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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning

and ending

B Check if applicable: ☒ Address change ☐ Name change ☐ Initial return ☐ Terminated ☒ Amended return ☐ Application pending	C Name of organization FOOD RESEARCH AND ACTION CENTER		D Employer identification number 23-7200739
	Doing Business As		E Telephone number 202-986-2200
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1200 18TH STREET, NW 400	G Gross receipts \$ 5,039,026.	
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20036		H(a) Is this a group return for subordinates? ☐ Yes ☒ No H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶
F Name and address of principal officer JAMES D. WEILL SAME AS C ABOVE			
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527			
J Website: WWW.FRAC.ORG			
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation: 1972 M State of legal domicile: NY	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities SEE PART III, LINE 1.		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	16	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	15	
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	48	
	6 Total number of volunteers (estimate if necessary)	35	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	0.	
7b Net unrelated business taxable income from Form 990-T, line 34	0.		
Revenue	8 Contributions and grants (Part VIII, line 1h)	7,416,333.	4,685,871.
	9 Program service revenue (Part VIII, line 2g)	255,330.	252,251.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,043.	1,913.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	24,115.	15,763.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,698,821.	4,955,798.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,567,656.	2,600,495.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,373,777.	3,715,253.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 428,362.		
Expenses	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,424,131.	1,641,380.
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	7,365,564.	7,957,128.
	19 Revenue less expenses Subtract line 18 from line 12	333,257.	-3,001,330.
	20 Total assets (Part X, line 16)	7,962,377.	4,734,695.
Net Assets or Fund Balances	21 Total liabilities (Part X, line 26)	820,537.	594,185.
	22 Net assets or fund balances. Subtract line 21 from line 20	7,141,840.	4,140,510.

Part II Signature Block

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

Sign Here	Signature of officer <i>James D. Weill</i>	Date 3/3/15
	Type or print name and title JAMES D. WEILL, PRESIDENT	
Paid	Print/Type preparer's name DAVID F. GRALING CPA	Preparer's signature <i>David F. Graling</i> CPA
Preparer Use Only	Firm's name GELMAN, ROSENBERG & FREEDMAN	Firm's EIN 52-1392008
	Firm's address 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930	Phone no. (301) 951-9090

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

16
617,

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

☒ X

1 Briefly describe the organization's mission

FRAC WORKS TO IMPROVE PUBLIC POLICIES AND PUBLIC-PRIVATE PARTNERSHIPS TO ERADICATE HUNGER AND UNDERNUTRITION IN THE UNITED STATES. FRAC CONDUCTS RESEARCH AND STUDIES IN THE FIELD OF HUNGER, NUTRITION AND ANTI-HUNGER AND ANTIPOVERTY POLICY; PROVIDES (SEE SCHEDULE O)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☒ Yes ☐ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 2,600,495. including grants of \$ 2,600,495.) (Revenue \$)
REGRANTING: FRAC PROVIDES GRANTS TO VARIOUS STATE AND LOCAL 501(C)(3) GROUPS AND PUBLIC AGENCIES AND ITS RELATED ORGANIZATION TO ENSURE THAT FOOD STAMPS AND CHILD NUTRITION PROGRAMS BETTER SERVE LOW-INCOME PEOPLE.

4b (Code) (Expenses \$ 1,761,691. including grants of \$) (Revenue \$ 127,994.)
CHILD NUTRITION: FRAC SEEKS TO REDUCE CHILDHOOD HUNGER, IMPROVE NUTRITION, IMPROVE FOOD SECURITY AND ECONOMIC SECURITY, IMPROVE HEALTH AND SCHOOL ACHIEVEMENT, AND USE CHILD NUTRITION PROGRAMS TO SUPPORT SERVICES FOR SCHOOL-AGED CHILDREN IN COMMUNITIES ACROSS THE COUNTRY.

4c (Code) (Expenses \$ 1,460,687. including grants of \$) (Revenue \$ 106,125.)
FOOD STAMP PROGRAM: FRAC WORKS WITH NATIONAL, STATE AND LOCAL GROUPS TO PROTECT AND IMPROVE SNAP/FOOD STAMP BENEFITS FOR LOW-INCOME PEOPLE. THROUGH RESEARCH, PUBLIC POLICY ADVOCACY, TRAINING, TECHNICAL ASSISTANCE, AND DISSEMINATION OF INFORMATION, ANALYSIS, AND DESCRIPTIONS OF MODEL APPROACHES, FRAC ASSISTS IN GETTING SNAP/FOOD STAMP BENEFITS TO ELIGIBLE, NEEDY FAMILIES WITH CHILDREN, IMMIGRANTS, SENIORS, UNEMPLOYED PERSONS AND OTHER LOW-INCOME PEOPLE.

