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Form 990



Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except 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](http://www.irs.gov/form990)

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 07-01-2014, and ending 06-30-2015

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

GREATER PITTSBURGH COMMUNITY FOOD BANK

Doing business as

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

1 NORTH LINDEN STREET

City or town, state or province, country, and ZIP or foreign postal code

DUQUESNE, PA 15110

F Name and address of principal officer

LISA SCALES

1 NORTH LINDEN STREET

DUQUESNE,PA 15110

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 ▶

D Employer identification number

25-1420599

E Telephone number

(412) 460-3663

G Gross receipts \$ 44,562,552

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) ( ) ◀(insert no ) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.PITTSBURGHFOODBANK.ORG

K Form of organization

☒ Corporation☐ Trust☐ Association☐ Other ▶

L Year of formation 1982

M State of legal domicile PA

Part I		Summary		
Activities & Governance	1	Briefly describe the organization's mission or most significant activities COMMITTED TO ELIMINATING HUNGER THROUGHOUT SOUTHWESTERN PENNSYLVANIA		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
Revenue	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	108
	6	Total number of volunteers (estimate if necessary)	6	10,232
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0
	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	40,474,311	41,294,208
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,695,001	2,867,396
Expenses	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	75,392	95,887
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-3,622	-53,835
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	43,241,082	44,203,656
	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)	0	0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	5,039,766	5,408,475
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,005,076	0	0
Net Assets or Fund Balances	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	36,504,107	38,313,972
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	41,543,873	43,722,447
	19	Revenue less expenses Subtract line 18 from line 12	1,697,209	481,209
			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	15,019,584	15,299,922
	21	Total liabilities (Part X, line 26)	2,075,863	1,805,449
	22	Net assets or fund balances Subtract line 21 from line 20	12,943,721	13,494,473

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

LISA SCALES CHIEF EXECUTIVE OFFICER

Type or print name and title

\*\*\*\*\*

2016-03-29

Date

Paid Preparer Use Only

Print/Type preparer's name

EUGENE J LOGAN

Preparer's signature

EUGENE J LOGAN

Date

Check ☐ if self-employed

PTIN

P00227231

Firm's name

▶ SCHNEIDER DOWNS & CO INC

Firm's EIN ▶ 25-1408703

Firm's address ▶ ONE PPG PLACE SUITE 1700

PITTSBURGH, PA 15222

Phone no (412) 261-3644

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

☒ Yes☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2014)

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission

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

2

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

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

3

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

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 \$ 38,359,687 including grants of \$ ) (Revenue \$ 2,852,471 )

SEE SCHEDULE O

4b

(Code ) (Expenses \$ 1,230,405 including grants of \$ ) (Revenue \$ )

SEE SCHEDULE O

4c

(Code ) (Expenses \$ 1,012,346 including grants of \$ ) (Revenue \$ 14,925 )

SEE SCHEDULE O

See Additional Data

4d

Other program services (Describe in Schedule O )






















(Expenses \$ 722,411 including grants of \$ ) (Revenue \$ )

4e

Total program service expenses ▶ 41,324,849

Part IV

Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . .</i>	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III . . .</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J . . .</i>	23	Yes	
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>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . .	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .	24d		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I . . .</i>	25b		No
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 "Yes," complete Schedule L, Part II . . .</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III . . .</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . .</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . .</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV . . .</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . .</i>	29	Yes	
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>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . .</i>	31		No
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>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . .</i>	33		No
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>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . .</i>	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . .</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI . . .</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response 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.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
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.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	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)?		No
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	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?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
7a	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?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	<b>Section 501(c)(7) organizations.</b> Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	<b>Section 501(c)(12) organizations.</b> Enter:		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
13a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

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

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

Section B. Policies

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	PA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> 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, address, and telephone number of the person who possesses the organization's books and records	DONALD LUTOVSKY

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

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

Form **990** (2014)



## Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			

<b>1b</b>	<b>Sub-Total . . . . .</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A . . . . .</b>			
<b>d</b>	<b>Total (add lines 1b and 1c) . . . . .</b>	514,542	0	95,534

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: 2

		Yes	No
<b>3</b>	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>3</b>	No
<b>4</b>	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? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b>	Yes
<b>5</b>	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>	No

## Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NEWPORT CREATIVE COMMUNICATIONS 33 RAILROAD AVE SUITE 1 DUXBURY, MA 02332	DIRECT MAIL SERVICE	323,997
CONNECTIVE MEDIA LP 189 FORT COUCH RD SUITE 410 PITTSBURGH, PA 15241	ADVERTISING/PROFESSIONAL SERVICES	178,540

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

Part VIII

Statement of Revenue

Check 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	1a	Federated campaigns . . . . .	1a217,177			
	b	Membership dues . . . . .	1b			
	c	Fundraising events . . . . .	1c147,897			
	d	Related organizations . . . . .	1d			
	e	Government grants (contributions)	1e6,835,847			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f34,093,287			
	g	Noncash contributions included in lines 1a-1f \$	25,238,091			
	h	Total. Add lines 1a-1f . . . . .	41,294,208			
Program Service Revenue	2a	WHOLESALE FOOD PROGRAM	Business Code 900099	2,486,987	2,486,987	
	b	SHARED MAINTENANCE FEES	900099	321,365	321,365	
	c	TRUCKING SERVICES	900099	44,119	44,119	
	d	MEMBERSHIP DUES	900099	14,925	14,925	
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f . . . . .	2,867,396			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .	84,588			84,588
	4	Income from investment of tax-exempt bond proceeds . . . . .				
	5	Royalties . . . . .				
	6a	Gross rents	(i) Real (ii) Personal			
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss) . . . . .				
	7a	Gross amount from sales of assets other than inventory	(i) Securities 122,659 (ii) Other 17,979			
	b	Less cost or other basis and sales expenses	122,252 7,087			
	c	Gain or (loss)	407 10,892			
	d	Net gain or (loss) . . . . .	11,299			11,299
	8a	Gross income from fundraising events (not including \$ 147,897 of contributions reported on line 1c) See Part IV, line 18 . . . . .	a158,782 b229,557			
	b	Less direct expenses . . . . .				
	c	Net income or (loss) from fundraising events . . . . .	-70,775			-70,775
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .	a			
	b	Less direct expenses . . . . .	b			
	c	Net income or (loss) from gaming activities . . . . .				
	10a	Gross sales of inventory, less returns and allowances . . . . .	a			
	b	Less cost of goods sold . . . . .	b			
	c	Net income or (loss) from sales of inventory . . . . .				
		Miscellaneous Revenue	Business Code			
	11a	MISCELLANEOUS	900099	16,940		16,940
	b					
	c					
	d	All other revenue . . . . .				
	e	Total. Add lines 11a-11d . . . . .	16,940			
	12	Total revenue. See Instructions . . . . .	44,203,656	2,867,396	0	42,052

