			not lim	ıted t	o th	iose	listed	ab	ove) who received	more than		

		Check if Schedule O contains a response	to any question i	In this Part VIII . (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
	1a	Federated campaigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership dues 1b	40,000				
10 E	c	Fundraising events 1c					
- <u>\$</u>	_	-					
<u> a</u>	d	Related organizations 1d					
ž E	е	Government grants (contributions) 1e	10,749,730				
<u>₽</u> 2.	f	All other contributions, gifts, grants, and similar amounts not included above	92,035				
를 풀	g	Noncash contributions included in lines	0 277 547		i		
붙음	9	1a-1f \$	8,277,547				
3 ಕ	h	Total. Add lines 1a-1f	* * •	10,881,765			
<u>a</u>		E	Business Code				
e l	2a						
<u>æ</u>	b						
95	С						
<u> </u>	d						
ξ	е						
Program Serwce Revenue	f	All other program service revenue					
Ě	g	Total. Add lines 2a-2f	►				
	3	Investment income (including dividends,		5			
		and other similar amounts)	-	3			
	4 5	Royalties	· · · · · -				
	,	(i) Real	(II) Personal				
	6a	Gross rents	(,				
	b	Less rental expenses					
	c	Rental income					
	d	or (loss) Net rental income or (loss)	🛌				
		(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other					
	b	than inventory Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
a l	8a	Gross income from fundraising events (not including					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18					
<u> </u>	ь	Less direct expenses b					
5	c	Net income or (loss) from fundraising eve	ents 🛌				
	9a	Gross income from gaming activities See Part IV, line 19					
	h	Less direct expenses b					
	c	Net income or (loss) from gaming activiti	es				
ı	10a	Gross sales of inventory, less returns and allowances .					
		a					
		Less cost of goods sold b	ory .				
-	С	Net income or (loss) from sales of inventor Miscellaneous Revenue	Business Code				
-	11a	ssailailesus Revellue					
	ь						
	c						
	d	All other revenue					
	e		🕨				
Ι,	12	Total revenue. See Instructions	_				
1.		. Julian revenimen occumbination (III)	· · · •	10,881,770	ol	0	İ

	IX Statement of Functional Expenses				
ectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	The state of the s	·		
	Check if Schedule O contains a response to any question in this Pa	nrt IX	(B)		· · ·
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	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	10,557,474	10,557,474		·
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	75,003	67,503	6,750	750
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	84,148	84,148		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,088	1,088		
9	Other employee benefits	3,699	3,224	475	
.0	Payroll taxes	12,685	12,291	394	
.1	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	23,965	23,869	96	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	41,942	39,313	2,629	
.2	Advertising and promotion	41,942	39,313	2,029	
.3	Office expenses	10,907	9,383	1,524	
<i>3</i> 4	Information technology	10,907	9,363	1,324	
5	Royalties				
		10.665	10.665		
6	Occupancy	10,665	10,665	2.602	
.7 .8	Payments of travel or entertainment expenses for any federal, state, or local public officials	11,888	8,196	3,692	
.9	Conferences, conventions, and meetings	5,716	2,041	3,675	
0	Interest	,	,	,	
1	Payments to affiliates				
2	Depreciation, depletion, and amortization				
:3	Insurance	2,785	2,252	533	
:4	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	CROP BLOCK PROGRAM	35,000	35,000		
b	CONSUMABLE SUPPLIES	18,983	7,418	11,565	
c	CERTIFICATION FORMS	3,163	3,163		
d	SMALL EQUIPMENT	1,783	1,212	571	
e	All other expenses	3,370	1,253	2,117	
25	Total functional expenses. Add lines 1 through 24e	10,904,264	10,869,493	34,021	750
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

			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	225,092	1	148,668
	2	Savings and temporary cash investments	·	2	<u> </u>
	3	Pledges and grants receivable, net	1,950	3	38,950
	4	Accounts receivable, net	·	4	<u> </u>
ssets	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
D D	7	Notes and loans receivable, net		7	
ť	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	ь	Less accumulated depreciation		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	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)	227,042	16	187,618
	17	Accounts payable and accrued expenses	114,777	17	97,847
	18	Grants payable	,	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
III es	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Tige!"		persons Complete Part II of Schedule L		22	
Ĭ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule		25	
	26	D	114 777	25	07.947
	26	Total liabilities. Add lines 17 through 25	114,777	26	97,847
ን)		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
)	27	Unrestricted net assets	60,034	27	67,808
<u> </u>	28	Temporarily restricted net assets	52,231	28	21,963
	29	Permanently restricted net assets	,5	29	
-		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
)	31	Paid-in or capital surplus, or land, building or equipment fund		31	
è	32	Retained earnings, endowment, accumulated income, or other funds		32	
٤	33	Total net assets or fund balances	112,265	33	89,771
-	34	Total liabilities and net assets/fund balances	227,042	34	187,618

Pai	TEXT Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10,8	881,770
2	Total expenses (must equal Part IX, column (A), line 25)	2		10,9	04,264
3	Revenue less expenses Subtract line 2 from line 1	3			-22,494
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			.12,265
5	Net unrealized gains (losses) on investments	5			.12,203
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			89,771
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		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed 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 sepa basis, consolidated basis, or both	ırate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

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PENNSYLVANIA ASSOCIATION OF REGIONAL FOOD BANKS

As Filed Data -

DLN: 93493226007464

Employer identification number

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Total

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.