4d Other program services (Describe in Schedule O)

(Expenses \$ 1,508,081. including grants of \$) (Revenue \$ 18,132.)

4e Total program service expenses 7,330,954.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
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? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Form 990 (2013)

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2013)

Part V**Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822?		X
d	If "Yes," indicate the number of Forms 8822 filed during the year.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	N/A	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders.	N/A	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	N/A	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	N/A	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Form 990 (2013)

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

Check if Schedule O contains a response or note to any line in this Part VI

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

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	16	
b Enter the number of voting members included in line 1a, above, who are independent	15	
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	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders?	6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
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	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NY, MD**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ 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 **RICHARD RYANS - 202-986-2200**
1200 18TH STREET, NW, SUITE 400, WASHINGTON, DC 20036

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES D. WEILL PRESIDENT	40.00 0.40	X		X				179,633.	0.	28,595.
(2) DAN GLICKMAN CHAIR	2.00	X		X				0.	0.	0.
(3) RONALD F. POLLACK TREASURER	1.00	X		X				0.	0.	0.
(4) GEORGE L. BLACKBURN BOARD MEMBER	0.50	X						0.	0.	0.
(5) DAVE CARLIN BOARD MEMBER	0.50	X						0.	0.	0.
(6) CAROLYN CAVICCHIO BOARD MEMBER	0.50	X						0.	0.	0.
(7) DAGMAR FARR BOARD MEMBER	0.50	X						0.	0.	0.
(8) ALISON DERSOFI GOLDBERG BOARD MEMBER	0.50	X						0.	0.	0.
(9) LOUISE HILSEN BOARD MEMBER	0.50	X						0.	0.	0.
(10) MARSHALL L. MATZ BOARD MEMBER	0.50	X						0.	0.	0.
(11) MATTHEW E. MELMED BOARD MEMBER	1.00 0.10	X						0.	0.	0.
(12) NORM ROSENBERG BOARD MEMBER	0.50	X						0.	0.	0.
(13) MARION STANDISH BOARD MEMBER	0.50	X						0.	0.	0.
(14) ALAN J. STONE BOARD MEMBER	0.50	X						0.	0.	0.
(15) JUDITH H. WHITTLESEY BOARD MEMBER	1.00 0.10	X						0.	0.	0.
(16) ALICIN WILLIAMSON BOARD MEMBER	0.50	X						0.	0.	0.
(17) CHRISTINE COLLINS CHIEF OF STAFF	40.00				X			149,878.	0.	19,478.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ELLEN VOLLINGER LEGAL/FOOD STAMP DIR.	40.00					X		143,321.	0.	25,712.
(19) PATRICK YOUNGBLOOD DIRECTOR OF DEVELOPMENT	40.00					X		134,022.	0.	19,204.
(20) ELLEN TELLER DIR. GOVT. AFFAIRS	40.00					X		129,389.	0.	36,014.
(21) GERALDINE HENCHY DIR. NUTRITION PLCY/EARLY	40.00					X		113,940.	0.	17,590.
1b Sub-total								850,183.	0.	146,593.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								850,183.	0.	146,593.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **6**