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 domestic organizations and domestic governments See Part IV, line 21 . . . . .				
2	Grants and other assistance to domestic individuals See Part IV, line 22 . . . . .				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 . . . . .				
4	Benefits paid to or for members . . . . .				
5	Compensation of current officers, directors, trustees, and key employees . . . . .	629,367	217,815	347,523	64,029
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
7	Other salaries and wages . . . . .	3,529,977	2,828,283	473,190	228,504
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	205,663	169,038	26,820	9,805
9	Other employee benefits . . . . .	718,505	624,919	74,143	19,443
10	Payroll taxes . . . . .	324,963	258,148	45,288	21,527
11	Fees for services (non-employees)				
a	Management . . . . .				
b	Legal . . . . .				
c	Accounting . . . . .	47,776		47,776	
d	Lobbying . . . . .	20,410	20,410		
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees . . . . .	14,676		14,676	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . .	754,910	291,581	89,387	373,942
12	Advertising and promotion . . . . .	300,433	154,073	145,680	680
13	Office expenses . . . . .	649,948	407,731	38,424	203,793
14	Information technology . . . . .	127,452	69,302	16,467	41,683
15	Royalties . . . . .				
16	Occupancy . . . . .	295,046	284,564	7,587	2,895
17	Travel . . . . .	86,023	70,095	11,612	4,316
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .	43,205	36,431	4,444	2,330
20	Interest . . . . .				
21	Payments to affiliates . . . . .	20,856	15,694	3,769	1,393
22	Depreciation, depletion, and amortization . . . . .	568,998	532,967	25,869	10,162
23	Insurance . . . . .	65,865	62,877	2,179	809
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	DONATED & PURCHASED FOOD	34,640,442	34,640,442		
b	FREIGHT AND TRUCKING	456,089	456,089		
c	AGENCY SUPPORT	161,727	149,294	934	11,499
d	MEMBERSHIP & SUBSCRIPTIONS	37,679	16,443	14,732	6,504
e	All other expenses	22,437	18,653	2,022	1,762
25	Total functional expenses. Add lines 1 through 24e	43,722,447	41,324,849	1,392,522	1,005,076
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		3,191,481	1	2,765,639
	2	Savings and temporary cash investments		921,499	2	1,297,019
	3	Pledges and grants receivable, net		158,903	3	507,528
	4	Accounts receivable, net		140,411	4	208,183
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		2,598,458	8	2,102,653
	9	Prepaid expenses and deferred charges		88,725	9	62,514
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a10,118,610			
	b	Less accumulated depreciation	10b6,258,035	4,161,061	10c	3,860,575
	11	Investments—publicly traded securities		3,759,046	11	4,495,811
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		15,019,584	16	15,299,922
Liabilities	17	Accounts payable and accrued expenses		942,497	17	925,892
	18	Grants payable			18	
	19	Deferred revenue		1,133,366	19	879,557
	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	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		2,075,863	26	1,805,449
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		11,920,349	27	12,056,734
	28	Temporarily restricted net assets		1,023,372	28	1,437,739
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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		12,943,721	33	13,494,473
	34	Total liabilities and net assets/fund balances		15,019,584	34	15,299,922

Part XI Reconciliation of Net Assets

Check 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	44,203,656
2	Total expenses (must equal Part IX, column (A), line 25)	2	43,722,447
3	Revenue less expenses Subtract line 2 from line 1	3	481,209
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,943,721
5	Net unrealized gains (losses) on investments	5	69,543
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	13,494,473

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	No
2b	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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes
2c	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	2c	Yes
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes

Additional Data

Software ID:  
Software Version:  
EIN: 25-1420599  
Name: GREATER PITTSBURGH COMMUNITY FOOD BANK

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

(Code	) (Expenses \$	722,411	including grants of \$	) (Revenue \$	)
SOUTHWESTERN PENNSYLVANIA FOOD SECURITY PARTNERSHIP (SPSFP) CREATED TO SIGNIFICANTLY REDUCE HUNGER IN SOUTHWESTERN PA BY INCREASING PARTICIPATION IN FOOD ASSISTANCE PROGRAMS, SUPPORTING COMMUNITY LED EFFORTS TO IMPROVE FOOD SECURITY AND FACILITATING COLLABORATIONS BETWEEN ORGANIZATIONS TO BETTER SERVE OUR HUNGRY NEIGHBORS THE STRATEGY BEHIND THIS WORK INVOLVES ENGAGING PARTNER ORGANIZATIONS FROM A VARIETY OF SECTORS (E G NONPROFIT, FOR-PROFIT, GOVERNMENT, EDUCATION, AND FAITH-BASED) TO REACH OUT TO THE PEOPLE THEY ALREADY SERVE WITH FOOD ASSISTANCE RESOURCES AND INFORMATION, ENCOURAGE THEIR MEMBERS TO SUPPORT FOOD ASSISTANCE PROGRAMS, AND PARTICIPATE IN COLLABORATIONS BETWEEN THE SECTORS THE PARTNERSHIP PRIMARILY FOCUSES ON INCREASING UTILIZATION OF SNAP, SCHOOL MEALS AND THE SFSP					