Open to Public Inspection

			instructions))	Yes	No	Yes	No	Yes	No			
							_					
uppor	ted	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	organizati col (i) lis your gove	ion in ted in rning	the organ in col (i)	ızatıon of your	organiza col (i) oi	ation in rganized		mone	nount of etary port
		,	-			1						
	(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)					<u> </u>		
	•				-	••						
	., .		•	•		3	i heraniis a	escribed III (I	'' <i>)</i>	11 g(i)		INO
	Since A followir	August 17, 2 ng persons?	_)		Ves	□ No
ı	other tl	han foundatı 1 509(a)(2)	on managers and otl	ner than one	or more pul	olicly suppor	ted organız	ations descr	ibed in s	ection 5	509(a)(1) or
_	one or the box	more public that descri Type I	y supported organiz bes the type of supp b Type II c	ations descr orting organ Type II	ribed in sect ization and I - Function	ion 509(a)(1 complete line nally integrat	.) or sectiones 11e thro	n 509(a)(2) ough 11h Type III - 1	See sect Non-func	t ion 509 tionally	(a)(3). v integra	Check ated
Γ												
	•						•		ı tax) ird	om busi	nesses	
	•			•	-			• •				
Γ	_		· ·			7.7		•	-	· · · · · · · · · · · · · · · · · · ·	_	SS
	A comr	munity trust	described in section	170(b)(1)(A)(vi) (Co	-	-					
 ~	_		,		•	support fron	n a governm	nental unit or	from the	e genera	al public	:
			=	=								
	sect ion	170(b)(1)(A)(iv). (Complete P	art II)								
Γ				t of a college	or universi	ty owned or	operated by	/ a governme	ntal unit	describ	oed in	
				ed in conjun	iction with a	hospital des	scribed in s	ection 170(b)(1)(A)(iii). Ent	er the	
	-			=								
Γ	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Sched	ule E)						
Γ	A chur	ch, conventi	on of churches, or as	ssociation of	f churches d	lescribed in s	section 170	(b)(1)(A)(i)				
									mstruc	uons.		
	Pone	on for Du	blic Charity Sta	hua (All or	222122122	s must som	nloto this			tions		
) Name uppor	Rection A church A scho A hosp A medi hospita An org section A feder An org receipt its sup acquire An org receipt its sup acquire An org one or the box a By che other t section If the c check Since A followir (i) A p and (iii) A f (iii) A	A church, convention A school described A hospital or a cool A medical research hospital's name, cool An organization op section 170(b)(1)(A federal, state, or a cool A norganization that described in section A community trust An organization that receipts from activits support from gracquired by the organization section 509(a)(2) If the organization check this box Since August 17, 2 following persons? (i) A person who diand (iii) below, the (iii) A family memb (iii) A 35% control Provide the following personted Name of imported (ii) EIN	A church, convention of churches, or as A school described in section 170(b)(1) A hospital or a cooperative hospital se A medical research organization operated hospital's name, city, and state An organization operated for the benefit section 170(b)(1)(A)(iv). (Complete P A federal, state, or local government or An organization that normally receives described in section 170(b)(1)(A)(vi). A community trust described in section An organization that normally receives receipts from activities related to its exits support from gross investment inco acquired by the organization after June An organization organized and operated one or more publicly supported organization box that describes the type of support box that describes the type of supported organization managers and other than foundation received a written decheck this box Since August 17, 2006, has the organical following persons? (i) A person who directly or indirectly of and (iii) below, the governing body of the (ii) A family member of a person descriping organization (described on lines 1-9 above)	rganization is not a private foundation because it is (For A church, convention of churches, or association of A school described in section 170(b)(1)(A)(ii). (Al) A hospital or a cooperative hospital service organization operated in conjunt hospital's name, city, and state A medical research organization operated in conjunt hospital's name, city, and state An organization operated for the benefit of a college section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or government described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives a substantial described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more the receipts from activities related to its exempt function its support from gross investment income and unreacquired by the organization after June 30, 1975 Section An organization organized and operated exclusively one or more publicly supported organizations described one or more publicly supported organizations described box that describes the type of supporting organ a Type I b Type II c Type II By checking this box, I certify that the organization other than foundation managers and other than one section 509(a)(2) If the organization received a written determination check this box Since August 17, 2006, has the organization acception organization (iii) A family member of a person described in (i) ab (iii) A 35% controlled entity of a person described Provide the following information about the supported organization (described on lines 1-9 above or IRC section docume docume or IRC section docume or IRC section docume	rganization is not a private foundation because it is (For lines 1 throi A church, convention of churches, or association of churches of a school described in section 170(b)(1)(A)(ii). (Attach Sched) A hospital or a cooperative hospital service organization described and hospital's name, city, and state An organization operated for the benefit of a college or universified section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) An organization that normally receives a substantial part of its described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) An organization that normally receives (1) more than 331/3% or receipts from activities related to its exempt functions—subject its support from gross investment income and unrelated busing acquired by the organization after June 30, 1975 See section An organization organized and operated exclusively for the beauting on the composition organized and operated exclusively to test for an organization organized and operated exclusively for the beauting on the composition organized and operated exclusively for the beauting of the box that describes the type of supporting organization and a Type I b Type II c Type III - Function By checking this box, I certify that the organization is not contother than foundation managers and other than one or more pull section 509(a)(2) If the organization received a written determination from the IR check this box Since August 17, 2006, has the organization accepted any gift following persons? (i) A person who directly or indirectly controls, either alone or and (iii) below, the governing body of the supported organization (iii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) organization in col (ii) listed in your governing document?	