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

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a 30,000.			
	b	Membership dues	1b			
	c	Fundraising events	1c 138,670.			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e 52,738.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 4,464,463.			
	g	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f	4,685,871.			
	Program Service Revenue	2 a	CONFERENCE	Business Code 900099 245,185.	245,185.	
b		HONORARIUM	900099 6,946.	6,946.		
c		PUBLICATIONS	900099 120.	120.		
d						
e						
f		All other program service revenue				
g		Total. Add lines 2a-2f	252,251.			
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts)	1,913.		
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6 a	Gross rents	(i) Real 2,205.			
		b Less rental expenses	(ii) Personal 0.			
		c Rental income or (loss)	2,205.			
		d Net rental income or (loss)	2,205.			2,205.
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other			
		b Less cost or other basis and sales expenses				
		c Gain or (loss)				
		d Net gain or (loss)				
	8 a	Gross income from fundraising events (not including \$ 138,670. of contributions reported on line 1c) See Part IV, line 18	a 91,615.			
		b Less direct expenses	b 83,228.			
		c Net income or (loss) from fundraising events	8,387.			8,387.
	9 a	Gross income from gaming activities See Part IV, line 19	a			
		b Less direct expenses	b			
		c Net income or (loss) from gaming activities				
10 a	Gross sales of inventory, less returns and allowances	a				
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11 a	MISCELLANEOUS	900099 5,171.			5,171.	
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d	5,171.				
12	Total revenue. See instructions.	4,955,798.	252,251.	0.	17,676.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	2,600,495.	2,600,495.		
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	208,228.	145,760.	31,234.	31,234.
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	2,761,208.	2,406,572.	93,143.	261,493.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	107,733.	97,101.	1,424.	9,208.
9 Other employee benefits	418,525.	372,528.	8,720.	37,277.
10 Payroll taxes	219,559.	194,002.	5,657.	19,900.
11 Fees for services (non-employees).				
a Management				
b Legal	13,717.	10,095.	2,568.	1,054.
c Accounting	30,100.	22,152.	5,634.	2,314.
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 Sch O.)	449,771.	424,562.	24,599.	610.
12 Advertising and promotion				
13 Office expenses	90,213.	85,505.	1,077.	3,631.
14 Information technology	81,977.	76,577.	1,195.	4,205.
15 Royalties				
16 Occupancy	483,013.	421,606.	13,592.	47,815.
17 Travel	108,685.	107,287.	694.	704.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	243,193.	242,933.	135.	125.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	27,733.	24,453.	726.	2,554.
23 Insurance	5,171.	4,560.	135.	476.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>INTERNS</u>	22,430.	22,426.	1.	3.
b <u>EQUIP. RENTAL & MAINT.</u>	19,935.	18,241.	341.	1,353.
c <u>REFERENCE MATERIALS</u>	11,601.	10,474.	10.	1,117.
d <u>STAFF TRAINING</u>	6,980.	6,545.	96.	339.
e All other expenses	46,861.	37,080.	6,831.	2,950.
25 Total functional expenses. Add lines 1 through 24e	7,957,128.	7,330,954.	197,812.	428,362.
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 SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	3,933,170.	1	918,190.
	2 Savings and temporary cash investments	759,449.	2	757,464.
	3 Pledges and grants receivable, net	2,977,685.	3	2,729,500.
	4 Accounts receivable, net	190,320.	4	93,201.
	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 instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	36,900.	9	19,948.
	10a Land, buildings, and equipment - cost or other basis. Complete Part VI of Schedule D	10a 263,573.		
	b Less: accumulated depreciation	10b 110,385.	10c 33,652.	153,188.
	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	31,201.	15	63,204.
16 Total assets. Add lines 1 through 15 (must equal line 34)	7,962,377.	16	4,734,695.	
Liabilities	17 Accounts payable and accrued expenses	738,441.	17	399,310.
	18 Grants payable		18	
	19 Deferred revenue	33,465.	19	86,121.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	94,500.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	48,631.	25	14,254.
	26 Total liabilities. Add lines 17 through 25	820,537.	26	594,185.
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets		1,359,319.	27	984,842.
28 Temporarily restricted net assets		5,782,521.	28	3,155,668.
29 Permanently restricted net assets			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	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 Total net assets or fund balances	7,141,840.	33	4,140,510.	
34 Total liabilities and net assets/fund balances	7,962,377.	34	4,734,695.	

Form 990 (2013)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,955,798.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,957,128.
3	Revenue less expenses Subtract line 2 from line 1	3	-3,001,330.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,141,840.
5	Net unrealized gains (losses) on investments	5	
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	4,140,510.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both

☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2013)

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

FOOD RESEARCH AND ACTION CENTER

Employer identification number

23-7200739

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

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

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

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

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

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

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

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

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

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

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

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

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

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated

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

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

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

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

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

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2013

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,845,464.	8,221,848.	6,679,917.	7,416,333.	4,685,871.	30,849,433.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3,845,464.	8,221,848.	6,679,917.	7,416,333.	4,685,871.	30,849,433.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						14,635,772.
6 Public support. Subtract line 5 from line 4						16,213,661.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	3,845,464.	8,221,848.	6,679,917.	7,416,333.	4,685,871.	30,849,433.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,001.	11,277.	15,053.	15,170.	4,118.	46,619.
9 Net income from unrelated business activities, whether or not the business is regularly carried on			3,406.	8,741.	8,387.	20,534.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	6,420.	47,443.	13,833.	3,247.	5,171.	76,114.
11 Total support. Add lines 7 through 10						30,992,700.
12 Gross receipts from related activities, etc. (see instructions)					12	1,069,553.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	52.31	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	52.62	%

16a **33 1/3% support test - 2013.** 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 - 2012.** 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 - 2013.** 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 - 2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

Schedule A (Form 990 or 990-EZ) 2013

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ☐

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ☐

Part IV

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12

Also complete this part for any additional information. (See instructions).

Lined area for supplemental information.