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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) LORI ASHBY ..... BOARD MEMBER	0 70 .....	X						0	0	0
(1) MONTY BEDI ..... BOARD MEMBER	0 60 .....	X						0	0	0
(2) MARVA BROWN ..... BOARD MEMBER	0 60 .....	X						0	0	0
(3) RANDY CORNELIUS ..... BOARD MEMBER	0 70 .....	X						0	0	0
(4) WILLIAM M COTTER ..... BOARD MEMBER	0 70 .....	X						0	0	0
(5) ROCCO D'ANGELO ..... BOARD MEMBER	1 00 .....	X						0	0	0
(6) LISA FLORO ..... BOARD MEMBER	0 60 .....	X						0	0	0
(7) ANNE FOULKES ..... BOARD MEMBER	0 70 .....	X						0	0	0
(8) HENRY GORMAN ..... BOARD MEMBER	0 70 .....	X						0	0	0
(9) TERRI GOULD ..... BOARD MEMBER	0 80 .....	X						0	0	0
(10) COSETTE GRANT-OVERTON ..... BOARD MEMBER (EXITED 01/2015)	0 30 .....	X						0	0	0
(11) SUSAN GROMIS KAPLAN ..... BOARD MEMBER	0 70 .....	X						0	0	0
(12) JAMES GROSJEAN ..... BOARD MEMBER	0 80 .....	X						0	0	0
(13) DR RODERICK L HARRIS ..... BOARD MEMBER (ENTERED 01/2015)	0 50 .....	X						0	0	0
(14) MICHAEL HERALD ..... BOARD MEMBER	0 90 .....	X						0	0	0
(15) KEN JOHNSTON ..... BOARD MEMBER	0 90 .....	X						0	0	0
(16) ABASS KAMARA ..... BOARD MEMBER	0 60 .....	X						0	0	0
(17) SUZIE LACHUT ..... BOARD MEMBER (ENTERED 01/2015)	0 50 .....	X						0	0	0
(18) SCOTT LAMMIE ..... BOARD MEMBER (EXITED 01/2015)	0 20 .....	X						0	0	0
(19) CAROLINE LEE ..... BOARD MEMBER	0 60 .....	X						0	0	0
(20) GREGORY LINTNER ..... BOARD MEMBER	0 90 .....	X						0	0	0
(21) ED MCCALLISTER ..... BOARD MEMBER (ENTERED 01/2015)	0 50 .....	X						0	0	0
(22) BILL MCCLOY ..... BOARD MEMBER (EXITED 01/2015)	0 20 .....	X						0	0	0
(23) JIM MCDONALD ..... BOARD MEMBER	0 60 .....	X						0	0	0
(24) PATRICIA MCELLIGOTT ..... BOARD MEMBER (ENTERED 01/2015)	0 50 .....	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
(26) MICHAEL MULLEN ..... BOARD MEMBER	0 70 .....	X						0	0	0
(1) CAROL ROBINSON ..... BOARD MEMBER	0 80 .....	X						0	0	0
(2) MIM SEIDEL ..... BOARD MEMBER	0 60 .....	X						0	0	0
(3) LAURA SOLLER ..... BOARD MEMBER	0 70 .....	X						0	0	0
(4) ED STEINMETZ ..... BOARD MEMBER (ENTERED 06/2015)	0 00 .....	X						0	0	0
(5) MATT SWIDER ..... BOARD MEMBER	0 90 .....	X						0	0	0
(6) REV DAVID TAYLOR ..... BOARD MEMBER	0 70 .....	X						0	0	0
(7) DON ZIEGLER ..... BOARD MEMBER (ENTERED 01/2015)	0 50 .....	X						0	0	0
(8) KEVIN T HOLDEN ..... EMERITUS BOARD MEMBER	0 10 .....	X						0	0	0
(9) HERB SHEAR ..... EMERITUS BOARD MEMBER	0 20 .....	X						0	0	0
(10) MEL STEALS ..... BOARD CHAIR	2 00 .....	X		X				0	0	0
(11) GEORGE MCGRADY ..... BOARD VICE CHAIR	1 00 .....	X		X				0	0	0
(12) MAUREEN SWEENEY ..... SECRETARY	1 00 .....	X		X				0	0	0
(13) AMY LEWIS ..... TREASURER	1 00 .....	X		X				0	0	0
(14) LISA SCALES ..... CHIEF EXECUTIVE OFFICER	55 00 .....			X				144,660	0	20,981
(15) SHARON HARM ..... CHIEF FIN OFFICER (EXITED 09/2014)	48 00 .....			X				89,262	0	22,152
(16) DONALD LUTOVSKY ..... CHIEF FIN OFFICER (ENTERED 09/2014)	48 00 .....			X				20,318	0	3,393
(17) ANNE HAWKINS ..... CHIEF DEV OFFICER (EXITED 12/2014)	45 00 .....			X				101,627	0	12,792
(18) TRACI WEATHERFORD-BROWN ..... CHIEF DEV OFFICER (ENTERED 02/2015)	45 00 .....			X				0	0	0
(19) RON CICHOWICZ ..... CHIEF COMMUNICATIONS OFFIC	45 00 .....			X				76,358	0	21,749
(20) LAURA RANDOLPH ..... CHIEF OPERATIONS OFFICER	45 00 .....			X				82,317	0	14,467



SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization GREATER PITTSBURGH COMMUNITY FOOD BANK	Employer identification number 25-1420599
--	--

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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
- a

☐

**Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

**Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

**Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

**Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations . . . . . \_\_\_\_\_
- g

Provide the following information about the supported organization(s)

(i)Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	35,138,007	36,283,900	37,733,949	40,478,811	41,294,208	190,928,875
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	35,138,007	36,283,900	37,733,949	40,478,811	41,294,208	190,928,875
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)						7,770,049
6 Public support. Subtract line 5 from line 4						183,158,826

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	35,138,007	36,283,900	37,733,949	40,478,811	41,294,208	190,928,875
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	87,069	77,757	80,471	74,489	84,588	404,374
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )	135,303	171,148	139,521	195,362	175,722	817,056
11 Total support Add lines 7 through 10						192,150,305
12 Gross receipts from related activities, etc (see instructions)					12	12,550,551
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 2014 (line 6, column (f) divided by line 11, column (f))	14	95 320 %
15 Public support percentage for 2013 Schedule A, Part II, line 14	15	95 180 %
16a 33 1/3% support test—2014. 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—2013. 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—2014. 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
b 10%-facts-and-circumstances test—2013. 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		

Part IIISupport 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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 VI.)						
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 2014 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2013 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2014. 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—2013. 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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 <u>Activities Test</u> <b>Answer (a) and (b) below.</b>			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 <u>Parent of Supported Organizations</u> <b>Answer (a) and (b) below.</b>			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009. . . . .			
b From 2010. . . . .			
c From 2011. . . . .			
d From 2012. . . . .			
e From 2013. . . . .			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010. . . . .			
b From 2011. . . . .			
c From 2012. . . . .			
d From 2013. . . . .			
e From 2014. . . . .			

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

**Facts And Circumstances Test**

Return Reference

Explanation



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.**

▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at**

***www.irs.gov/form990.***

OMB No 1545-0047

2014

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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization GREATER PITTSBURGH COMMUNITY FOOD BANK	Employer identification number 25-1420599
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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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 <b>Form 1120-POL</b> for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> 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-

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)		16,328													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		4,082													
c Total lobbying expenditures (add lines 1a and 1b)		20,410													
d Other exempt purpose expenditures		43,702,037													
e Total exempt purpose expenditures (add lines 1c and 1d)		43,722,447													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		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		
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)		250,000													
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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	3,100	209	6,343	20,410	30,062
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	2,480	167	5,074	16,328	24,049

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).

1	Were substantially all (90% or more) dues received nondeductible by members?	1	Yes	No
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, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation

[illegible]

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](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization GREATER PITTSBURGH COMMUNITY FOOD BANK	Employer identification number 25-1420599
--	--

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 value of contributions to (during year)	
3	Aggregate value of 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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

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

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) Revenue 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

Revenue included in Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2014

**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, for escrow or custodial account liability? 

☐ 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 | b (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 . . . . .

	Yes	No
3a(i)		
3a(ii)		
3b		
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .
- 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 . . . . .		332,699		332,699
b Buildings . . . . .		6,932,201	4,131,022	2,801,179
c Leasehold improvements . . . . .				
d Equipment . . . . .		1,296,438	1,012,226	284,212
e Other . . . . .		1,557,272	1,114,787	442,485
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶				3,860,575



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	44,502,756
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments . . . . .	2a	69,543
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIII ) . . . . .	2d	229,557
e	Add lines 2a through 2d . . . . .	2e	299,100
3	Subtract line 2e from line 1 . . . . .	3	44,203,656
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	44,203,656

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	43,952,004
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	229,557
e	Add lines 2a through 2d . . . . .	2e	229,557
3	Subtract line 2e from line 1 . . . . .	3	43,722,447
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	
c	Add lines 4a and 4b . . . . .	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ) . . . . .	5	43,722,447

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.