rganization is not a private foundation because it is (For lines 1 through 11, chec A church, convention of churches, or association of churches described in sexion 4 school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 4 medical research organization operated in conjunction with a hospital deshospital's name, city, and state An organization operated for the benefit of a college or university owned or section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) A n organization that normally receives 1 (1) more than 331/3% of its support receipts from activities related to its exempt functions—subject to certain its support from gross investment income and unrelated business taxable in acquired by the organization after June 30, 1975. See section 509(a)(2). (C) An organization organized and operated exclusively to test for public safety. An organization organized and operated exclusively for the benefit of, to per one or more publicly supported organizations described in section 509(a)(2). (C) An organization organized and operated exclusively for the benefit of, to per one or more publicly supported organization and complete line a Type II b Type III c Type III - Functionally integrat. By checking this box, I certify that the organization is not controlled directly other than foundation managers and other than one or more publicly supported other than foundation managers and other than one or more publicly supported other than foundation managers and other than one or more publicly supported other than foundation managers and other than one or more publicly supported other than foundation managers and other than one or more publicly supported other than foundation	rganization is not a private foundation because it is (For lines 1 through 11, check only one A church, convention of churches, or association of churches described in section 170 (b) (1) (A) (ii). (Attach Schedule E) A school described in section 170(b) (1) (A) (ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b) (1) A medical research organization operated in conjunction with a hospital described in section 170(b) (1) (A) (iiv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b) (1) (A) (iiv). (Complete Part II) A roganization that normally receives a substantial part of its support from a government or governmental unit described in section 170(b) (1) (A) (vi). (Complete Part II) A community trust described in section 170(b) (1) (A) (vi). (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from conting receipts from activities related to its exempt functions—subject to certain exceptions, its support from gross investment income and unrelated business taxable income (les acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part II) An organization organized and operated exclusively to test for public safety. See section and organization organized and operated exclusively for the benefit of, to perform the function or more publicly supported organizations described in section 509(a)(2). (Complete Part II) By checking this box, I certify that the organization is not controlled directly or indirectly or indirectly or indirectly or indirectly or indirectly or organization from the IRS that it is a Type I, Ty check this box. Since August 17, 2006, has the organization accepted any gift or contribution from an following persons? (ii) A person who directly or indirectly controls, either alone or together with persons d and (iii) below, the governing body of the supported organization? (iii) A family member of a person de	Reason for Public Charity Status (All organizations must complete this part.) See rganization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i) A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmen section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, me receipts from activities related to its exempt functions—subject to certain exceptions, and (2) nor no its support from gross investment income and unrelated business taxable income (less section 51 acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(2) the box that describes the type of supporting organization and complete lines 11e through 11h A Type I b Type III c Type III - Functionally integrated d Type III - By checking this box, I certify that the organization is not controlled directly or indirectly by one or other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) if the organization received a written determination from the IRS that it is a Ty	rganization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(ii). (A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iv.) (Complete Part II.) A nederal, state, or local government or governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A norganization that normally receives a substantial part of its support from a governmental unit or from the described in section 170(b)(1)(A)(iv). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives (1) more than 31:7% of its support from contributions, membership receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than its support from gross investment income and unrelated business taxable income (less section 511 tax) from acquired by the organization after June 30,1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively to test for public safety. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(2). (See sectio	Reason for Public Charity Status (All organizations must complete this part.) See instructions. rganization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Enthospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit describes section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A norganization that normally receives a substantial part of its support from a governmental unit or from the general described in section 170(b)(1)(A)(vi). (Complete Part II.) A norganization that normally receives (1) more than 331/3% of its support from contributions, membership fees, a receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% its support from gross investment income and unrelated business taxable income (less section 511 tax) from busing acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the one or more publicly supported organizations described in section 509(a)(2). (See section 509(a)(2). See section 509(a)(2). See section 509(a)(2). See section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, or Type III is upporting organization and complete lines 11 through 11 in the 11 supporting check this box. Since August 17, 2006, has the organization accepted any gift or contrib	Reason for Public Charity Status (All organizations must complete this part.) See instructions. rganization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(iii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(iv). A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part III) An organization that normally receives (1) more than 331/9% of its support from contributions, membership fees, and gros receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/9% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purpor one or more publicly supported organization and complete lines 11e through 11h a Type I b Type II c Type III complete in section 509(a)(2). See section 509(a)(3). the box that describes the type of supporting org