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.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

OMB No 1545-0047

2013

**Open to Public
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 organization

FOOD RESEARCH AND ACTION CENTER

Employer identification number

23-7200739

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

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

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

332041
11-08-13

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

- A** Check ☐ if the filing organization belongs to an affiliated group (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 Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		83,733.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)		132,089.	
c Total lobbying expenditures (add lines 1a and 1b)		215,822.	
d Other exempt purpose expenditures		7,741,306.	
e Total exempt purpose expenditures (add lines 1c and 1d)		7,957,128.	
f Lobbying nontaxable amount Enter the amount from the following table in both columns		547,856.	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)		136,964.	
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.	
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			☐ Yes ☐ 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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	366,206.	464,923.	518,278.	547,856.	1,897,263.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,845,895.
c Total lobbying expenditures		175,360.	278,196.	215,822.	669,378.
d Grassroots nontaxable amount	91,552.	116,231.	129,570.	136,964.	474,317.
e Grassroots ceiling amount (150% of line 2d, column (e))					711,476.
f Grassroots lobbying expenditures		25,983.	107,360.	83,733.	217,076.

Schedule C (Form 990 or 990-EZ) 2013

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
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:			
a 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?			
e 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 Other 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?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, 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).		
a 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

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.

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013Open to Public
Inspection

Name of the organization

FOOD RESEARCH AND ACTION CENTER

Employer identification number

23-7200739

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

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

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

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

☐ Preservation of land for public use (e.g., recreation or education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes ☐ No

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

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

☐ Yes ☐ No

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

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

	Amount
1c	
1d	
1e	
1f	

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

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☐ %

b Permanent endowment ☐ %

c Temporarily restricted endowment ☐ %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

(i) unrelated organizations

(ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		103,428.	375.	103,053.
d Equipment		132,053.	90,021.	42,032.
e Other		28,092.	19,989.	8,103.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				153,188.

Schedule D (Form 990) 2013

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO ACTION COUNCIL	13,016.
(3) DEFERRD RENT LIABILITY	1,238.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	14,254.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	4,955,798.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	4,955,798.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	4,955,798.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	7,865,110.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	7,982.
e	Add lines 2a through 2d	2e	7,982.
3	Subtract line 2e from line 1	3	7,857,128.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	100,000.
c	Add lines 4a and 4b	4c	100,000.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	7,957,128.

Part XIII Supplemental Information.

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.

PART X, LINE 2:

EXPLANATION: FOR THE YEAR ENDED DECEMBER 31, 2013, THE ORGANIZATIONS HAVE DOCUMENTED THEIR CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAVE DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE COMBINED FINANCIAL STATEMENTS.

THE FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS AFTER IT IS FILED.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

Part XIII Supplemental Information (continued)

RELATED ORGANIZATION EXPENSES INCLUDED ON CONSOLIDATED

FINANCIAL STATEMENTS BUT EXCLUDED FOR FORM 990 REPORTING

7,982.

PURPOSES

PART XII, LINE 4B - OTHER ADJUSTMENTS:

GRANT TO RELATED ORGANIZATION ELIMINATED ON THE FINANCIAL

STATEMENT AND REPORTED AS EXPENSE ON FORM 990, PART X,

100,000.

LINE 1

Department of the Treasury
Internal Revenue Service

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

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open To Public Inspection

FOOD RESEARCH AND ACTION CENTER

Employer identification number
23-7200739

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

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

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

☐ Yes ☐ No

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

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

Total

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		ANNUAL DINNER		NONE	(add col (a) through col (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	230,285.			230,285.
	2 Less Contributions	138,670.			138,670.
	3 Gross income (line 1 minus line 2)	91,615.			91,615.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	83,228.			83,228.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				83,228.
	11 Net income summary. Subtract line 10 from line 3, column (d)				8,387.

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

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

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

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

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

Name ► _____

Address ► _____

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

Name ► _____

Address ► _____

16 Gaming manager information

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

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

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

FOOD RESEARCH AND ACTION CENTER

Part I General Information on Grants and Assistance

Employer identification number
23-7200739

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA ASSOC OF FOOD BANKS 909 12TH STREET, SUITE 203 SACRAMENTO, CA 95814	68-0392816	501(C)(3)	167,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
HUNGER SOLUTIONS NEW YORK ATTN: LINDA BOPP, 14 COMPUTER DRIVE EAST, 2ND FL - ALBANY, NY 12205	22-2954760	501(C)(3)	167,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
CENTER FOR CIVIL JUSTICE 320 SOUTH WASHINGTON 2ND FL SAGINAW, MI 48607	38-1859780	501(C)(3)	120,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
TEXAS FOOD BANK NETWORK 1524 SOUTH IH-35, SUITE 342 AUSTIN, TX 78704	74-2762542	501(C)(3)	115,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
HUNGER FREE COLORADO KATHY UNDERHILL, EXD, 2222 S. ALBION ST., SUITE 360 - DENVER, CO 80222	68-0551464	501(C)(3)	112,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
FRAC ACTION COUNCIL 1200 18TH STREET, NW, SUITE 400 WASHINGTON, DC 20036	26-2010517	501(C)(4)	100,000.	0.			LOBBYING GRANT

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

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

57.
1.