Return Reference	Explanation
PART X, LINE 2	THE FOOD BANK IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE U S INTERNAL REVENUE CODE (IRC) AND IS NOT A PRIVATE FOUNDATION UNDER SECTION 509 OF THE IRC. ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS RECORDED IN THE FINANCIAL STATEMENTS. THE FOOD BANK'S STATEMENTS OF FINANCIAL POSITION AT JUNE 30, 2015 AND 2014 DO NOT INCLUDE ANY LIABILITIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS, FURTHER, THE FOOD BANK HAS NO UNRECOGNIZED TAX BENEFITS. THE FOOD BANK IS NO LONGER SUBJECT TO EXAMINATION OF ITS TAX RETURNS FOR YEARS BEFORE 2012.
PART XI, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EXPENSE 229,557
PART XII, LINE 2D - OTHER ADJUSTMENTS	FUNDRAISING EXPENSE 229,557



[illegible]

SCHEDULE G  
(Form 990 or 990-EZ)

Supplemental Information Regarding  
Fundraising or Gaming Activities

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

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

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization  
GREATER PITTSBURGH COMMUNITY FOOD BANK

Employer identification number  
25-1420599

Part I 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.

- 1

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

a

☐

Mail solicitations

e

☐

Solicitation of non-government grants

b

☐

Internet and email solicitations

f

☐

Solicitation of government grants

c

☐

Phone solicitations

g

☐

Special fundraising events

d

☐

In-person solicitations
- 2a

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

☐ 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			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
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.

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			<u>BLUES FESTIVAL</u>	<u>GOLF S.O.M.E.</u>	<u>1</u>	(add col (a) through	
			(event type)	(event type)	(total number)	col (c))	
	1	Gross receipts . . . .	248,405	31,615	26,659	306,679	
	2	Less Contributions . . . .	91,495	29,743	26,659	147,897	
3	Gross income (line 1 minus line 2) . . . .	156,910	1,872		158,782		
Direct Expenses	4	Cash prizes . . . .					
	5	Noncash prizes . . . .					
	6	Rent/facility costs . . . .	27,203			27,203	
	7	Food and beverages . . . .	12,042	3,897		15,939	
	8	Entertainment . . . .	82,906			82,906	
	9	Other direct expenses . . . .	100,194	448	2,867	103,509	
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶					(229,557)
	11	Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶					-70,775

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 . . . . .			
	2	Cash prizes . . . . .			
	3	Non-cash prizes . . . . .			
	4	Rent/facility costs . . . . .			
	5	Other direct expenses . . . . .			
Direct Expenses	6	Volunteer labor . . . . .			
	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 conducts gaming activities \_\_\_\_\_

a Is the organization licensed to conduct 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 conduct 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 activities conducted 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 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 provide any additional information (see instructions).

Return Reference	Explanation
SCHEDULE G, PART II, REPORTING FUNDRAISING REVENUE	GREATER PITTSBURGH COMMUNITY FOOD BANK'S FUNDRAISING EVENT GENERATED CONTRIBUTION AND QUID PRO QUO REVENUE IN ACCORDANCE WITH FORM 990, SCHEDULE G INSTRUCTIONS, CONTRIBUTION REVENUE RECEIVED IN CONNECTION WITH A FUNDRAISING EVENT IS SUBTRACTED FROM THE EVENT'S GROSS RECEIPTS AND REPORTED AS CONTRIBUTION REVENUE IN THE STATEMENT OF REVENUE THE BALANCE IS REFERRED TO AS GROSS INCOME ON SCHEDULE G, PART II, LINE 3 EXPENSES DIRECTLY CONNECTED WITH THE FUNDRAISING EVENT ARE SUBTRACTED FROM GROSS INCOME AND OFTEN CREATE THE MISTAKEN IMPRESSION THAT THE EVENT WAS NOT A FINANCIAL SUCCESS THE FOOD BANK BELIEVES THAT THE FOLLOWING IS A MORE ACCURATE PRESENTATION OF THE FINANCIAL RESULTS OF THE ORGANIZATION'S FUNDRAISING EVENT GROSS RECEIPTS \$306,679 LESS EXPENSES (\$229,557) NET FUNDRAISING REVENUE \$77,122

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" to Form 990, Part IV, line 23.  
▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
GREATER PITTSBURGH COMMUNITY FOOD BANK

Employer identification number  
25-1420599

Part I	Questions Regarding Compensation		Yes	No
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. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>			
b	If any of the boxes in 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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
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. <div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>			
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?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) 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?	5a	Yes	
b	Any related organization?	5b		No
	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?	6a		No
b	Any related organization?	6b		No
	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.	7	Yes	
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.	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

**Part II** **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 LISA SCALES, CHIEF EXECUTIVE OFFICER	(i)	128,647	15,600	413	12,455	8,526	165,641	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 3	THE BOARD CHAIR, BOARD VICE CHAIR AND A MEMBER OF THE BOARD MEET ANNULLY TO EVALUATE THE CEO OF THE ORGAINIZATION AND TO REVIEW THE COMPENSATION PACKAGE TO ASSIST THE COMMITTEE, SALARY RANGES AND DATA FROM OTHER COMPARABLE FOOD BANKS THROUGHTOUT THE FEEDING AMERICA NETWORK AS WELL AS FROM WITHIN THE REGION'S HUMAN SERVICES NON-PROFIT COMMUNITY ARE UTILIZED UPON EVALUATION AND DELIBERATION OF THIS INFORMATION THE COMMITTEE ADVANCES THEIR RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE BOARD FOR APPROVAL
PART I, LINE 5	THE CEO RECEIVED A BONUS OF \$15,600 BASED ON ACHIEVED STRATEGIC OBJECTIVES (1) REVENUE AND AWARENESS, AND (2) ORGANIZATIONAL STRATEGIES AND OBJECTIVES
PART I, LINE 7	THE FOLLOWING INDIVIDUALS RECEIVED A NON-FIXED BONUS CFO - \$1,864 CHIEF DEVELOPMENT OFFICER - \$1,700

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
▶ Attach to Form 990.  
▶Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
GREATER PITTSBURGH COMMUNITY FOOD BANK

Employer identification number  
25-1420599

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	14	120,386	FAIR MARKET VALUE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .	X		25,117,705	AVG WHOLESALE VALUE
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( AUCTION ITEMS )	X	11	0	N/A
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .

2

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

30a

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

32a

No

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II



Part II

Supplemental Information.