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 not 4,156,930 8,598,514 10,629,053 10,364,988 10,881,765 44,631,250 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 4,156,930 8,598,514 10,629,053 10,364,988 10,881,765 44,631,250 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 44,631,250 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total beginning in) 🟲 10,881,765 4,156,930 10,364,988 Amounts from line 4 8,598,514 10,629,053 44,631,250 Gross income from interest, dividends, payments received on 288 765 1,066 securities loans, rents, royalties 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 capital assets (Explain in Part IV) 11 Total support (Add lines 7 44,632,316 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)) 14 100 000 % Public support percentage for 2011 Schedule A, Part II, line 14 15 100 000 % 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 **▶**▼ 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 supported organization

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)			Liberal Counties and	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					<u> </u>
	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: 93493226007464

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Inspection

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** PENNSYLVANIA ASSOCIATION OF REGIONAL FOOD BANKS 23-2303821 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 3 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	·►□	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN
		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 an		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	3,105		
b	Total lobbying expenditures to influence a legisla	1,545		
c	Total lobbying expenditures (add lines 1a and 1b	o)	4,650	
d	Other exempt purpose expenditures	10,899,614		
e	Total exempt purpose expenditures (add lines 1	c and 1d)	10,904,264	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	695,213	
	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		
	Grassroots nontaxable amount (enter 25% of lin	e 1f)	173,803	
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 4720	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 Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount	575,589	683,920	669,648	695,213	2,624,370
b	Lobbying ceiling amount (150% of line 2a, column(e))					3,936,555
c	Total lobbying expenditures	1,731	1,100	3,100	4,650	10,581
_d	Grassroots nontaxable amount	143,897	170,980	167,412	173,803	656,092
e 	Grassroots ceiling amount (150% of line 2d, column (e))					984,138
f	Grassroots lobbying expenditures		1,750		3,105	6,925

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
	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	1)		(b)	
activ		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 1i					
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?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493226007464

OMB No 1545-0047

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Department of the Treasury

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

Internal Revenue Service ► Attach to Form 990. ► See separate instructions.				Inspection				
	me of the organ	i ization IATION OF REGIONAL FOOD BANKS		Emp	loyer identificat	ion numbe	r	
1 1.	MINOTEVANDA ADDOCI	INTON OF REGIONAL FOOD BANKS		23-2	2303821			
Pa		nizations Maintaining Donor Adv		unds	or Accounts.	Complet	e if the	
	organı	zation answered "Yes" to Form 990,	, Part IV, line 6. (a) Donor advised funds		(b) Funds and of	thoracco	ıntc	
1	Total number a	at end of year	(a) Donor advised funds		(b) I dilas alia ol	.ner accou	iiics	
2		tributions to (during year)						
3		nts from (during year)						
4		ue at end of year						
5	Did the organi	ا zation inform all donors and donor adviso organization's property, subject to the or	_	ıor advı	sed	┌ Yes	┌ No	
6	used only for d	zation inform all grantees, donors, and do charitable purposes and not for the benefi ermissible private benefit?				┌ Yes	┌ No	
Pa	rt III Conse	ervation Easements. Complete if	the organization answered "Yes" t	o Forn	າ 990, Part IV,	line 7.		
2	Preservati Protection Preservati Complete line	conservation easements held by the orga on of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a the last day of the tax year	or education) Preservation of an Preservation of a G	certifie	d historic structi	ure		
					Held at the E	nd of the	Year	
а	Total number	of conservation easements		2a				
b	Total acreage	restricted by conservation easements		2b				
C	Number of con	servation easements on a certified histo	ric structure included in (a)	2c				
d		iservation easements included in (c) acq ure listed in the National Register	uired after 8/17/06, and not on a	2d				
3	Number of con	servation easements modified, transferr	ed, released, extinguished, or terminate	ed by th	e organization d	urıng		
	the tax year 🕨	·						
4	Number of sta	tes where property subject to conservati	on easement is located ►					
5		nization have a written policy regarding t f the conservation easements it holds?	he periodic monitoring, inspection, hand	dlıng of	violations, and	┌ Yes	┌ No	
6	Staff and volur	nteer hours devoted to monitoring, inspec	cting, and enforcing conservation easer	ments c	uring the year			
7	A mount of exp	penses incurred in monitoring, inspecting	, and enforcing conservation easement:	s during	; the year			
8		nservation easement reported on line 2(d 70(h)(4)(B)(ii)?	l) above satisfy the requirements of sec	tion 17	'0(h)(4)(B)(ı)	┌ Yes	┌ No	
9	balance sheet	lescribe how the organization reports con , and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financial					
Par		nizations Maintaining Collections lete if the organization answered "Yo		or Otl	ner Similar A	ssets.		
1a	works of art, h	ition elected, as permitted under SFAS 1 istorical treasures, or other similar asset de, in Part XIII, the text of the footnote to	ts held for public exhibition, education,	or rese	arch in furtherar			
b	works of art, h	ition elected, as permitted under SFAS 1 istorical treasures, or other similar asset de the following amounts relating to these	ts held for public exhibition, education,				ıc	
	(i) Revenues	included in Form 990, Part VIII, line 1			► \$			
	(ii) Assets inc	luded in Form 990, Part X			- \$			
2	If the organiza	ition received or held works of art, histori			cial gain, provide	e the		