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

Schedule I (Form 990) (2013)

Schedule I (Form 990) FOOD RESEARCH AND ACTION CENTER							23-7200739	Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
CENTER FOR PUBLIC POLICY PRIORITIES - 7020 EASY WIND DRIVE, SUITE 200 - AUSTIN, TX 78752	74-2898197	501(C)(3)	82,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION	
END HUNGER CONNECTICUT! INC. 65 HUNGERFORD STREET HARTFORD, CT 06106	06-1545835	501(C)(3)	80,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION	
FLORIDA IMPACT ATTN: DEBRA SUSIE, 1331 EAST LAFAYETTE STREET #A - TALLAHASSEE, FL 32301	59-2859151	501(C)(3)	80,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION	
ILLINOIS HUNGER COALITION 205 WEST MONROE, SUITE 310 CHICAGO, IL 60606	37-1251831	501(C)(3)	80,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION	
NEW JERSEY ANTI-HUNGER COALITION 192 W. DEMAREST AVENUE ENGLEWOOD, NJ 07631	22-2189072	501(C)(3)	70,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION	
VIRGINIA POVERTY LAW CENTER 919 EAST MAIN ST., SUITE 610 RICHMOND, VA 23219	54-1093402	501(C)(3)	70,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION	
FOOD BANK OF NORTHERN NEVADA, INC. C/O CHERIE JAMASON, 550 ITALY DRIVE MCCARRAN, NV 89434	94-2924979	501(C)(3)	63,675.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION	
MASSACHUSETTS LAW REFORM INSTITUTE 99 CHAUNCEY STREET, SUITE 500 BOSTON, MA 02111	04-6004303	501(C)(3)	63,675.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION	
HUNGER SOLUTIONS MINNESOTA 555 PARK STREET, SUITE 420 ST. PAUL, MN 55103	36-3567366	501(C)(3)	60,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION	

Schedule I (Form 990)