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

Return Reference	Explanation
PART I, COLUMN (B)	THE ORGANIZATION CALCULATES DONATED FOOD ON A MEASUREMENT OF WEIGHT DURING THE FISCAL YEAR, THE ORGANIZATION RECEIVED APPROXIMATELY 19,197,215 POUNDS OF VARIOUS FOOD ITEMS

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](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization GREATER PITTSBURGH COMMUNITY FOOD BANK	Employer identification number 25-1420599
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Return Reference	Explanation
FORM 990, PART III, LINE 4A	<p>THROUGH THE REGULAR FOOD DISTRIBUTION PROGRAM, THE FOOD BANK ACCEPTS GOVERNMENT COMMODITIES, PRODUCE, FOOD AND NON FOOD GROCERY PRODUCTS DONATED BY BOTH NATIONAL AND LOCAL FOOD MANUFACTURERS AND DISTRIBUTORS, AS WELL AS CONCERNED COMMUNITY INDIVIDUALS WHO CONDUCT LOCAL FOOD DRIVES. IN ADDITION TO THE GOVERNMENT COMMODITIES AND DONATED PRODUCT, THE FOOD BANK PURCHASED 29 PERCENT OF THE FOOD IT DISTRIBUTED IN FY 2014-15. ADDITIONALLY, AGENCIES HAVE THE OPTION TO PURCHASE PRODUCTS FROM THE FOOD BANK'S WHOLESALE BUYING PROGRAM. THROUGH THE EFFORTS OF THE FOOD BANK'S OPERATIONS, APPROXIMATELY 26,778,000 POUNDS OF GROCERY PRODUCTS WERE DISTRIBUTED TO LOW-INCOME INDIVIDUALS AND FAMILIES THROUGH ITS NETWORK OF MORE THAN 400 AGENCIES DURING FY 2014-15. MORE THAN 11,320,478 POUNDS OF THAT PRODUCT WAS DISTRIBUTED IN OUR REGIONAL AREA OUTSIDE OF ALLEGHENY COUNTY. OUR SOURCING AND DISTRIBUTION PROGRAMS DEPARTMENT IS RESPONSIBLE FOR PROCUREMENT OF FOOD AND GROCERY ITEMS, AS WELL AS A NUMBER OF FOOD DISTRIBUTION PROGRAMS. KEY PROGRAMS ARE LISTED BELOW: PRODUCE TO PEOPLE, ESTABLISHED IN 2006 TO MOVE PRODUCE, PERISHABLE FOOD, AND OCCASIONALLY OVERSTOCKED ITEMS OFF THE WAREHOUSE SHELVES BEFORE THEY GO TO WASTE AND DISTRIBUTE THEM DIRECTLY TO PEOPLE IN NEIGHBORHOODS OF HIGH NEED. THIS PROGRAM ALSO HELPS TO CLOSE THE GAP IN AREAS WHERE PANTRIES MAY HAVE LIMITED STORAGE AND DISTRIBUTION CAPABILITIES. THE FOOD BANK DISTRIBUTED 3,472,447 POUNDS AT 17 SITES IN EIGHT COUNTIES IN FY 2014-15. DROP N GO, PILOT REVISION OF PRODUCE TO PEOPLE, BUT ONE IN WHICH OUR MEMBER AGENCIES RECEIVE A MONTHLY DROP OF FRESH PRODUCE AND OTHER GROCERY ITEMS, AND OUR MEMBER AGENCIES, RATHER THAN FOOD BANK VOLUNTEERS AND STAFF, DISTRIBUTE THE PRODUCT. IN FY 2014-15, 52,706 POUNDS WERE DISTRIBUTED VIA DROP N GO. THE COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP), USDA PROGRAM BENEFITING AT-NEED SENIORS. IN FY 2014-15, CSFP DISTRIBUTED SENIOR BOXES TO APPROXIMATELY 6,069 SENIOR CITIZENS EACH MONTH IN ALLEGHENY, ARMSTRONG, BEAVER, GREENE, LAWRENCE AND SOMERSET COUNTIES. MEALS FOR MINDS, SCHOOL-BASED PANTRY FUNDED BY TARGET, WHICH FOCUSES ON PROVIDING HEALTHY FOOD TO ALL STUDENTS IN LOW-INCOME SCHOOLS. IN FY 2014-15, MEALS FOR MINDS DISTRIBUTED MORE THAN 36,000 LBS. OF FOOD TO CHILDREN AT WOOLSLAIR ELEMENTARY IN PITTSBURGH. THE COMMUNITY TABLE PROGRAM (CT) CONNECTS RESTAURANTS, CATERERS AND OTHER FOOD SERVICES WITH ON-SITE FEEDING AGENCIES IN THEIR AREA AND ESTABLISHES THE DONATION OF SCHEDULED PREPARED MEALS. IN 2014-15, 158,876 MEALS WERE DISTRIBUTED THROUGH COMMUNITY TABLE. THE RETAIL STORE DONATION PROGRAM, ONGOING DONATION PROGRAM WHICH INCLUDES 170 RETAIL STORES. UNSOLD FOOD PRODUCTS AS WELL AS MEAT THAT HAS BEEN FROZEN BEFORE ITS 'BEST IF USED BY' DATE IS PICKED UP, RETURNED, INSPECTED AND REDISTRIBUTED TO OUR NETWORK OF MORE THAN 400 AGENCIES. SINCE ITS INCEPTION IN 2008, A TOTAL OF 19,377,483 POUNDS OF FOOD HAS BEEN DONATED BY OUR RETAIL STORES, 4,998,873 POUNDS WERE DONATED IN FY 2014-15. LOCAL FARM DONATIONS, LOCAL FARMS DONATE EXCESS AND SECONDS TO THE FOOD BANK THROUGHOUT THE GROWING SEASON THROUGH ON-FARM PICK-UPS, OR BY DONATING AT THE END OF A FARMERS' MARKET DIRECTLY TO A MEMBER AGENCY THROUGH THE FARMERS' MARKET CONNECTION PROGRAM. ADDITIONALLY, WHEN FARMERS HAVE FINISHED THEIR HARVESTING, THE GLEANING PROGRAM ORGANIZES VOLUNTEERS TO HARVEST THE EXCESS. LARGE SCALE GROWERS ALSO PICK AND PACK PRODUCE FOR DONATION TO THE FOOD BANK AND THE GROWER IS REIMBURSED FOR COSTS ASSOCIATED WITH THE DONATION. MORE THAN 650,000 POUNDS OF FRESH PRODUCE CAME TO THE FOOD BANK IN FY 2014-15 THROUGH THESE FARMING CONNECTIONS. PRODUCE PROGRAM. IN ADDITION TO OUR LOCAL FARM DONORS, THE FOOD BANK WORKS WITH PRODUCE DISTRIBUTORS, WHOLESALERS, OTHER FOOD BANKS AND PRODUCE BROKERS AT THE LOCAL, REGIONAL AND NATIONAL LEVEL TO PROCURE PRODUCE DONATIONS. THE FOOD BANK OCCASIONALLY INCURS COSTS ASSOCIATED WITH THESE DONATIONS. MORE THAN SIX MILLION POUNDS OF FRESH PRODUCE MOVED THROUGH THE FOOD BANK IN FY 2014-15. COMMUNITY HARVEST PROGRAM ENCOURAGES BACKYARD GARDENERS TO GROW PRODUCE SPECIFICALLY FOR DONATION AND TO DONATE THEIR EXCESS FRESH PRODUCE DIRECTLY TO MEMBER AGENCIES.</p>