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	111 Organizations Maintaining Co	<u>llections of Art</u>	<u>:, His</u>	stori	<u>cal Tı</u>	<u>easur</u>	<u>es, or O</u>	<u>ther</u>	Similar As	ssets (c	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other recor	ds, cl	heck	any of	the follo	wing that a	ire a s	significant us	e of its	
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams			
b	Scholarly research		e	Г	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	y furthe	er the or	ganızatıon	's exe	empt purpose	ın	
5	During the year, did the organization solicit o	or receive donations	s of ar	rt, his	torical	treasure	es or othei	rsımı	lar		
	assets to be sold to raise funds rather than t		•							│ Yes	┌ No
Par	Part IV, line 9, or reported an an						answere	d "Ye	es" to Form	990, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					itions or	other ass	ets n	ot	┌ Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing	table		_				
								_	Aı	mount	
с	Beginning balance							1c			
d	Additions during the year						<u> </u>	1d			
е	Distributions during the year						F	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?	•						☐ Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has	been pro	vided in P	art X	III		Γ
Pa	tt V Endowment Funds. Complete										
4_	Degraping of week belongs	(a)Current year	(Ь)Prior	year	b (c) Two	o years back	(d)⊤	hree years back	(e) Four y	ears back
1a 	Beginning of year balance							<u> </u>			
b	Contributions							 		 	
С	Net investment earnings, gains, and losses							<u> </u>			
d	Grants or scholarships										
е	Other expenditures for facilities										
f	and programs										
g g	End of year balance							 			
_	Provide the estimated percentage of the curr	cont year and halan	co (lur	20.10	colum	n (a)) ho	old ac	<u> </u>			
2	Board designated or quasi-endowment	ent year end baran	ce (iii	ic ry	, coluii	iii (a)) iie	iu as				
a	•										
b	Permanent endowment ►										
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	atıon	that	are hel	d and ad	ministered	l for t	he	Yes	No
	(i) unrelated organizations								3a	(i) res	140
	(ii) related organizations									(ii)	
b	If "Yes" to 3a(II), are the related organization								3	ВЬ	
4	Describe in Part XIII the intended uses of th	ie organization's en	dowm	nent f	unds						
Par	t VI Land, Buildings, and Equipme	nt. See Form 99	0, Pa				14-26	1	(-) A		Dan Incombra
	Description of property				a) Cost (asis (inve	estment)	(b) Cost or basis (oth		(c) Accumula depreciatioi		Book value
1a	Land										
b	Buildings		•								
С	Leasehold improvements										
d	Equipment										
	Other										
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part .	X, colι	ımn (B), line	10(c).)					0

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
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Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	ne 15. otion	(b) Book value
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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	
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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.	
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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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 With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	10,881,770
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	o
3	Subtract line 2e from line 1	3	10,881,770
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)	1	
c	Add lines 4a and 4b	4c	o
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	10,881,770
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial statements	1	10,904,264
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		
c	Other losses		
d	Other (Describe in Part XIII).............. 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	10,904,264
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	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	10,904,264

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		PENNSYLVANIA ASSOCIATION OF REGIONAL FOOD BANK (PARF) FOLLOWS THE INCOME TAXES TOPIC OF THE CODIFICATION THAT REQUIRES A RECOGNITION THRESHOLD AND MEASUREMENT PRINCIPLES FOR FINANCIAL STATEMENT DISCLOSURES OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN PARF HAS ASSESSED THE TAX POSITIONS IT HAS TAKEN OR EXPECTS TO TAKE IN ITS TAX RETURNS AND, AS A RESULT, NO LIABILITY FOR UNCERTAIN TAX POSITIONS HAS BEEN RECORDED, FURTHER, PARF HAS NO UNRECOGNIZED TAX BENEFITS PARF IS NO LONGER SUBJECT TO EXAMINATION OF ITS TAX RETURNS FOR YEARS BEFORE 2010

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

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

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

OMB No 1545-0047

DLN: 93493226007464

Open to Public

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Name of the organization						Employer identificati	on number	
PENNSYLVANIA ASSOCIATION O	F REGIONAL FOOD	BANKS				23-2303821		
Part I General Information	on on Grants an	d Assistance				•		
 Does the organization maintain the selection criteria used to a Describe in Part IV the organization 	ward the grants or as	ssistance?					ר Yes	
Part III Grants and Other A				United States. Con art II can be duplicate			es" to	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
See Additional Data Table	1	1	ı			1	1	
	:01(.)(2)						<u> </u>	
Enter total number of section 5Enter total number of other org							0	
				0 · N 500550				

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
	Part III can be duplicated if additional space is needed.