Schedule I (Form 990) **FOOD RESEARCH AND ACTION CENTER**

23-7200739

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NYC DEPT. OF EDUCATION, OFC OF SCHOOL SUPPORT SERVICES - 44-36 VERNON BLVD., ROOM 403 - LONG ISLAND CITY, NY 11101		GOVERNMENT	56,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
ATLANTA COMMUNITY FOOD BANK 732 JOSEPH E. LOWERY BLVD.NW ATLANTA, GA 30318-6628	58-1376648	501(C)(3)	50,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
CHILDREN'S HEALTH WATCH 88 E NEWTON ST., VOSE HALL, RM 423 BOSTON, MA 02118	04-3314093	501(C)(3)	50,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
PARTNERS FOR A HUNGER-FREE OREGON 712 SE HAWTHORNE BLVD, SUITE 202 PORTLAND, OR 97214	20-4970868	501(C)(3)	50,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
PUBLIC POLICY CENTER OF MISSISSIPPI - 736 N. CONGRESS ST., P.O. BOX 55649 - JACKSON, MS 39296-5649	64-0946476	501(C)(3)	45,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
CHILDREN'S HUNGER ALLIANCE 370 SOUTH FIFTH STREET COLUMBUS, OH 43215	23-7303509	501(C)(3)	42,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
WESTERN CENTER ON LAW AND POVERTY 3701 WILSHIRE BLVD. #208 LOS ANGELES, CA 90010-2826	95-2897721	501(C)(3)	40,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
CHILD AND FAMILY POLICY CENTER 505 5TH AVE., SUITE 404 DES MOINES, IA 50309	42-1378567	501(C)(3)	37,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
CHILDREN'S ALLIANCE OF NEW HAMPSHIRE - ATTN: ELLEN FINEBERG, 2 DELTA DR., SUITE 201 - CONCORD, NH 03301	22-2936618	501(C)(3)	37,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARTFORD COUNTY PUBLIC SCHOOLS ATTN: LONNIE BURT, 270 MURPHY RD. HARTFORD, CT 06114		GOVERNMENT	37,477.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
MISSOURI ASSOCIATION OF SOCIAL WELFARE - 606 E. CAPITOL AVENUE - JEFFERSON CITY, MO 65101	44-0547548	501(C)(3)	36,175.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
AZ COMMUNITY ACTION ASSOC. 2700 NORTH 3RD ST., SUITE 3040 PHOENIX, AZ 85004	86-0311619	501(C)(3)	35,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
CENTER ON BUDGET & POLICY PRIORITIES - 820 FIRST STREET, NE, SUITE 510 - WASHINGTON, DC 20002	52-1234565	501(C)(3)	35,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
UNITED WAY OF KING COUNTY ATTN: LAUREN MCGOWAN, 720 2ND AVENUE SEATTLE, WA 98104	91-0565555	501(C)(3)	35,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
NEW MEXICO APPLESEED 699 CENTRAL AVE, SE ALBUQUERQUE, NM 87102	52-1835698	501(C)(3)	32,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
GREATER PHILA COALITION AGAINST HUNGER - 1725 FAIRMOUNT AVE. - PHILADELPHIA, PA 19130	26-2727680	501(C)(3)	31,175.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
FOOD ACTION IN NEW JERSEY, INC. 192 W. DEMAREST AVENUE ENGLEWOOD, NJ 07631	22-2189072	501(C)(3)	31,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
FOOD BANK FOR NEW YORK CITY 39 BROADWAY, 10TH FLOOR NEW YORK CITY, NY 10006	13-3179546	501(C)(3)	30,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH CAROLINA APPLESEED 1518 WASHINGTON STREET COLUMBIA, SC 29201	57-1035023	501(C)(3)	30,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
NYC COALITION AGAINST HUNGER 50 BROAD STREET, STE# 1520 NEW YORK, NY 10004	13-3471350	501(C)(3)	25,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
PARTNERSHIP FOR CHILDREN AND YOUTH 1330 BROADWAY, SUITE 601 OAKLAND, CA 94612	04-3653529	501(C)(3)	25,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
AFTERSCHOOL ALLIANCE 1616 H. STREET NW, SUITE 820 WASHINGTON, DC 20006	52-2275123	501(C)(3)	20,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
CATHOLIC CHARITIES 320 CATHEDRAL STREET BALTIMORE, MD 20201	52-0591538	501(C)(3)	20,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
NATIONAL COUNCIL OF LA RAZA 1126 16TH ST. NW, SUITE 600 WASHINGTON, DC 20036	86-0212873	501(C)(3)	20,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
NATIONAL LEAGUE OF CITIES INSTITUTE - 1301 PENNSYLVANIA AVE NW #550 - WASHINGTON, DC 20004	52-6055762	501(C)(3)	20,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
NATIONAL RECREATION AND PARK ASSOCIATION - 22377 BELMONT RIDGE ROAD - ASHBURN, VA 20148-4501	13-5563001	501(C)(3)	20,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
PROJECT BREAD 145 BORDER ST. EAST BOSTON, MA 02128-1903	04-2931195	501(C)(3)	18,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUBLIC NEWS SERVICE 3980 BROADWAY STREET, SUITE 103, B0 BOULDER, CO 80304	82-0511533	501(C)(3)	18,175.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
PUBLIC HEALTH INSTITUTE 555 12TH STREET, 10TH FLOOR OAKLAND, CA 94607	94-1646278	501(C)(3)	17,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
DURHAM PUBLIC SCHOOLS DEPT. OF CHILD NUTRITION SERV., 808 DURHAM, NC 27703		GOVERNMENT	16,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
WATERBURY PUBLIC SCHOOLS 236 GRAND ST., 2ND FLOOR WATERBURY, CT 06702		GOVERNMENT	16,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
HUNGER FREE VERMONT 38 EASTWOOD DRIVE, SUITE 100 SOUTH BURLINGTON, VT 05403	03-0336357	501(C)(3)	15,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
HAWAII APPLESEED CENTER FOR LAW AND ECONOMIC JUSTICE - 119 MERCHANT ST. #605A - HONOLULU, HI 96813	76-0748976	501(C)(3)	12,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
GREATER PITTSBURGH COMMUNITY FOOD BANK - 1 NORTH LINDEN STREET - DUQUESNE, PA 15110	25-1420599	501(C)(3)	10,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
HUNGER TASK FORCE 201 S. HAWLEY COURT MILWAUKEE, WI 53214	39-1345847	501(C)(3)	10,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
IDA-ORE PLANNING & DEVELOPMENT ASSOC. - 125 E. 50TH ST. - GARDEN CITY, ID 83714	82-0327558	501(C)(3)	10,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEBRASKA APPLESEED 941 O STREET, SUITE 920 LINCOLN, NE 68508	47-0798343	501(C)(3)	10,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
UTAHNS AGAINST HUNGER 455 EAST 400 SOUTH, SUITE 407 SALT LAKE CITY, UT 84111	87-0343164	501(C)(3)	10,000.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
ASSOC OF ARIZONA FOOD BANKS INC. 2100 N CENTRAL AVENUE, SUITE 230 PHOENIX, AZ 85004	86-0507679	501(C)(3)	7,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
FEEDING PENNSYLVANIA 3908 COREY ROAD HARRISBURG, PA 17109	45-4793238	501(C)(3)	7,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
JUST HARVEST 16 TERMINAL WAY PITTSBURGH, PA 15219	25-1555571	501(C)(3)	7,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
OHIO ASSOC OF FOOD BANKS 51 N. HIGH STREET, SUITE#761 COLUMBUS, OH 43215	34-1677838	501(C)(3)	7,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION
MAINE HUNGER INST. PO BOX 1459 PORTLAND, ME 04104	01-0418917	501(C)(3)	7,500.	0.			SUPPORT FOR FEDERAL NUTRITION PROGRAM IMPLEMENTATION