Return Reference	Explanation
FORM 990, PART III, LINE 4B	<p>REPACK AND VOLUNTEER PROGRAM WORKS IN PARTNERSHIP WITH HUNDREDS OF LOCAL CORPORATIONS, FARMS, CHURCHES, SCHOOLS, INDIVIDUALS AND CIVIC ORGANIZATIONS TO SUPPORT DAILY CLERICAL AND REPACK OPERATIONS AT THE WAREHOUSE, AS WELL AS STAFFING MAJOR EVENTS, THIRD PARTY FOOD/FUND DRIVES, COMMUNITY FOOD DISTRIBUTIONS AND HARVESTING FRESH FOOD FROM LOCAL FARMS. THE FOOD BANK ENGAGES VOLUNTEERS FROM ALL SECTORS OF THE COMMUNITY INCLUDING CORPORATIONS, SCHOOL GROUPS, CHURCH GROUPS AS WELL AS THE PRIVATE SECTOR. OUR REPACK CENTER, WHICH IS LOCATED IN OUR FACILITY, MAKES A VARIETY OF PRODUCTS CONSUMER FRIENDLY SO THAT WE MAY DISTRIBUTE THEM TO OUR MEMBER NETWORK WHO THEN CAN DISTRIBUTE THEM TO THE FAMILIES THAT THEY SERVICE. THE REPACK CENTER HANDLES MORE THAN 450,000 POUNDS OF GROCERY PRODUCT EACH MONTH. FOOD IS DISTRIBUTED TO PEOPLE IN NEED, WHILE AT THE SAME TIME DIVERSE POPULATIONS ARE BROUGHT TOGETHER, EMPHASIZING THE IMPORTANCE AND RELEVANCE OF COMMUNITY SERVICE. THROUGHOUT FY 2014-15, 10,232 INDIVIDUALS VOLUNTEERED 54,232 HOURS TO SUPPORT THE FOOD BANK'S MISSION. THESE HOURS CONTRIBUTED ARE THE EQUIVALENT OF 26 FULL TIME EMPLOYEES. COMMUNITY OUTREACH AND EDUCATION FOCUSED ON CONNECTING THE PUBLIC TO THE MISSION OF THE FOOD BANK AND BRINGING ATTENTION TO ISSUES OF HUNGER AND POVERTY, WHILE EMPHASIZING THE VALUE OF COMMUNITY SERVICE. OUR OUTREACH AND EDUCATION PROGRAMS INCLUDE ADVOCACY. THE FOOD BANK USES VARIOUS STRATEGIES TO MOBILIZE THE PUBLIC TO SPEAK OUT ABOUT THE IMPACT OF HUNGER ON INDIVIDUALS AND FAMILIES AND TO ENCOURAGE ELECTED OFFICIALS TO SUPPORT PUBLIC POLICIES THAT STRENGTHEN AND PROTECT IMPORTANT NUTRITION ASSISTANCE PROGRAMS. THESE STRATEGIES INCLUDE THE USE OF SOCIAL MEDIA, SENDING ACTION ALERT EMAILS, ENCOURAGING INDIVIDUALS TO MEET IN PERSON WITH THEIR ELECTED OFFICIALS AND/OR STAFF, CALL-IN DAYS AND LETTER WRITING CAMPAIGNS. MARKETING AND COMMUNICATIONS RESPONSIBLE FOR UNDERSTANDING THE AUDIENCES WITH WHOM THE FOOD BANK IS COMMUNICATING, CREATING RELEVANT AND COMPELLING MESSAGING THOSE GROUPS FIND VALUABLE AND DELIVERING THAT MESSAGING THROUGH A VARIETY OF COMMUNICATIONS CHANNELS. EDUCATION STAFF, BOARD MEMBERS AND VOLUNTEERS ENGAGE MEMBERS OF COMMUNITY GROUPS, SCHOOLS AND UNIVERSITIES, CONGREGATIONS, BUSINESSES AND OTHER AFFILIATIONS IN ACTIVITIES THAT RAISE AWARENESS ABOUT FOOD BANK'S MISSION TO FEED PEOPLE IN NEED AND MOBILIZE THE COMMUNITY TO ELIMINATE HUNGER.</p>