(a)Type of grant or as	sıstance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance				
		·		•						

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S		SCHEDULE I, PART I, LINE 2 PARF AND SUB DISTRIBUTING ORGANIZATIONS MUST MAINTAIN ACCURATE AND COMPLETE RECORDS RELATING TO THE RECEIPT, DISPOSAL, FUNDS, ELIGIBILITY DETERMINATIONS, FAIR HEARINGS, AND OTHER PROGRAM ACTIVITIES ALL RECORDS MUST BE RETAINED FOR A PERIOD OF THREE YEARS FROM THE END OF THE FISCAL YEAR TO WHICH THEY PERTAIN, OR, IF THEY ARE RELATED TO UNRESOLVED CLAIMS ACTIONS, AUDITS, OR INVESTIGATIONS, UNTIL THOSE ACTIVITIES HAVE BEEN RESOLVED PARF HAS ESTABLISHED A MANAGEMENT REVIEW SYSTEM TO ENSURE THE SUB DISTRIBUTING AGENCIES AND OTHER AGENCIES CONDUCTING PROGRAM ACTIVITIES MEET PROGRAM REQUIREMENTS AND OBJECTIVES AS PART OF THE SYSTEM, PARF MUST PERFORM AN ONSITE REVIEW OF ALL CSFP AGENCIES, AND OF ALL STORAGE FACILITIES UTILIZED BY THE AGENCY AT LEAST ONCE EVERY TWO YEARS AS PART OF THE ONSITE REVIEW, PARF MUST EVALUATE ALL ASPECTS OF PROGRAM ADMINISTRATION, INCLUDING CERTIFICATION PROCEDURES, NUTRITION EDUCATION, CIVIL RIGHTS COMPLIANCE, FOOD STORAGE PRACTICES, INVENTORY
		CONTROLS, AND FINANCIAL MANAGEMENT SYSTEMS IN ADDITION TO CONDUCTING ON-SITE REVIEWS, PARF MUST EVALUATE PROGRAM ADMINISTRATION ON AN ONGOING BASIS BY REVIEWING FINANCIAL REPORTS, AUDIT REPORTS, FOOD ORDERS, INVENTORY REPORTS, AND OTHER RELEVANT INFORMATION

Software ID:

Software Version:

EIN: 23-2303821

Name: PENNSYLVANIA ASSOCIATION OF REGIONAL FOOD BANKS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUTLER COUNTY COMMUNITY ACTION DEVELOPMENT121 SUNNYVIEW CIRCLE SUITE 121 BUTLER,PA 16001	25-6001020	GO V ERNMENT A GENCY	23,473	,	ACTUAL USDA COST		AID IN HUNGER RELIEF
CENTRAL PENNSYLVANIA FOOD BANK3908 COREY RD HARRISBURG,PA 17109	23-2202250	501(C)(3)	317,400		ACTUAL USDA COST		AID IN HUNGER RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							AID IN HUNGER RELIEF
CHESTER COUNTY FOOD BANK1208 HORSESHOE PIKE DOWNINGTOWN.PA 19335	27-0887311	501(C)(3)	19,156	82,666	ACTUAL USDA COST		AID IN HUNGER RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY FOOD WAREHOUSE OF MERCER COUNTY109 S SHARPSVILLE AVE SHARON,PA 16146	25-1446242	501(C)(3)	24,586	97,588	ACTUAL USDA COST		AID IN HUNGER RELIEF
FAYETTE COUNTY COMMUNITY ACTION AGENCY140 NORTH BEESON AVENUE UNIONTOWN,PA 15401	25-1180898	501(C)(3)	60,795	232,592	ACTUAL USDA COST		AID IN HUNGER RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD FOR FAMILIES - CAMBRIA945 FRANKLIN STREET JOHNSTOWN,PA 15905	25-1423020	501(C)(3)	35,590	138,797	ACTUAL USDA COST		AID IN HUNGER RELIEF
GREATER BERKS FOOD BANK1011 TUCKERTON COURT READING, PA 19605	22-2456238	501(C)(3)	86,185	318,780	ACTUAL USDA COST		AID IN HUNGER RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER PITTSBURGH COMMUNITY FOOD BANK ONE NORTH LINDEN STREET DUQUESNE,PA 15110	25-1420599	501(C)(3)	434,462	, , ,	ACTUAL USDA COST		AID IN HUNGER RELIEF
GREATER WASHINGTON COUNTY FOOD BANK1020 ROUTE 519 EIGHTY FOUR, PA 15330	23-2939247	501(C)(3)	33,949		ACTUAL USDA COST		AID IN HUNGER RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INDIANA COUNTY COMMUNITY ACTION PROGRAM1849 SOUT 6TH STREET INDIANA,PA 15701	25-6069770	501(C)(3)	28,438	111,769	ACTUAL USDA COST		AID IN HUNGER RELIEF
MONTGOMERY COUNTY COMMUNITY ACTION DEVELOPMENT COMMISSION113 EAST MAIN STREET NORRISTOWN,PA 19401	23-1689892	501(C)(3)	54,213	210,086	ACTUAL USDA COST		AID IN HUNGER RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PHILABUNDANCE FOOD BANK302 WEST BERKS STREET PHILADELPHIA,PA 19122	23-2290505	501(C)(3)	605,016	, ,	ACTUAL USDA COST		AID IN HUNGER RELIEF
SECOND HARVEST FOOD BANK OF LEHIGH VALLEY & NE PA2045 HARVEST WAY ALLENTOWN,PA 18104	23-1669589	501(C)(3)	124,110	,	ACTUAL USDA COST		AID IN HUNGER RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SECOND HARVEST FOOD BANK OF NW PA1507 GRIMM DRIVE ERIE,PA 16501	25-1405798	501(C)(3)	165,183	590,316	ACTUAL USDA COST		AID IN HUNGER RELIEF
WEINBERG NE PA REGIONAL FOOD BANK165 AMBER LANE WILKESBARRE,PA 18703	23-1653093	501(C)(3)	120,371	501,578	ACTUAL USDA COST		AID IN HUNGER RELIEF

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTMORELAND COUNTY FOOD BANK100 DEVONSHIRE DRIVE DELMONT,PA 15626	23-1422682	501(C)(3)	99,682	383,766	ACTUAL USDA COST		AID IN HUNGER RELIEF
YORK COUNTY FOOD BANK 254 WEST PRINCESS STREET YORK,PA 17404	23-2452484	501(C)(3)	47,315	143,595	ACTUAL USDA COST		AID IN HUNGER RELIEF

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OMB No 1545-0047

Open to Public 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 PENNSYLVANIA ASSOCIATION OF REGIONAL FOOD BANKS

Employer identification number

P۵	rt I Types of Property				23-2303821			
r a	Types of Property	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	etermı	_	ts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
1	Books and publications							
5	Clothing and household goods							
5	Cars and other vehicles							
7	Boats and planes							
3	Intellectual property							
•	Securities—Publicly traded .							
)	Securities—Closely held stock $. $							
L	Securities—Partnership, LLC, or trust interests							
2	Securities—Miscellaneous							
3	Qualified conservation contribution—Historic structures							
ŀ	Qualified conservation contribution—Other							
;	Real estate—Residential .							
,	Real estate—Commercial							
,	Real estate—O ther							
3	Collectibles							
•	Food inventory	Х	452,862	8,277,547	ACTUAL USDA CO	ST		
)	Drugs and medical supplies .							
L	Taxıdermy							
2	Historical artifacts							
3	Scientific specimens							
1	Archeological artifacts							
	O ther ▶ ()							
5	O ther ►()							
	O ther ►()							
	O ther ► ()				<u> </u>			
	Number of Forms 8283 received for which the organization comple				29			0
							Yes	No
0a	During the year, did the organiza							
	must hold for at least three year			on, and which is not required	d to be used			
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangement	ent in Part I	Ι					
1	Does the organization have a gif	t acceptano	ce policy that requires the	review of any non-standard	contributions?	31		Νo
2a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell r	noncash • • •	32a		No
b	If "Yes," describe in Part II							
3	If the organization did not report describe in Part II	an amount	ın column (c) for a type of	property for which column (a	a) is checked,			

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.

		The complete time part for any additional information
Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTIONS	. , , ,	SCHEDULE M, PART I, COLUMN (B) THE ORGANIZATION'S STANDARD RECORDKEEPING PRACTICE IS TO CALCULATE DONATED FOOD ON A MEASUREMENT OF WEIGHT DURING THE FISCAL YEAR, THE ORGANIZATION RECEIVED APPROXIMATELY 16,377,120 POUNDS OF VARIOUS FOOD ITEMS

Schedule M (Form 990) (2012)

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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
2012
Open to Public

Inspection

Name of the organization PENNSYLVANIA ASSOCIATION OF REGIONAL FOOD BANKS	Employer ident if i	cation number
	23-2303821	

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	A MEMBER OF THE ORGANIZATION IS DEFINED AS A NON-PROFIT CHARITABLE ORGANIZATION EXEMPT UNDER IRC SECTION 501(C)(3) OR COUNTY LEAD AGENCY THAT ADMINISTERS AT LEAST ONE FOOD PROGRAM AND IS ENGAGED IN SOLICITING FOOD FROM THE FOOD INDUSTRY, TRANSPORTING, RECEIVING, OR SORTING AND DISTRIBUTING THE FOOD TO NON-PROFIT CHARITABLE AGENCIES THAT SUPPLY FOOD TO THE NEEDY, ILL, AND/OR INFANTS THAT HAVE BEEN ACCEPTED ACCORDING TO PREVAILING GUIDELINES MEMBERS ARE ALSO REFERRED TO AS PARTNER ORGANIZATIONS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	BOARD MEMBERSHIP IS RESERVED TO THOSE PARTNER ORGANIZATIONS REFERRED TO AS MEMBER ORGANIZATIONS EACH MEMBER ORGANIZATION DESIGNATES A VOTING REPRESENTATIVE TO SERVE ON THE BOARD OF DIRECTORS IN THE ABSENCE OF THE VOTING REPRESENTATIVE, HE OR SHE SHALL BE EMPOWERED TO APPOINT A PROXY EACH MEMBER ORGANIZATION IS ENTITLED TO ONE VOTING REPRESENTATIVE AT BOARD MEETINGS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7B	AS DISCLOSED, BOARD MEMBERS ARE DESIGNATED REPRESENTATIVES OF A PARTNER ORGANIZATION ALSO REFERRED TO AS A MEMBER ORGANIZATION EACH MEMBER ORGANIZATION IS ENTITLED TO DESIGNATE ONE VOTING REPRESENTATIVE BY VIRTUE OF THEIR BOARD POSITIONS, MEMBER ORGANIZATIONS IN THE AGGREGATE COMPRISE THE GOVERNING BODY AS A RESULT, THE MEMBER ORGANIZATIONS GOVERN THE ORGANIZATION AND ACCORDINGLY APPROVE ALL DECISIONS THE FOLLOWING VOTING REPRESENTATIVES HAVE BEEN ELECTED TO SERVE AS OFFICERS OF THE ORGANIZATION STEVEANNA WYNN, PRESDENT, KAREN SEGGI, VICE PRESIDENT, JOSEPH ARTHUR, TREASURER, PATRICK DRUHAN, SECRETARY

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS FORWARDED TO THE TREASURER PRIOR TO FILING TO REVIEW, COMMENT AND PROVIDE RECOMMENDATIONS A FINAL VERSION OF FORM 990 IS PROVIDED TO ALL MEMBERS OF THE BOARD PRIOR TO FILING

Identifier Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE BY LAWS OF THE ORGANIZATION CONTAIN AN ARTICLE THAT ADDRESS CONFLICTS OF INTEREST THE DIRECTORS, OFFICERS AND STAFF OF THE ORGANIZATION HAVE A DUTY TO CONDUCT AFFAIRS OF THE ORGANIZATION BY THE CALLY WITH HONESTY AND INTEGRITY DIRECTORS, OFFICERS AND STAFF OF THE ORGANIZATION ARE REQUIRED TO DISCLOSE TO THE BOARD ANY SITUATION WITH A CONFLICT EXISTS, THE DIRECTOR OR OFFICER INVOLVED SHALL NOT VOTE ON OR PARTICIPATE IN THE DISCUSSIONS OR DELIBERATIONS WITH RESPECT TO THE MATTER MEETING MINUTES REFLECT THE DISCLOSSIONS OR DELIBERATIONS WITH RESPECT TO THE MATTER MEETING MINUTES REFLECT THE DISCLOSSION REGARDING THE ISSUE IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING THE ROPOSED TRANSACTION OR ARRANGEMENT AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE'SHE SHALL LEAVE THE GOVERNING BOARD DELEGATED CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON THE REMAINING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON THE REMAINING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE HEAD OF COMMITTEE HEAD OR FOR SUMH HEAD ON THE MEMBER AND OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE THE ORGANIZATION OBTAIN

Identifier	Return Reference	Explanation
		AN ANNUAL EVALUATION IS COMPLETED BY THE EXECUTIVE COMMITTEE COMPRISED OF THE BOARD PRESIDENT, VICE PRESIDENT, TREASURER, SECRETARY AND BOARD MEMBER AT LARGE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION WILL PROVIDE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS TO REQUESTING PARTIES UPON REQUEST

ldentifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C, FINANCIAL STATEMENTS AND REPORTING	THE TREASURER REVIEWS THE INTERNAL GENERATED FINANCIAL STATEMENTS MONTHLY AN INDEPENDENT ACCOUNTING FIRM COMPILES QUARTERLY FINANCIAL STATEMENTS FOR THE EXECUTIVE COMMITTEE TO REVIEW AND PRESENT AT THE NEXT QUARTERLY MEETING OF THE BOARD OF DIRECTORS THE TREASURER WORKS WITH THE INDEPENDENT AUDITING FIRM THROUGHOUT THE AUDIT PROCESS THE FINAL DRAFT AUDIT IS REVIEWED BY THE EXECUTIVE COMMITTEE AND APPROVED THE TREASURER PRESENTS THE EXECUTIVE COMMITTEE APPROVED AUDIT TO THE ENTIRE BOARD AT THE NEXT QUARTERLY MEETING FOR FINAL APPROVAL 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