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.

Schedule I (Form 990) (2013)

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization

FOOD RESEARCH AND ACTION CENTER

Employer identification number

23-7200739

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

- | | |
|--|---|
| ☐ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☐ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Area with horizontal lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization

FOOD RESEARCH AND ACTION CENTER

Employer identification number
23-7200739

FORM 990, PAGE 1, ITEM B: AMENDED RETURN

EXPLANATION: AMENDED AMOUNTS OF GRASS ROOTS AND DIRECT LOBBYING

EXPENDITURES ON SCHEDULE C, PART II-A, LINES 1A AND 1B.

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

INFORMATION, PUBLICATIONS, BEST PRACTICES, TRAINING AND TECHNICAL

ASSISTANCE TO INDIVIDUALS AND GROUPS REGARDING THE INCIDENCE OF, AND

CAUSES OF, HUNGER AND FOOD INSECURITY, AND REGARDING FEDERAL, STATE,

AND LOCAL GOVERNMENTAL AND PRIVATE PROGRAMS TO REDUCE HUNGER AND FOOD

INSECURITY AND IMPROVE NUTRITION; DISSEMINATES INFORMATION TO NATIONAL,

STATE AND LOCAL GOVERNMENT OFFICIALS, PUBLIC AND PRIVATE NON-PROFIT

SERVICE PROVIDERS AND ADVOCACY ORGANIZATIONS, THE MEDIA AND THE GENERAL

PUBLIC; ENGAGES IN PUBLIC POLICY ADVOCACY; AND PROVIDES COUNSEL TO

INDIGENT PERSONS AND GROUPS WITH REGARD TO NUTRITION PROBLEMS. FRAC IS

SUPPORTED PRIMARILY BY GRANTS FROM FOUNDATIONS.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

EXPLANATION: IN 2013, THE ORGANIZATION BECAME THE FISCAL AGENT FOR THE

CHILDREN'S LEADERSHIP COUNCIL (CLC) PROGRAM.

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

MARYLAND HUNGER SOLUTIONS: FRAC'S MARYLAND PROJECT IS DEDICATED TO

FIGHTING HUNGER AND IMPROVING THE NUTRITION, HEALTH AND WELL-BEING OF

LOW-INCOME PEOPLE IN MARYLAND THROUGH ADVOCACY, OUTREACH, TRAINING,

POLICY ANALYSIS, TECHNICAL ASSISTANCE, PARTNERSHIPS, AND DISSEMINATION

OF MATERIALS.

Name of the organization

FOOD RESEARCH AND ACTION CENTER

Employer identification number

23-7200739

EXPENSES \$ 802,985. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

D.C. HUNGER SOLUTIONS: FRAC'S DISTRICT OF COLUMBIA PROJECT IS DEDICATED TO FIGHTING HUNGER AND IMPROVING THE NUTRITION, HEALTH AND WELL-BEING OF LOW-INCOME PEOPLE IN THE DISTRICT OF COLUMBIA THROUGH ADVOCACY, OUTREACH, TRAINING, POLICY ANALYSIS, TECHNICAL ASSISTANCE, PARTNERSHIPS, AND DISSEMINATION OF MATERIALS.

EXPENSES \$ 491,250. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

EARLY CHILD NUTRITION: THROUGH RESEARCH, PUBLIC POLICY ADVOCACY, TECHNICAL ASSISTANCE, TRAINING AND DISTRIBUTION OF MATERIALS TO LOCAL, STATE, AND NATIONAL ORGANIZATIONS, FRAC WORKS TO REDUCE HUNGER, IMPROVE NUTRITION, AND THEREBY IMPROVE THE FOOD SECURITY, ECONOMIC SECURITY, HEALTH, DEVELOPMENT, SCHOOL READINESS AND WELL-BEING OF INFANTS AND PRESCHOOLERS.