Return Reference	Explanation	
FORM 990, PART III, LINE 4C	<p>NETWORK DEVELOPMENT/OUTREACH PROGRAM - THE OUTREACH TO OUR NETWORK OF FOOD ASSISTANCE PROGRAMS FOCUSES ON PROVIDING QUALITY PRODUCT, SERVICE AND EQUAL ACCESS TO FOOD ASSISTANCE TO ELIGIBLE PEOPLE IN NEED WITHIN OUR 11-COUNTY SERVICE AREA. IN ADDITION TO THE OUTREACH EFFORTS, THE NETWORK DEVELOPMENT TEAM IS CHARGED WITH THE DEVELOPMENT AND MAINTENANCE OF THE FOOD BANK'S RELATIONSHIP NETWORK OF MORE THAN 400 AGENCIES THAT SERVE AS EMERGENCY OR REGULAR FOOD DISTRIBUTION CENTERS, AFTER SCHOOL PROGRAM SITES AND ON-SITE FEEDING PROGRAMS. THIS TEAM MONITORS AGENCIES FOR COMPLIANCE WITH CLIENT INCOME GUIDELINES, SAFE FOOD HANDLING, FACILITY STORAGE AND SAFETY, PARTICIPATORY REQUIREMENTS FOR FEDERALLY-FUNDED MEAL AND SNACK PROGRAMS, ORDERING AND DISTRIBUTING FOOD AND REPORTING REQUIREMENTS. THE FOOD BANK ALSO SECURES GRANTS TO HELP MEMBER AGENCIES OBTAIN OR UPGRADE EQUIPMENT LIKE REFRIGERATORS, SHELVING, COMPUTERS AND PRINTERS. WE BUILD THE CAPACITY OF MEMBER AGENCIES BY PROVIDING TRAININGS, WORKSHOPS, AN ANNUAL PROFESSIONAL DEVELOPMENT CONFERENCE, AND INFORMATION ABOUT ADDITIONAL COMMUNITY RESOURCES THAT MAY PROVIDE ASSISTANCE TO THE CLIENTS THEY SERVE. THE NETWORK DEVELOPMENT TEAM WORKS TO STRENGTHEN AND BETTER USE OUR ESTABLISHED PARTNER DISTRIBUTION ORGANIZATIONS (PDOS) AND REDISTRIBUTION ORGANIZATIONS (RDOS) IN BOTH THE URBAN AND 10 RURAL COUNTIES OF OUR SERVICE AREA. THE PDOS AND RDOS INCLUDE SMALLER FOOD BANKS AND PROGRAMS LOCATED IN ALLEGHENY, WASHINGTON AND GREENE COUNTIES, THE COMMUNITY ACTION AGENCIES IN ARMSTRONG, FAYETTE AND INDIANA COUNTIES, A SALVATION ARMY BRANCH IN BEAVER COUNTY AND A SMALL FOOD BANK IN CAMBRIA COUNTY THAT SERVES CAMBRIA AND SOMERSET COUNTIES. WE HELP EACH PARTNER BUILD ITS OWN CAPACITY BY PROVIDING TECHNICAL ASSISTANCE, ACCESS TO RESOURCES AND TRAINING MODELS FOR STAFF/VOLUNTEERS ON:</p> <ul style="list-style-type: none"><li>-ESTABLISHING AND OPERATING AN EFFICIENT FOOD DISTRIBUTION SYSTEM</li><li>-MANAGING REQUIRED CLIENT AND INCOME DOCUMENTATION PAPERWORK</li><li>-RECRUITING AND RETAINING VOLUNTEERS</li><li>-IMPROVING INFRASTRUCTURE</li><li>-BOARD DEVELOPMENT</li><li>-BUILDING A DONOR BASE THROUGH DIRECT MAIL AND OTHER FUNDRAISING ACTIVITIES BY LEADING A COMPREHENSIVE, EFFECTIVE, AND COMMUNITY-DRIVEN EFFORT</li></ul> <p>THE FOOD BANK WILL ACHIEVE NOT ONLY ITS STATED ORGANIZATIONAL OBJECTIVES, BUT WILL ALSO HELP PROVIDE STABILITY OF OUR NEIGHBORHOODS AND THE LONG-TERM WELL-BEING OF COMMUNITIES. THE FOOD BANK WILL BE BETTER POSITIONED TO TARGET RESOURCES WHERE THEY WILL BE MOST EFFECTIVE AND HAVE AN ESTABLISHED NETWORK OF COMMUNITY ADVOCATES AND ACTIVISTS FOCUSED ON ELIMINATING HUNGER IN OUR REGION. UNDER THE NETWORK OUTREACH PROGRAM, THE NUTRITION EDUCATION DEPARTMENT PREVENTS WASTING EFFORT, MONEY AND PRODUCT BY DEFTLY MATCHING FOOD WITH PEOPLE, PROVIDING RECIPES, AND CONDUCTING COOKING DEMONSTRATIONS AT AGENCIES AND COMMUNITY PARTNERS SERVING LOW-INCOME POPULATIONS. THE NUTRITION EDUCATION PROGRAMS INCLUDE:</p> <ul style="list-style-type: none"><li>CHOOSING HEALTHY OPTIONS PROGRAM (CHOP) - PROMOTES THE ACQUISITION, DISTRIBUTION, AND CONSUMPTION OF HEALTHIER FOOD. THE PROGRAM WAS DEVELOPED TO INCREASE THE PERCENTAGE OF HEALTHY FOODS AVAILABLE ON THE FOOD BANK'S INVENTORY AND TO EDUCATE FOOD BANK, AGENCY, AND PARTNER DISTRIBUTION ORGANIZATION STAFF, VOLUNTEERS, AND EMERGENCY FOOD RECIPIENTS ON THE NUTRITIONAL QUALITY OF DIFFERENT FOODS AND CHOOSING A HEALTHY DIET. ALSO, IT HELPS INCREASE CONSUMPTION OF HEALTHIER FOOD AMONG NUTRITIONALLY AT-RISK EMERGENCY FOOD RECIPIENTS. CHOP INCLUDES A FOOD RANKING SYSTEM THAT IDENTIFIES THE HEALTHIEST FOOD CHOICES ON THE INVENTORY AND IS USED AS A TEACHING TOOL FOR THE ACQUISITION OF HEALTHIER FOODS BY FOOD SOURCING STAFF AT THE FOOD BANK AND AGENCY STAFF WHO ARE RESPONSIBLE FOR ORDERING FOOD FOR DISTRIBUTION IN THE COMMUNITY. THE CHOP SYSTEM HAS BEEN ADOPTED BY SEVERAL OTHER FOOD BANKS IN THE FEEDING AMERICA NETWORK.</li><li>KIDS COOK (KC) - PROVIDES HANDS ON COOKING AND NUTRITION EDUCATION CLASSES TO CHILDREN IN SCHOOLS, AFTER SCHOOL PROGRAMS, AND SUMMER DAY CAMPS IN OUR REGION. THESE CLASSES FOCUS ON AREAS WHERE A HIGH PERCENTAGE OF STUDENTS QUALIFY FOR FREE OR REDUCED LUNCH. DURING FY 2014-2015, THE DEPARTMENT UPDATED THE CURRICULUM TO FOCUS ON MY PLATE FOOD GROUPS AND EXPANDED THE STRUCTURE TO A SIX-PART CLASS. KC LED 129 KIDS COOK SESSIONS, REACHING 1,288 STUDENTS.</li></ul> <p>THE COOKING, ACTIVITY, AND NUTRITION (CAN) NEWSLETTER DISTRIBUTED TO EVERY PANTRY CLIENT IN ALLEGHENY COUNTY AND PANTRY CLIENTS IN OUR REGIONAL COUNTIES. WITH AN AVERAGE CIRCULATION OF MORE THAN 25,000 COPIES, THIS IS THE PRIMARY METHOD BY WHICH WE PROVIDE NUTRITION EDUCATION TO OUR CLIENTELE. EACH ISSUE PROVIDES NUTRITION/COOKING TIPS, RECIPES USING OUR AVAILABLE INVENTORY, AND TIPS FOR LEADING AN ACTIVE LIFESTYLE OR CONNECTING WITH OTHER AVAILABLE RESOURCES SUCH AS PRODUCE TO PEOPLE. RECIPE CARDS PROVIDE OUR CLIENTELE WITH SPECIFIC COOKING TIPS AND RECIPE ADVICE. THE FULL-COLOR PHOTOGRAPHS PROVIDE CLIENTS WITH HOW-TO COOKING TIPS AND A GLIMPSE AT WHAT A RECIPE SHOULD LOOK LIKE AT VARIOUS STAGES. THIS PACKAGES A DEMONSTRATION</p>	