EXPENSES \$ 152,315. INCLUDING GRANTS OF \$ 0. REVENUE \$ 18,132.

CHILDREN'S LEADERSHIP COUNCIL: IS A COALITION OF LEADING POLICY AND ADVOCACY ORGANIZATIONS THAT WORK TO IMPROVE THE HEALTH, NUTRITION, EDUCATION AND WELL-BEING OF CHILDREN AND YOUTH. THE CLC SUPPORTS INVESTMENTS NEEDED FROM BIRTH TO YOUNG ADULTHOOD TO ENSURE THAT CHILDREN'S BASIC NEEDS OF FOOD, CLOTHING, HEALTH CARE, SHELTER AND ECONOMIC STABILITY ARE MET.

EXPENSES \$ 61,531. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE ORGANIZATION'S PRESIDENT, ACCOUNTANT AND CHIEF OF STAFF. A

Name of the organization

FOOD RESEARCH AND ACTION CENTER

Employer identification number

23-7200739

COPY WAS THEN SENT TO THE ENTIRE BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: BOARD MEMBERS ARE REQUIRED TO MAKE FULL DISCLOSURE OF ANY ECONOMIC INTERESTS THAT THEY HAVE DURING BOARD MEETINGS. THE OTHER MEMBERS OF THE BOARD EVALUATE THE INTEREST AND ACT AS A CHECK AGAINST ANY INAPPROPRIATE IMPACT ON THE BOARD'S DECISION MAKING-PROCESS. IN THE EVENT OF A CONFLICT ARISING THE AFFECTED DIRECTOR WOULD REFRAIN FROM VOTING ON THE RELATED MATTERS.

FORM 990, PART VI, SECTION B, LINE 15:

EXPLANATION: WHEN DETERMINING THE SALARY OF FRAC'S PRESIDENT, FRAC'S BOARD CHAIR INCLUDES A REVIEW OF TOP MANAGEMENT SALARIES IN LIKE ORGANIZATIONS. THE SALARY DECISION AND DETERMINING FACTORS ARE DOCUMENTED IN WRITING. ONCE COMPLETED, THE CHAIR PROVIDES HR WITH THE DOCUMENTATION FOR IMPLEMENTING THE SALARY INCREASE. THE LAST COMPENSATION REVIEW TOOK PLACE IN DECEMBER, 2013.

FRAC'S PRESIDENT DETERMINES SALARIES OF SENIOR MANAGEMENT STAFF. HERE TOO, A MARKET REVIEW OF COMPARABILITY DATA IS AMONG THE DETERMINING FACTORS. ONCE A DETERMINATION IS MADE, THE PRESIDENT SHARES THIS WITH HR FOR IMPLEMENTING THE SALARY INCREASE. ALL DOCUMENTATION PERTAINING TO AN INDIVIDUAL'S SALARY INCREASE IS KEPT IN THAT PERSON'S PERSONNEL FILE.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33

[illegible]

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year

[illegible]

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

Schedule R (Form 990) 2013

Part III
Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

[illegible]

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

[illegible]

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to related organization(s)**c** Gift, grant, or capital contribution from related organization(s)**d** Loans or loan guarantees to or for related organization(s)**e** Loans or loan guarantees by related organization(s)**f** Dividends from related organization(s)**g** Sale of assets to related organization(s)**h** Purchase of assets from related organization(s)**i** Exchange of assets with related organization(s)**j** Lease of facilities, equipment, or other assets to related organization(s)**k** Lease of facilities, equipment, or other assets from related organization(s)**l** Performance of services or membership or fundraising solicitations for related organization(s)**m** Performance of services or membership or fundraising solicitations by related organization(s)**n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)**o** Sharing of paid employees with related organization(s)**p** Reimbursement paid to related organization(s) for expenses**q** Reimbursement paid by related organization(s) for expenses**r** Other transfer of cash or property to related organization(s)**s** Other transfer of cash or property from related organization(s)**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) FRAC ACTION COUNCIL	B	100,000.	LOBBYING EXPENSES
(2) FRAC ACTION COUNCIL	O	5,500.	TIMESHEET & PROG. SUP. ALLOCATION
(3) FRAC ACTION COUNCIL	Q	658.	BASED ON TIMESHEETS
(4)			
(5)			
(6)			

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

[illegible]

Part VII	Supplemental Information
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Provide additional information for responses to questions on Schedule R (see instructions)