Return Reference	Explanation	
	FORM 990, PART III, LINE 4C	<p>RATION AND A CLASS INTO A FORMAT THAT CLIENTS CAN FOLLOW ALONG WITH IN THEIR OWN KITCHENS AND MAKES IT EASIER FOR SOMEONE TO USE AN UNFAMILIAR INGREDIENT THE PHOTOGRAPHS MAKE THE RECIPES MORE ACCESSIBLE TO PEOPLE WITH LOW ENGLISH LITERACY SKILLS DURING FY 2014-2015, WE DISTRIBUTED MORE THAN 290,000 CARDS FEATURING 30 DIFFERENT RECIPES LITERATURE FOR SENIOR CITIZENS DESIGNED FOR SENIOR CITIZENS RECEIVING ASSISTANCE THROUGH THE CSFP PERSONS RECEIVING CSFP BOXES GET A BALANCED VARIETY OF NUTRITIOUS FOOD SOME OF THE ITEMS MAY BE UNFAMILIAR TO RECIPIENTS OR PERSONS MAY BE STRUGGLING WITH ISSUES RELATED TO COOKING FOR A HOUSEHOLD THAT HAS BEEN REDUCED TO ONE OR TWO PERSONS NUTRITION LITERATURE INCLUDED IN CSFP BOXES ADDRESS THESE CONCERNS AND GIVES RECIPIENTS RECIPES TO HELP THEM INTERPRET THE INGREDIENTS THEY RECEIVE INTO TASTY, HEALTHFUL MEALS FOOD SAFETY FOR FOOD PANTRIES WE RELY ON A NETWORK OF MORE THAN 400 AGENCIES TO DISTRIBUTE GROCERIES TO PEOPLE IN NEED IN ORDER TO MITIGATE RISK ASSOCIATED WITH THIS VOLUNTEER-DRIVEN FOOD DISTRIBUTION NETWORK, WE PROVIDE TRAINING TO ALL PANTRIES THAT DISTRIBUTE GROCERIES DIRECTLY TO CONSUMERS THESE CLASSES SPECIFICALLY ADDRESS ISSUES RELATED TO AVOIDING TIME/TEMPERATURE ABUSE AND CROSS-CONTAMINATION THEY ADDRESS A NEED FOR FOOD SAFETY TRAINING THAT SPEAKS TO WHAT OUR PANTRIES EXPERIENCE AND IS GEARED TOWARD EFFECTIVE DISTRIBUTION OF GROCERIES AGENCIES PREPARING OR SERVING FOOD TO CLIENTS RECEIVE RESTAURANT-LEVEL CERTIFICATION IN SAFE PREPARATION TECHNIQUES AN ONLINE FORMAT FOR THESE CLASSES WAS LAUNCHED IN APRIL DURING THE COURSE OF FY 2014-2015, 247 PEOPLE PARTICIPATED IN THE TRAINING, THE MAJORITY OF THEM ATTENDING IN-PERSON CLASSES</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	<p>THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE, DURING THE INTERVALS BETWEEN MEETINGS OF THE BOARD OF DIRECTORS, ALL OF THE POWERS OF THE BOARD OF DIRECTORS EXCEPT THAT THE EXCEUTIVE COMMITTEE SHALL NOT HAVE THE POWER TO AMEND OR REPEAL THE THE BY LAWS OR TO ADOPT NEW BY LAWS, TO FILL VACANCIES IN, CHANGE THE NUMBER OF, OR REMOVE MEMBERS OF THE BOARD OF DIRECTORS, OR TO DISSOLVE, REMOVE MEMBERS OR CHANGE THE NUMBER OF MEMBERS OF, THE EXECUTIVE COMMITTEE, OR TO AMEND OR REPEAL ANY RESOLUTION OF THE BOARD OF DIRECTORS WHICH BY ITS TERMS SHALL NOT BE AMENDABLE OR REPEALABLE. IT SHALL BE THE DUTY OF THE EXECUTIVE COMMITTEE TO SUPERVISE THE OPERATIONS OF THE FOOD BANK BETWEEN MEETINGS OF THE BOARD THE EXECUTIVE COMMITTEE SHALL ANNUALLY REVIEW, USING COMPARATIVE DATA, AND APPROVE COMPENSATION FOR THE PRESIDENT, THE OFFICERS AND THE KEY EMPLOYEES OF THE FOOD BANK ANY ACTIONS OF THE EXECUTIVE COMMITTEE SHALL BE RATIFIED BY THE BOARD OF DIRECTORS AT IT MEETING NEXT FOLLOWING THE ACTION</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE BY LAWS WERE AMENDED TO CREATE A BROAD FRAMEWORK FOR GOVERNANCE OF THE FOOD BANK. THE CHANGES CLARIFIED TERM LENGTHS FOR DIRECTORS, OFFICERS, AND MEMBERS OF THE EXECUTIVE COMMITTEE.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	PRIOR TO THE FORM 990 BEING FILED, IT WILL BE REVIEWED BY THE FOOD BANK'S AUDIT COMMITTEE. THE AUDIT COMMITTEE WILL IN TURN PROVIDE A COPY OF THE COMPLETED FORM 990 TO EACH MEMBER OF THE BOARD OF DIRECTORS BEFORE IT IS FILED



Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS, OFFICERS, AND KEY EMPLOYEES ARE SUBJECT TO THE FOOD BANK'S CONFLICT OF INTEREST POLICY IN ACCORDANCE WITH THE POLICY THESE INDIVIDUALS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT EACH FISCAL YEAR IN ADDITION, UPON BEGINNING THEIR TERM, EACH NEW BOARD MEMBER IS REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT THE CEO'S ASSISTANT TRACKS THE RECEIPT OF THE STATEMENTS AND SUBMITS THE STATEMENTS TO THE AUDIT COMMITTEE FOR THEIR REVIEW UPON REVIEW OF THE STATEMENTS, ANY ACTUAL OR POTENTIAL CONFLICTS ARE BROUGHT TO THE ATTENTION OF THE BOARD CHAIR PROCEDURES FOR ADDRESSING CONFLICTS OF INTEREST ARE OUTLINED IN THE POLICY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE CHAIR, VICE CHAIR, AND A MEMBER OF THE BOARD MEET ANNUALLY TO EVALUATE THE CEO OF THE ORGANIZATION TO ASSIST THE COMMITTEE SALARY RANGES AND DATA FROM OTHER COMPARABLE FOOD BANKS THROUGHOUT THE FEEDING AMERICA NETWORK AS WELL AS FROM WITHIN THE REGION'S HUMAN SERVICES NON-PROFIT COMMUNITY (STUDY PROVIDED BY THE UNITED WAY AND THE BAYER CENTER FOR NON-PROFIT MANAGEMENT) ARE UTILIZED UPON EVALUATION AND DELIBERATION OF THIS INFORMATION THE COMMITTEE ADVANCES THEIR RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE BOARD FOR APPROVAL

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE FOOD BANK'S ANNUAL WRITTEN REPORT CONTAINS A SUMMARY OF THE MOST RECENT AUDITED FINANCIAL POSITION. CONFLICT OF INTEREST AND OTHER GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED BY AN INDEPENDENT ACCOUNTING FIRM. THE PROCESS INVOLVING OVERSIGHT OF THE AUDIT OF THE ORGANIZATION'S FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEAR.