COMMITTEE ON NATURAL RESOURCES

Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

Creating Jobs by Overcoming Man-Made Drought: Time for Congress to Listen and Act Monday, April 11, 2011

For Witnesses Representing Organizations:

1. Name:

Dayatra A. Latin

- 2. Name of Organization(s) You are Representing at the Hearing: Community Food Bank
- 3. Business Address:

3403 E. Central Ave. Fresno, CA 93725

4. Business Email Address:

[Information redacted for privacy]

5. Business Phone Number:

559-237-3663 [Information redacted for privacy]

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

I do not hold formal degrees on the subject matter of hunger. However, I have received several years of educational training in the field of Organizational Behavior, which help me to perform my duties at Community Food Bank.

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

I am affiliated with Feeding America, Roots of Change as a past Hunger Fellow and Fresno Food System Alliance.

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

I have work with Community Food Bank since December of 2001. The past 9 years have provided me with first hand knowledge of various issues surrounding hunger in Fresno, Madera and Kings Counties. I have heard countless personal stories of from moms, dads, seniors, teenagers and so many about their obstacles to having enough food. Our frontline experiences at Community Food Bank have led us to create and implement several programs to make sure that less people are going to sleep hungry in the Central Valley.

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

None

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

None

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

In the 2007-2008 year, Community Food Bank distributed approximately 7 million pounds of food. In the spring of 2008, we began increasing the volume of our food distribution in response to the noticeable increase in the number of people requiring our services. That year- we distributed approximately 14 million pounds of food. In the 2009-2010 year, we distributed 30 million pounds of food. We are on pace to increase the amount of food distribution in 2010-2011. Community Food Bank estimates there are approximately 285,000 people in the area it serves that are "food insecure", which means they do not have a reliable source of food and they are therefore uncertain how the will obtain their next meal. The majority of the increasing need for food assistance is

occurring in the western region of Fresno County. In 2009 Community experienced an approximate increase of 200% in food distributions, compared to the last year, in the numbers of hungry individuals and families seeking food. That 200% does not include the food distribution that we took on under Executive Order S-11-09 that was in effect between July 2009 and October 2009, as well as the December 2009 renewed executive order. Before July 2009 Community food bank historically distributed between 300,000 and 500,000 pounds of food each month. Starting in July 2009 we began consistently distributing an average of 2.5 million pounds of food each month. In December 2009, we increased to 3 million pounds of food each month in our efforts to respond to the increase demand of people requiring our services. Behind all these numbers and statistics are real people who want the most basic human essential – food.

<u>In addition, for witnesses representing organizations:</u>

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

None

h. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

I am not aware of any.

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

I am not aware of any.

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

We have not received foreign donations.

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Please see attached documents

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 black lung benefit trust or private foundation)

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

2009 Open to Public Inspection

A F	or the	2009 ca	endar year, or tax year beginning JUL 1, 2009	and ending	JUN 30, 2010	
B	heck if pplicable	USE ING	C Name of organization FOOD OPPORTUNITIES ORGANIZATION	&	D Employer identifi	cation number
	Addres change	print or	DISTRIBUTION INC.			200054
-	Name change Initial		Doing Business As			320851
	return Termin- ated	Instruc-	Number and street (or P.O. box if mail is not delivered to street at 3403 E CENTRAL AVE	dress) Room/su		237 3663
L	Amend	ed tions.	City or town, state or country, and ZIP + 4		G Gross receipts \$	34,922,219.
	Applica tion pendin		FRESNO, CA 93725		H(a) Is this a group re	
		F Nar	ne and address of principal officer:ANDY SOUZA		for affiliates?	Yes X No
-			E AS C ABOVE	Tracket	H(b) Are all affiliates inc	
			us: X 501(c) (3)	527		list. (see instructions)
			n: X Corporation Trust Association Other	h liv	H(c) Group exemption	
		Summ		ILY	ear of formation: 1992 N	M State of legal domicile: CA
			scribe the organization's mission or most significant activities:	OT COD TRIE	שית חיים שים	E HINCOV IN
Governance		FRESN	O, MADERA & KINGS COUNTY	- 20		
ern			s box F if the organization discontinued its operations			
300			f voting members of the governing body (Part VI, line 1a)			17
~			if independent voting members of the governing body (Part VI,			17
ties			ber of employees (Part V, line 2a)		5	36
Activities &	6	Total num	ber of volunteers (estimate if necessary)		6	0.
Ac			s unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrel	ated business taxable income from Form 990-T, line 34			
			and the same of th		Prior Year 20,145,189.	Current Year 33,171,440.
ne			ions and grants (Part VIII, line 1h)		632,239.	
Revenue			service revenue (Part VIII, line 2g)			
Re			nt income (Part VIII, column (A), lines 3, 4, and 7d)		6,781. 1,023,095.	
			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		21,807,304.	34,922,219.
-			enue - add lines 8 through 11 (must equal Part VIII, column (A), li		21,007,304.	34,322,213.
			d similar amounts paid (Part IX, column (A), lines 1-3) paid to or for members (Part IX, column (A), line 4)			
			other compensation, employee benefits (Part IX, column (A), line		1,076,142.	1,676,115.
Expenses					1,0,0,1111	1,0,0,1110.
ben	h	Total fund	nal fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25)	89.341.		
X			penses (Part IX, column (A), lines 11a-11d, 11f-24f)		20,836,826.	31,765,566.
			enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		21,912,968.	33,441,681.
			less expenses. Subtract line 18 from line 12		<105,664.	> 1,480,538.
Or		1010/100	and of particles of the particle of the partic		Beginning of Current Year	End of Year
ets	20	Total ass	ets (Part X, line 16)		3,185,301.	5,038,706.
Ass	21		lities (Part X, line 26)) ** (*********************************	156,556.	529,423.
Net Assets or Fund Balances	22		s or fund balances, Subtract line 21 from line 20		3,028,745.	4,509,283.
Pa	art II		ture Block			
		Under pena	ities of perjury, I declare that I have examined this return, including accompanying s etc. Declaration of preparer (other than officer) is based on all information of which pro-	chedules and stateme	nts, and to the best of my knowled	dge and belief, it is true, correct,
		anja dompi	no. Debut that of property faring that officer has been all in interpreted of the	sparer may any minorin	Mgu	
Sig	n	N				
Her	e	Sign	nature of officer		Date	
	7.5		IDY SOUZA, CEO			
		Тур	e or print name and title			
Pai	d	Preparer'	s	Date	Check if Prepa	rer's identifying number ostructions)
	parer's	signature			employed >	
10 y 10 10	Only	Firm's nam yours if	BAMPSON & BAMPSON , CFA 5,	A PROF	CORP EIN >	
200	~1	self-employ address, ar	de la maria de la constanta de			Burga kan da ku
_		ZIP + 4	CLOVIS, CA 93612		Phone no. ► (559)291-0277
Ma	y the IF	RS discus	s this return with the preparer shown above? (see instructions)	**************		X Yes No

Form 990 (2009) DISTRIBUTION INC.

Part III | Statement of Program Service Accomplishments

77-0320851

Page 2

	DISTRIBU	e the organization's mission: JTE FOOD TO THE HUNC	GRY IN FRESNO, MADERA	AND KINGS COUNT	Υ.
	the prior Form		m services during the year which were not		Yes X No
3	Did the organiz		ficant changes in how it conducts, any pro	ogram services?	Yes X No
4	Describe the ex Section 501(c)(xempt purpose achievements for each (3) and 501(c)(4) organizations and sec	of the organization's three largest program tion 4947(a)(1) trusts are required to repor e, if any, for each program service reported	t the amount of grants and	
4a		ANIZATION CONDUCTS A	5988. including grants of \$ 1333 A PROGRAM WHICH PROVIDATIONS RESOURCES DEDICATIONS	DES FOOD PANTRIE	
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
			7		
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$	
				7	
4d	Other program	services. (Describe in Schedule O.)			
4e	(Expenses \$	including grants	of \$ (Revenue \$ 576,988.)	

Form 990 (2009) DISTRIBUTION INC.

Part IV Checklist of Required Schedules

Section 50 (Ic)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 50 (Ic)(4), 501c)(5), and 501c)(5), and 501c)(6) organizations. Is the organization subject to the section 6033(9) notice and reporting requirement and proxy tark? If "Yes," complete Schedule C, Part II bit the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II bit the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II bit the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV bit the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV bit the organization and the second organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV loid the organization answer to any of the following questions "Yes"? If so, complete Schedule D, Part VI, VIII, IX, or X as applicable bit the organization report an amount for lend, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII. bit the organization report an amount for investments - other securities 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. bit the organization report an amount for other kiabilities 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 X II. bit the organization siability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X II. bit the organization sach and a separate, independent audited firancial statements for				Yes	No
2 Is the organization required to complete Schedule D, Schedule of Contributors? 2 Is the organization engage in ciract or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization is the organization subject to the section 603(e) notice and reporting requirement and proxy tax If "Yes," complete Schedule C, Part II Section 501(c)(4), 601(c)(5), and 501(c)(6) organizations is the organization subject to the section 603(e) notice and reporting requirement and proxy tax If "Yes," complete Schedule C, Part II Section 501(c) and areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negations reviews? If "Yes," complete Schedule D, Part II Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part IV Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part VI. 10 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 167 If "Yes," complete Schedule D, Part VII. 11 Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII. 12 Did the organization report an amount for other liabilities in Part X, line 17 Int a Schedule D, Part X. 13 Did the organization sachol de	1		1	x	
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4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 4 Section 501(c)(4), 501(c)(3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		х
5 Section 501(c)(4), 501(c)(5), and 501(c)(5) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts where 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 II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21; sarve as a custodian for amounts not listed in Part X; or provided credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization report an amount in Part X, line 21; sarve as a custodian for amounts not listed in Part X; or provided credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization sanswer to any of the following questions "Yes?" If so, complete Schedule D, Part IV 11 Is the organization is answer to any of the following questions "Yes?" If so, complete Schedule D, Part V, VII, VIII, VX, or X as applicable 11 Is described in Part X, line 167 If "Yes," complete Schedule D, Part VIII. 12 Did the organization report an amount for investments - other securities in Part X, line 107 If "Yes," complete Schedule D, Part VIII. 13 Did the organization report an amount for other assets in Part X, line 157 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X. 14 Did the organization is about the information is separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X. 15 Did the organization seport an amount for other assets in Part X, line 158 that is 5% or more of its total assets reported in Part X, l	4	Section 501(c)(3) organizations, Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
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the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Is the organization server to any of the following questions "Yes" If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Parts VI. Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for investments - other securities 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. Did the organization report an amount for other isabilities 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 X X Did the organization report an amount for other isabilities 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 X X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X X Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part II Did the organization report a Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located	7		7		Х
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11 St the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	9		Х
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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. 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. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. Did the organization included in consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII. 12 Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnts or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate g	•	그리고 하다 하는 큐스타일에 마른 아스테를 하는 아이들은 아이들은 아이들은 아이들은 아이들은 아이들은 아이들은 아이들은			
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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	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
The transfer of the first of th	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		Z	x
	20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	100		X

Form 990 (2009) DISTRIBUTION INC.

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		Yes	No
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	I = I	170
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	Ī	x
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	E	x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	1	x
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	-		1

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Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	And the second s		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable 1a 8			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1,5		
	filed for the calendar year ending with or within the year covered by this return 2a 36			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	За		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	E. I	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			100
	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	4a		X
,	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	30		
9	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	- 50		
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ou		-
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a	17.7	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	T	х
d	If "Yes," indicate the number of Forms 8282 filed during the year		110	
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	154	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	The S	X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings.			
9	at any time during the year?	8		_
	Sponsoring organizations maintaining donor advised funds.		100	
a	The state of the s	9a	100	-
10	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	9b		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		0.1	
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
-	Gross income from other sources (Do not net amounts due or paid to other sources against			
100	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	######################################	120		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			L

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Page 6

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

10	Enter the number of voting members of the accuration hadin	1.	1	17		Yes	No
b	Enter the number of voting members of the governing body	1a	_	17			
2	Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship						
-							х
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the			-iosimisis .	2		Δ
	of officers, directors or trustees, or key employees to a management company or other person?		Committee of the commit				х
4	Did the organization make any significant changes to its organizational documents since the prior Fo				3		X
5	Did the organization become aware during the year of a material diversion of the organization's asse				5	-	X
6					6		X
7a	Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members.				6		Λ
10	그들은 사람이 가는 바다 그들은 사람들이 되었다. 그리고 아이들은 사람들이 아이들은 아이들은 아이들은 아이들이 아이들이 아이들이 아이들이 아이				7-		x
h	governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other pe			mmnoo:	7a		X
8					7b	170	Λ
O	Did the organization contemporaneously document the meetings held or written actions undertaken	1 durir	ig the year				
	by the following:					v	
a	The governing body?				8a	X	-
	Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	ache	at the		3		**
200				песиона	9		X
sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Reven	ue Code.)				
40	Note that the state of the stat			1	la la	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	1111111111		nemoras.	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such	n chap	ters, affilial	tes,			
54					10b		37
11	Has the organization provided a copy of this Form 990 to all members of its governing body before	filing 1	he form?		-11		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	*********		eminoriin s	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that co to conflicts?				12b		x
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,	" describe				
	in Schedule O how this is done	9,127,1755			12c	X	
13	Does the organization have a written whistleblower policy?				13	16-7	X
14	Does the organization have a written document retention and destruction policy?				14		X
15	Did the process for determining compensation of the following persons include a review and approv						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
a	The organization's CEO, Executive Director, or top management official	eri cini			15a	X	
	Other officers or key employees of the organization				15b	X	
	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 arrange	ement	with a				
	taxable entity during the year?				16a		X
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate	its particip	ation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization			2			
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶CA						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (50	(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	confli	ct of interes	st policy, ar	nd fina	incial	
	statements available to the public.		1000	T-Small Mi			
00	State the name, physical address, and telephone number of the person who possesses the books a	and re	aarda of th	e organizat	ion:		
20							

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter 0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee.

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours	(c	(C) Position (check all that apply)					(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional bustee	Officer	Кеу етріоуее	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
MARK A. RILEY	1 1 1			İ				19.1	17	
CHAIRMAN	5.00	X		X	-			0.	0.	0.
ROBERT REYES VICE CHAIRMAN	F 00	w		x	K	5		0	0	0
WARREN AUWAE	5,00	Х		Λ				0.	0.	0.
DIRECTOR	5.00	х			Ш	0.		0.	0.	0.
DIANA MOCK	3.00					-		0.	0.	0.
DIRECTOR	5.00	x				Ų.		0.	0.	0.
DAVID L. SCHECTER					1					0.
SECRETARY	5.00	X	h. 1	X				0.	O.	0.
ROSA KAISER		11	1				1			
DIRECTOR	5.00	Х		1	14.9	1		0.	0.	0.
CHRISTINA CUSIMANO		-								
DIRECTOR	5.00	X						0.	0.	0.
LILY TANG		20								
DIRECTOR	5.00	X						0.	0.	0.
GARY R. SERRATO DIRECTOR	5.00	х			m			0	0	0
NAN MATHIAS	5.00	Λ	-					0.	0.	0.
DIRECTOR	5.00	x						0.	0.	0.
RANDY WOOD	3.00	Δ	-	-	H	-	-	0.	U.	0.
DIRECTOR	5.00	х						0.	0.	0.
DAN BARTELL									0.	
DIRECTOR	5.00	X						0.	0.	0.
JULIE OLSON-BUCHANAN										
DIRECTOR	5.00	X						0.	0.	0.
TINA DANIELS							11			
DIRECTOR	5.00	Х					8	0.	0.	0.
NICOLE PARRA		E								
DIRECTOR	5.00	X		ģ.		1.1.	71	0.	0.	0.
KEN WITTWER	F 00				115			1	2	1,5
SECRETARY	5.00	X		X				0.	0.	0.

Page 8

	(A) Name and title	(B) Average			(C Posi		í		(D) Reportable	(E) Reportable) ated	
		hours		heck	all t	hat	app	ly)	compensation from	compensation from related		amou	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)		from organiz and re organiz	the zation lated
-								4	4				
							4	F.			1		
						5							
1b	Total						•		0.		0.		0
2	Total number of individuals (including to compensation from the organization		hose	liste	ed al	bov	e) wh	no re	eceived more than \$10	0,000 in reportabl	е		
3	Did the organization list any former off line 1a? If "Yes," complete Schedule J		,						ighest compensated e	1127 145 151 1 1	Ī	3	s No
4	For any individual listed on line 1a, is the and related organizations greater than	ne sum of reportal \$150,000? If "Yes	ole c	omp omple	ensa ete S	ation	n and	d oth	ner compensation from or such individual	the organization		4	х
5	Did any person listed on line 1a receive the organization? If "Yes," complete So tion B. Independent Contractors				from	any	y uni	elate	ed organization for sen	vices rendered to		5	х
1	Complete this table for your five highes the organization. NONE	st compensated in	dep	ende	ent c	ont	racto	ors th	nat received more than	\$100,000 of com	pensa	ation from	n
	(A) Name and busin								(B) Description of	services	C	(C) ompensa	ation
								+			-		
								+					
								1					
2	Total number of independent contractor				_	_	_	_		110000000000000000000000000000000000000	_		

77-0320851 Page 9 Form 990 (2009) DISTRIBUTION INC. Part VIII | Statement of Revenue (D) Revenue excluded from (A) (B) (C) Related or Unrelated Total revenue exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns b Membership dues 1b c Fundraising events 10 d Related organizations 1d 13,317,381, e Government grants (contributions) 1e f All other contributions, gifts, grants, and 19,854,059 similar amounts not included above 17,782,299 Noncash contributions included in lines 1a-1f: \$ 33,171,440 h Total. Add lines 1a-1f Business Code 2 a SHARED MAINTENANCE FEE 900099 635,035. 635,035. Program Service Revenue f All other program service revenue 635,035. Total. Add lines 2a-2f Investment income (including dividends, interest, and 7,895. 7,895. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ _____ of contributions reported on line 1c). See 1,107,849 Part IV, line 18 a b Less: direct expenses b 1107849 1,107,849 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances _____a b Less: cost of goods sold _____ b c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a b d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. 34,922,219. 642,930. 1,107,849.

Form 990 (2009)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns, other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	222 222	22.224	70.000	
	trustees, and key employees	119,243.	92,831.	16,706.	9,706.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	1,447,058.	1,126,535.	202,733.	117,790.
7	Other salaries and wages Pension plan contributions (include section 401(k)	1,447,030.	1,120,555.	202,733.	117,750.
	and section 403(b) employer contributions)	33,987.	26,459.	4,762.	2,766.
9	Other employee benefits	75,827.	59,059.	10,652.	6,116.
10 11	Payroll taxes Fees for services (non-employees):	75,027	33,033.	10,0321	0,110.
а	Management		NO.		
b	Legal				
	Accounting	15,000.	11,678.	2,102.	1,220.
	Lobbying			-7	
e	Professional fundralsing services. See Part IV, line 17				
f	Investment management fees	20.00			
g	Other				
12	Advertising and promotion				
13	Office expenses	68,944.	53,674.	9,660.	5,610.
14	Information technology				
15	Royalties				
16	Occupancy	273,972.	213,292.	38,388.	22,292.
17	Travel	59,275.	46,147.	8,305.	4,823.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	100 010	155 051	05 000	-
22	Depreciation, depletion, and amortization	180,343.	155,074.	25,269.	0 105
23	Insurance	26,870.	20,919.	3,765.	2,186
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	VALUE OF DISTRIBUTED CO	28,580,945.	28,580,945.	1	
b	PURCHASED COMMODITIES	1,468,804.	1,468,804.		
c	CONTRACT SERVICES	292,352.	3,624.		288,728
d	SUPPLIES/MATERIALS	270,664.	255,504.	2,580.	12,580
е	FREIGHT	181,463.	181,463.		- LET AT A
f	All other expenses	346,934.	280,980.	50,430.	15,524
25	Total functional expenses. Add lines 1 through 24f	33,441,681.	32,576,988.	375,352.	489,341
26	Joint costs. Check here if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1 400 677	1	1,219,110.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	167,459.
	4	Accounts receivable, net		4	86,820.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
	1	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
2	7	Notes and loans receivable, net		7	
Assers	8	Inventories for sale or use	441,116.	8	616,348.
ζ.	9	Prepaid expenses and deferred charges		9	45,046.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,719,909			207.027
	b	Less: accumulated depreciation 10b 745,655	901,524.	10c	974,254.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	1,907,883.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	04 804
	15	Other assets. See Part IV, line 11	21,786.	15	21,786.
_	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	5,038,706.
	17	Accounts payable and accrued expenses		17	125,038.
	18	Grants payable		18	200 000
	19	Deferred revenue	15,000.	19	300,809.
	20	Tax-exempt bond liabilities		20	
20	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ĭ	22	Payables to current and former officers, directors, trustees, key employees,			
Liabilities		highest compensated employees, and disqualified persons. Complete Part II			
2	150	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	103,576.
	25	Other liabilities. Complete Part X of Schedule D		25	529,423.
-	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ X and complete	150,550.	26	347,443.
10		그걸 대한 교육시간, 그걸 전경 (대통령 (대통령) 대한 경험하고 있는 대한 경험 (대한 기계 등 기계			
Net Assets or Fund Balances	27	lines 27 through 29, and lines 33 and 34.	3,028,745.	27	4,509,283.
alar	28	Unrestricted net assets Temporarily restricted net assets		28	2,303,203
P	29			29	
Ĕ	2.5	Permanently restricted net assets Organizations that do not follow SFAS 117, check here and		20	
7		complete lines 30 through 34.			
2	30	Capital stock or trust principal, or current funds		30	
22E	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
H	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances		33	4,509,283.
	34	Total liabilities and net assets/fund balances	3,185,301.	34	5,038,706.

Form 990 (2009) DISTRIBUTION INC.

Part XI Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? X Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis 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 X За Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

77-0320851 Page 12

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

2009

Open to Public Inspection

Name of the organization

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.

Employer identification number 77-0320851

Part I	Reason f	or Public Cha	rity Status (All organiz	zations mus	st complet	e this part	.) See inst	ructions.				
he organ			because it is: (For lines		_							
1			es, or association of chur									
2			70(b)(1)(A)(ii). (Attach Sc				2030-790					
3			oital service organization	and the same of the same of	in section	170(b)(1)(A)(iii).					
4			operated in conjunction				and the second	b)(1)(A)(ii	i). Enter the	e hospital'	s name	e.
	city, and state			210-1102-7		2224		- W. W. Sie.		100.00	2.1.00.00	
5	An organization		e benefit of a college or u	niversity ov	wned or op	erated by	a governr	nental uni	t described	in		
6			ment or governmental uni	it described	d in section	n 170(b)(1)(A)(v).					
7 X	An organization	on that normally re	ceives a substantial part			11 15 75	44, 94, 2	r from the	general pu	ıblic desc	ribed ir	n
. [o)(1)(A)(vi). (Compl		1000001010	Dedutts							
8			section 170(b)(1)(A)(vi).				W 2 3		1 No. 1			
9			ceives: (1) more than 33									
		and the second of the second of the second	unctions - subject to certa							the same of the sa		
			taxable income (less sec	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization af	ter June 3	0, 197	5.
		509(a)(2). (Comple										
10	An organization	on organized and	operated exclusively to te	st for publi	ic safety. S	See sectio	n 509(a)(4	1).				
11	An organization	on organized and o	operated exclusively for t	he benefit (of, to perfo	orm the fur	nctions of,	or to carr	y out the p	urposes o	f one o	or
	more publicly	supported organiz	zations described in sect	ion 509(a)(1	1) or section	on 509(a)(2). See sec	tion 509(a)(3). Chec	k the box	that	
	describes the	type of supporting	g organization and comp	lete lines 1	1e through	11h.						
+2	a Type I	b_	Type II	с 🔲 Тур	e III - Func	tionally int	egrated		d_	Type III - C	Other	
e	By checking t	this box, I certify th	nat the organization is not	t controlled	directly of	r indirectly	by one or	more dis	qualified pe	ersons oth	er tha	n
	foundation ma	anagers and other	than one or more publicl	y supporte	d organiza	tions des	cribed in s	ection 509	9(a)(1) or se	ection 509	(a)(2).	
f			ritten determination from									
		ganization, check	this boy	mantana se		Participation of the Control of the	W. P. PAS.					
g			organization accepted a							1815115117115111	201111111	-
3			directly controls, either a	The Party of the Control of the Cont							Yes	No
			supported organization?							11g(i)	100	110
										_		_
			on described in (i) above?							The Print of the Land of the L		_
-2-			a person described in (i)							11g(iii)		_
h	Provide the fo	ollowing informatio	n about the supported or	rganization	(s).							
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	organization	(v) Did you	notify the	(vi) ls	the	(vii) An	ount o	f
	anization	1.4.2	organization (described on lines 1-9		sted in your		ion in col.	organizátie	ed in the		port	
			above or IRC section	governing	document?	(i) of you	support?	(i) organiz U.S	.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
					1000	J. 18						
				-							_	
_								-	-			_
				1								
						-						
			3/2					21 - 1	1 - 4			
								1 4	44			
	-											
.,4												
					1							

Schedule A (Form 990 or 990-EZ) 2009 DISTRIBUTION INC.

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.)

Section A. Public Support Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(=) 0007 I	(4) 0000	/-\ 0000	/0.T-4-1
1 Gifts, grants, contributions, and	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
membership fees received. (Do not include any "unusual grants.")	9,360,678.	10,908,326.	9,774,328.	21,167,139.	34,279,289,	85,489,760.
Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	9,360,678,	10,908,326,	9,774,328.	21,167,139.	34,279,289.	85,489,760.
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)						
6 Public support. Subtract line 5 from line 4.						85,489,760.
Section B. Total Support				V-		
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	9,360,678.	10,908,326.	9,774,328,	21,167,139.	34,279,289.	85,489,760.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties	0.005	14.005				
9 Net income from unrelated business activities, whether or not the business is regularly carried on	2,225.	11,225.	29,605.	6,781.	7,895.	57,731.
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	1,533.	1,793.	1,124.	1,145.		5,595.
11 Total support. Add lines 7 through 10						85,553,086,
12 Gross receipts from related activities,						,528,032.
13 First five years. If the Form 990 is for organization, check this box and stop Section C. Computation of Public			, fourth, or fifth ta	x year as a section	n 501(c)(3)	
			tions (0)	-	Las I	99.93 %
14 Public support percentage for 2009 (lin15 Public support percentage from 2008)					14	00 00
16a 33 1/3% support test - 2009. If the org	ganization did not	check the box on	line 13, and line 1	4 is 33 1/3% or m		k and
stop here. The organization qualifies a b 33 1/3% support test - 2008. If the org and stop here. The organization qualif	ganization did not	check a box on lin	e 13 or 16a, and I	ine 15 is 33 1/3%	or more, check thi	is box
17a 10% -facts-and-circumstances test	- 2009.If the orga	nization did not ch	eck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more.
and if the organization meets the "fact meets the "facts-and-circumstances" t	s-and-circumstan	ces" test, check th	is box and stop h	ere. Explain in Pa	rt IV how the organ	ization
b 10% -facts-and-circumstances test more, and if the organization meets the organization meets the "facts-and-circumstances" in the properties of the pro	- 2008.If the orga e "facts-and-circu	nization did not ch nstances" test, ch	eck a box on line eck this box and s	13, 16a, 16b, or 1 stop here. Explair	7a, and line 15 is 1 in Part IV how the	0% or
18 Private foundation. If the organization						
is invate roundation. If the organization	did flot check a l	Jox of line 13, 16a	, 100, 17a, or 17b	, check this dox a	ind see instruction	S

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (e) 2009 (a) 2005 (b) 2006 (c) 2007 (d) 2008 (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) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (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 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 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 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2009. 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 - 2008. 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

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2009

Name of the organization

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.

Employer identification number

77-0320851

Organization type (chec	:k one):
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	on is covered by the General Rule or a Special Rule . 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one implete Parts I and II.
Special Rules	
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990·EZ that met the 33 1/3% support test of the regulations under sections 70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% on (i) Form 990, Part VIII, line 1h or (ii) Form 990·EZ, line 1. Complete Parts I and II.
aggregate cont	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, tributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or of cruelty to children or animals. Complete Parts I, II, and III.
contributions for If this box is ch purpose. Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, or use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. lecked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., of complete any of the parts unless the General Rule applies to this organization because it received nonexclusively lable, etc., contributions of \$5,000 or more during the year.
	on that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Employer identification number

77-0320851

n a		
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
AG AGAINST HUNGER 1355 ABBOTT STREET #206 SALINAS. CA 93901	s1,017,790.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(b)	(c) Aggregate contributions	(d) Type of contribution
FEDERAL EMERGENCY MANAGEMENT AGENCY 701 NORTH FAIRFAX ST. #310 ALEXANDRIA, VA 22314	\$968,455.	Person X Payroll
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
FOWLER PACKING 8570 S. CEDAR FRESNO, CA 93725	\$686,334.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
SAN FRANCISCO FOOD BANK 900 PENNSYLVANIA AVE. SAN FRANCISCO, CA 94107	\$2,216,613.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
USDA-EMERGENCY FOOD ASSISTANCE PROGRAM FNS, ROOM 502, PARK OFFICE CENTER 3101 PARK CENTER DRIVE ALEXANDRIA, VA 22302	\$_10,933,283.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES 744 P STREET MS19-51 SACRAMENTO, CA 95814	\$688,232.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
	AG AGAINST HUNGER 1355 ABBOTT STREET #206 SALINAS, CA 93901 (b) Name, address, and ZIP+4 FEDERAL EMERGENCY MANAGEMENT AGENCY 701 NORTH FAIRFAX ST. #310 ALEXANDRIA, VA 22314 (b) Name, address, and ZIP+4 FOWLER PACKING 8570 S. CEDAR FRESNO, CA 93725 (b) Name, address, and ZIP+4 SAN FRANCISCO FOOD BANK 900 PENNSYLVANIA AVE. SAN FRANCISCO, CA 94107 (b) Name, address, and ZIP+4 USDA-EMERGENCY FOOD ASSISTANCE PROGRAM FNS, ROOM 502, PARK OFFICE CENTER 3101 PARK CENTER DRIVE ALEXANDRIA, VA 22302 (b) Name, address, and ZIP+4 CALIFORNIA DEPARTMENT OF SOCIAL SERVICES	AG AGAINST HUNGER 1355 ABBOTT STREET #206 SALINAS, CA 93901 (b) Name, address, and ZIP+4 FEDERAL EMERGENCY MANAGEMENT AGENCY 701 NORTH FAIRFAX ST. #310 ALEXANDRIA, VA 22314 (b) Name, address, and ZIP+4 FOWLER PACKING 8570 S. CEDAR FRESNO, CA 93725 (b) Name, address, and ZIP+4 SAN FRANCISCO FOOD BANK 900 PENNSYLVANIA AVE. SAN FRANCISCO, CA 94107 (b) Name, address, and ZIP+4 SAN FRANCISCO, CA 94107 (c) Aggregate contributions \$ 2,216,613. \$ 10,933,283. (c) Aggregate contributions \$ 10,933,283. (d) Aggregate contributions

Name of organization FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.

77-0320851

Employer identification number

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	FOOD COMMODITIES		
1	FOOD COMMODITIES	\$1,017,790.	/ /09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_	FOOD COMMODITIES		
3		s686,334.	/ /09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	FOOD COMMODITIES		
4		\$2,216,613.	/ /09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	FOOD COMMODITIES		
5		\$	/ /09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			

Schedule B (Form 990, 990-EZ, or 990-PF) (2009) of Part III Name of organization Employer identification number FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC. 77-0320851 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating Part III more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once, See instructions.) > \$ (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ▶ Complete if the organization answered "Yes," to Form 990,

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Open to Public Inspection

OMB No. 1545-0047

► Attach to Form 990. ► See separate instructions.

FOOD OPPORTUNITIES ORGANIZATION &

Name of the organization FOOD OPPORTUNITIE DISTRIBUTION INC.

Employer identification number 77-0320851

	organization answered "Yes" to Form 990, Part IV, line 6		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wr	riting that the assets held in donor ad	vised funds
	are the organization's property, subject to the organization's ex	xclusive legal control?	Yes L No
6	Did the organization inform all grantees, donors, and donor adv		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpos	se conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the orga	nization answered "Yes" to Form 990	, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (e.g., recreation or ple	easure) Preservation of an I	historically important land area
	Protection of natural habitat	Preservation of a co	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the for	m of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Yea
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic struc	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired af	ter 8/17/06	2d
3	Number of conservation easements modified, transferred, rele-	ased, extinguished, or terminated by	the organization during the tax
	year >		
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling	of
	violations, and enforcement of the conservation easements it	holds?	Yes N
6	Staff and volunteer hours devoted to monitoring, inspecting, a	nd enforcing conservation easements	s during the year
7	Amount of expenses incurred in monitoring, inspecting, and er	nforcing conservation easements duri	ing the year > \$
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 1	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes N
9	In Part XIV, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	on's financial statements that describ	es the organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form 9	90, Part IV, line 8.	
		3	
ta	If the organization elected, as permitted under SFAS 116, not	to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of	public service, provide, in Part XIV, the text
	the footnote to its financial statements that describes these ite	ems.	
b	If the organization elected, as permitted under SFAS 116, to re	eport in its revenue statement and ba	lance sheet works of art, historical treasure:
	or other similar assets held for public exhibition, education, or	research in furtherance of public serv	vice, provide the following amounts relating
	these items:	A CONTRACTOR OF THE CONTRACTOR	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas		
ñ	the following amounts required to be reported under SFAS 11		No. of the last of
a	Revenues included in Form 990, Part VIII, line 1		> \$
-	Assets included in Form 990. Part X	renergeneau and comment of the comme	minimum T

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC. 77-0320851 Page 2 Schedule D (Form 990) 2009 Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 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): Public exhibition Loan or exchange programs b Scholarly research Other Preservation for future generations C Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 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 Escrow and Custodial Arrangements. Complete if 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 Yes b If "Yes," explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance 1c d Additions during the year 1d Distributions during the year 1e 1f 2a Did the organization include an amount on Form 990, Part X, line 21? Yes b If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (c) Two years back (d) Three years back (a) Current year (b) Prior year (e) Four years back 1a Beginning of year balance Contributions c Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the year end balance held as: Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organization that are held and administered for the organization

by: Yes No (i) unrelated organizations 3a(i) 3a(ii) If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				0.
c Leasehold improvements		497,474.	57,753.	439,721.
d Equipment		442,790.	291,796.	150,994.
e Other		779,645.	396,106.	383,539.
otal. Add lines 1a through 1e. (Column (d) must equ	al Form 990. Part X. colur	nn (B), line 10(c).)	-	974,254.

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. See	Form 990, Part X, line	12.	
(a) Description of security or category	(b) Book value	(c) Method o	
(including name of security)	(b) Dook value	Cost or end-of-ye	ear market value
Financial derivatives			
Closely-held equity interests			
Other			
MUTUAL FUND - EATON VANCE LOW			
DURATION FD	501,872	• END-OF-YEAR MAR	RKET VALUE
MUTUAL FUND - SHORT DURATION			
INCOME FUND	501,079		
CERTIFICATE OF DEPOSIT	235,000		
CERTIFICATE OF DEPOSIT	100,000		the first term of the control of the
CERTIFICATE OF DEPOSIT	235,000		and the state of t
CERTIFICATE OF DEPOSIT	235,000		
CERTIFICATE OF DEPOSIT	50,034		RKET VALUE
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	1,907,883		
Part VIII Investments - Program Related. See	Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Method	
(a) bescription of investment type	(b) book value	Cost or end-of-ye	ear market value
		7 9	
	7679		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	- W - Be- 1		
Part IX Other Assets. See Form 990, Part X, line 1	5.		
	escription		(b) Book value
	. 10		
•			
	-		
•			
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)		
Part X Other Liabilities. See Form 990, Part X, li			
1. (a) Description of liability	10 20.	(b) Amount	
		(b) / tinodite	
Federal income taxes PAYROLL AND RELATED LIABILITIE	20	103,576.	
TAIROUD AND REDATED DIABITITE	30	103,370.	
<u> </u>			
		1	
-			
		400 55	
Total. (Column (b) must equal Form 990, Part X, col (B) line	25.)	103,576.	

DISTRIBUTION INC. 77-0320851 Page 4 Schedule D (Form 990) 2009 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Total revenue (Form 990, Part VIII, column (A), line 12) 34,922,219. 33,441,681. 2 Total expenses (Form 990, Part IX, column (A), line 25) Excess or (deficit) for the year. Subtract line 2 from line 1 1,480,538. 3 3 Net unrealized gains (losses) on investments 4 Donated services and use of facilities 5 Investment expenses 6 6 Prior period adjustments 7 Other (Describe in Part XIV.) 8 Total adjustments (net). Add lines 4 through 8 9 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 1,480,538. 10 Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 34,922,219. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments b Donated services and use of facilities 2h c Recoveries of prior year grants d Other (Describe in Part XIV.) e Add lines 2a through 2d 34.922. Subtract line 2e from line 1 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 b Other (Describe in Part XIV.) c Add lines 4a and 4b 34,922,219. Total revenue, Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 33,441,681. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments 2b 2c d Other (Describe in Part XIV.) e Add lines 2a through 2d 2e 33,441,681. 3 Subtract line 2e from line 1 3 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 b Other (Describe in Part XIV.) c Add lines 4a and 4b 4c 33,441,681. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XIV | Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
CERTIFICATE OF DEPOSIT	49,898.	FMV
		V
·		
	pr.	
	P.	
A.t		
932421	1	

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(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.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.

Employer identification number 77-0320851

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17, Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply, X Mail solicitations e X Solicitation of non-government grants Internet and email solicitations f X Solicitation of government grants g X Special fundraising events Phone solicitations In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or X No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 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. (iii) Dld (v) Amount paid (vi) Amount paid (i) Name of individual (iv) Gross receipts to (or retained by) (ii) Activity have custody or control of contributions? to (or retained by) or entity (fundraiser) fundraiser from activity organization listed in col. (i) DIRECT RESPONSE Yes No RUSS REID MAIL SOLICITATION X 1059344. 288,728. 770,616. 1059344. 288.728. 770,616. 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2009 DISTRIBUTION INC.

77-0320851 Page 2

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events CULTIVATION/ANNUAL GOLF (add col. (a) through TOURNAMENT ACQUISITION col. (c)) (event type) (event type) (total number) 1,059,344. 1 Gross receipts 43,330. 1,102,674. 2 Less: Charitable contributions 1,059,344. 43,330. 1,102,674. 3 Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Expenses Rent/facility costs Food and beverages 8 Entertainment 288,728. 8,780. 297,508. Other direct expenses 297,508 10 Direct expense summary. Add lines 4 through 9 in column (d) • 11 Net income summary. Combine line 3, column (d), and line 10 805,166. 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. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes 6 Volunteer labor No Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column (d), and line 7 Yes No 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain: Does the organization operate gaming activities with nonmembers? 11 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?

Part II

77-0320851 Page 3 Schedule G (Form 990 or 990-EZ) 2009 DISTRIBUTION INC. Yes No 13 Indicate the percentage of gaming activity operated in: a The organization's facility 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? 15a 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? 17a b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the

Schedule G (Form 990 or 990-EZ) 2009

organization's own exempt activities during the tax year > \$

SCHEDULE M (Form 990)

Noncash Contributions

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

2009

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.

Employer identification number 77-0320851

Pai		тур	es of Property	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of d rever	letermin	ing	
1	Art - W	orks	of art							_
2			al treasures							
3	Art - Fr	action	nal interests							
4			oublications							
5	Clothir	ng and	i household goods							
6	Cars a	nd ot	ner vehicles							
7			lanes							
8			property							
9			Publicly traded							
10			Closely held stock							
11			Partnership, LLC, or							===
	trust in	teres	ts		N. T.	A - 100 -				
12	Securit	ties - I	Miscellaneous				1			
13	Qualifie	ed co	nservation contribution -							
14	Histori		ctures nservation contribution - Other			-				
15			Residential		7 70					
16			Commercial							
17			Other		- N					_
18					P 10 1					-
19			ory				GEN. INV.	AT F	AIR	VA
20			nedical supplies					-		
21			Control and English Terroristantives				2 - 2 - 3			_
22			tifacts							
23			ecimens							_
24	Archeo	ologic	al artifacts	"						
25	Other		()						_
26	Other		()						_
27	Other		i	i l						_
28	Other	-	i	j l						
29	Numbe	er of F	Forms 8283 received by the org		and the second s	100				
	TOT WITH	ich th	e organization completed Forn	1 6263, Part IV,	Donee Acknowle	dgment29			Yes	No
30a	During	the y	ear, did the organization receive	ve by contribution	on any property r	eported in Part I, lines 1-28 th	at it must hold for		100	
	at leas	t thre	e years from the date of the ini	itial contribution	, and which is no	t required to be used for exer	mpt purposes for			
	the ent	tire ho	olding period?					30a		X
b	If "Yes	," des	scribe the arrangement in Part	II.						
31	Does t	he or	ganization have a gift acceptar	nce policy that re	equires the review	w of any non-standard contrib	outions?	31		X
32a			ganization hire or use third par						-	
	contrib	oution	s?				outros (os tos constitues y c	32a	X	
b	If "Yes	," des	scribe in Part II.					1		
33	If the c	organi	zation did not report revenues	in column (c) fo	r a type of prope	rty for which column (a) is che	ecked,			1
	describ	be in I	Part II.							

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.
SCHEDULE M, LINE 32B: COMMUNITY FOOD BANK DISTRIBUTES VIRTUALLY ALL
FOOD COMMODITIES RECEIVED TO LOCAL FOOD PANTRIES, RESIDENTIAL SHELTERS,
COMMUNITY KITCHENS AND ADULT AND CHILD DAY CARE CENTERS. COMMUNITY FOOD
BANK HAS OVER 150 AGENCIES IN WHICH FOOD COMMODITIES ARE DISTRIBUTED.

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.



Name of the organization

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.

Employer identification number 77-0320851

DISTRIBUTION INC. 77-0320851
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED BY THE CFO
AND A MEMBER OF THE AUDIT COMMITTEE PRIOR TO FILING. COPIES ARE AVAILABLE
TO THE BOARD AND GENERAL PUBLIC UPON REQUEST.
FORM 990, PART VI, SECTION B, LINE 12C: DURING AUDIT PROCESS, BOARD IS
ASKED TO DISCLOSE ANY POSSIBLE RELATED PARTY TRANSACTIONS AND CONFLICTS OF
INTEREST.
FORM 990, PART VI, SECTION B, LINE 15: BOARD OF DIRECTORS APPROVES
COMPENSATION PAID TO CEO. APPROVED IN CLOSED SESSION OF MEETING AND
DOCUMENTED. REMAINDER OF EMPLOYEES ARE DETERMINED BY CEO WITHIN
PREDETERMINED PAY SCALES WHICH WERE DEVELOPED BY MANAGEMENT STUDENTS AT
CALIFORNIA STATE UNIVERSITY-FRESNO. THE BOARD OF DIRECTORS APPROVED THE PAY
SCALES AND ANNUAL SALARIES OF ALL EMPLOYEES.
FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL STATEMENTS ARE MAINTAINED
AT THE COMMUNITY FOOD BANK OFFICES AND ARE AVAILABLE FOR REVIEW AT THAT
LOCATION.
BOARD OF DIRECTORS APPROVE SELECTION OF THE AUDITOR AND ASSUME
RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT.

Asset No.	Description	Date Acquired Method	I Life No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
* 0	* 990 PAGE 10 TOTAL OTHER			0.		0	0.	0.	0.	0
ф	BUILDINGS					1				
32F	32FREEZER/COOLER	063005SL	39.0016	155,314.			155,314.	15,928.		3,983.
57日	DLER	10FT051507SL	39.0016	8,133.			8,133.	435.		209.
58年		092706SL	39.0016	4,500.			4,500.	317.		115.
59年	14	061207SL	39.0016	27,385.			27,385.	1,463.		703.
60F	14	063007SL	39.0016	53,985.			53,985.	2,768.		1,384.
61 <u>F</u>	CONCRETE GUARDS FOR FREEZER/COOLER	061907SL	39.0016	7,500.			7,500.	384.		192.
62 E		063007SL	39.0016	20,481.			20,481.	1,050.		525.
63R	63NEW BUILDING	063007SL	15.0016	35,000.			35,000.	4,666.		2,333.
738	73SPRINKLER SYSTEM	070108SL	3.70 16	6,859.			6,859.	1,871.		1,871.
74C	74COOLER	100108SL	39.0016	22,400.			22,400.	431.		574.
75F.	75FREEZER	100108SL	39.0016	121,080.			121,080.	2,328.		3,105.
76F	76FREEZER BUMPS	103108SL	3.70 16	8,316.			8,316.	1,512.		2,268.
77II	DOCK STRIP DOOK	031909SL	3.30 16	1,057.			1,057.	81.		325.

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

Current Year Deduction	956.	823.	562.	1,180.	786.	232.	285.	22,411.	0.	0	0	0	0.	0	0.	2,409.	2,317.
Current Sec 179								0								Ì	
Accumulated Depreciation								33,234.	175.	129.	849.	483.	1,512.	1,800.	17,275.	12,046.	8,689.
Basis For Depreciation	2,785.	2,397.	1,740.	6,115.	4,075.	1,204.	3,289.	493,615.	175.	129.	849.	483.	1,512.	1,800.	17,275.	14,455.	16,218.
Reduction In Basis			1					.0									
Bus % Excl					7		5										
Unadjusted Cost Or Basis	2,785.	2,397.	1,740.	6,115.	4,075.	1,204.	3,289.	493,615.	175.	129.	849.	483.	1,512.	1,800.	17,275.	14,455.	16.218.
Line No.	16	16	16	16	16	16	16		16	16	16	16	16	16	16	16	16
Life	2.70	2.70	2.60	2.20	2.20	2.20	1.90		7.00	7.00	7.00	7.00	7.00	2.00	3.00	5.00	7.00
Method																	
Date Acquired	072009SL	0722098	082909SL	020310SL	021010SL	021010SL	042210SL		072299SL	18660E80	013001SL	051701SL	060801SL	021202SL	043002SL	043005SL	093005SL
Description	DC POWER 92INSTALLATION	DC MOD INSTALLATION072209SL	MOD DATA WIRING	H			WER INSTALLATION	* 990 PAGE IN TOTAL BUILDINGS FURNITURE & FIXTURES	90FFICE	10OFFICE EQUIPMENT	13COMPUTER	14FAX MACHINE	15COMPUTER-LAPTOP	16COMPUTER-SERVER	SION SOFTWA	DELL COMPUTERS AND 34SERVER	430FFICE EQUIPMENT
Asset No.	92	93DC	94DC	95	96	97	98		9	100	13(14	150	16	171	34.	43(

928102 06-24-09

(D) - Asset disposed

	Life
16 26,4	26,
16 44,5	44,
16 3,	
, 9 91	
1,	Н
16 5,	100
16 5,	
1,	H
16 2,	4
1,	
16 2,	
155,	2
1,	
3,800	3,
16 2,	
18,7	18,
2 026	

(D) - Asset disposed

Asset No.	Description	Date Acquired M	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
24	24PLASTIC BINS	031901SL		7.00	16	3,969.			3,969.	3,969.		0
25	25FORKLIFT-SPLIT	03270081		7.00	16	11,596.			11,596.	11,596.		0
26	26FORKLIFT	081501SL	נט	00.	16	9,148.		1	9,148.	9,148.		0
28	28POWERED PALLET JAC	JACK111101SL		5.00	16	3,444.			3,444.	3,444.		0
29		101801SL		5.00	16	23,838.			23,838.	23,838.		0
31	BRYANT CONDENSING	060303SL		5.00	16	1,800.		J	1,800.	1,800.		0
33	3315 PALLET JACKS	06300551	2	00.	16	6,937.	Ŋ		6,937.	5,550.		1,387.
35		043005SL		10.001	16	7,500.			7,500.	3,125.		750.
42	LIFT GATE (CONAGRA	18900E90	-CJ	00.	16	9,554.			9,554.	3,822.		0
44	AREHOUSE QUIPMENT-2	ELECTRI071805SL		5.00	16	30,179.			30,179.	23,641.		6,036.
45	IC RYI	081005SL	77	00.	16	21,167.			21,167.	16,581.		4,234.
46	ELECTRIC DEEP REACH	121605SL		5.00	16	36,345.			36,345.	25,442.		7,269.
47	TNO	SCALES113005SL		5.00	16	7,234.			7,234.	5,185.		1,447.
48	PUSH PULL 48attachment – Wareh	WAREHO093005SL		5.00	16	7,553.			7,553.	5,666.		1,511.
49	49LOT SAFE T-RAIL	073105SL		7.00	16	5,354.			5,354.	2,996.		765.
50	50PALLET RACKS	073105SL		10.001	16	11,960.			11,960.	4,684.		1,196.
51	STRETCH WRAP 51MACHINE	090705SL		7.00	16	8,588.			8,588.	4,703.		1,227.
70	70BATTERY PULLER	100908EL		5.00	16	2,500.			2,500.	375.		500.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Current Year Deduction	1,433.	1,433.	79.	203.	106,069.	180,343.							
Current Sec 179					0.	0							
Accumulated Depreciation					290,036.	565,313.							
Basis For Depreciation	21,493.	21,493.	2,379.	6,093.	779,645.	1,721,871.					ŧ		
Reduction In Basis			1		0.	0.	5						
Bus % Excl					V		5						
Unadjusted Cost Or Basis	21,493.	21,493.	2,379.	6,093.	779,645.	1,721,871.	(
Line No.	16	16	16	16				N.					
Life	5.00	5.00	2.00	2.00									
Method													
Date Acquired	030410SL	030410SL	042310SL	042310SL									
Description	79WHITE	80BLUE FORD FOCUS -	81TRUCK HITCH	82TRAILER	TRANSPORTATION EQU	PAGE 10 DEPR							
Asset No.	75	8(8	80									

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Form **8868** (Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of thi	
Do no	t complete Part II unless you have already been granted an automatic 3-month extension on a previously	filed Form 8868.
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and co only	mplete
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a income tax returns.	n extension of time
noted (not at you m	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extens below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electro stomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or coust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic rs.gov/efile and click on e-file for Charities & Nonprofits.	nically if (1) you want the additional onsolidated Form 990-T. Instead,
Type o	Name of Exempt Organization FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.	Employer identification number 77-0320851
File by to due date filing you return. S	Number, street, and room or suite no. If a P.O, box, see instructions.	, , , , , , , , , , , , , , , , , , , ,
Instruction		
• The Tel	Form 990-EZ Form 990-PF Form 1041-A COMMUNITY FOOD BANK be books are in the care of 3403 E. CENTRAL AVE - FRESNO, CA 93725 be books are in the care of 3403 E. CENTRAL AVE - FRESNO, CA 93725 be organization does not have an office or place of business in the United States, check this box bis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box and attach a list with the names and EINs of a	B870 ▶ □ his is for the whole group, check this
	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time u FEBRUARY 15, 2011 , to file the exempt organization return for the organization named is for the organization's return for: Calendar year or xand ending JUN 30, 2010	above. The extension
	If this tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
	If this application is for Form 990·BL, 990·PF, 990·T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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 black lung benefit trust or private foundation)

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

OMB No. 1545-0047

Open to Public Inspection

A F	or the	2008 ca	lendar year, or tax year beginning JUL 1, 2008 and ending	JUN 30, 2009	
Вс	heck if pplicable	s label or	C Name of organization FOOD OPPORTUNITIES ORGANIZATION &	D Employer identif	ication number
-	change □Name	print or	DISTRIBUTION INC.	77.0	220051
H	_lchange _lnitlal		Doing Business As		320851
	_Ireturn _Termin- ation	Instruc-	Number and street (or P.O. box if mail is not delivered to street address) Room/suit 3403 E CENTRAL AVE		237 3663
	Amend	C1 P	City or town, state or country, and ZIP + 4	G Gross receipts \$	21,807,304.
	Applica tion pending		FRESNO, CA 93725	H(a) Is this a group r	
	belland	F Na	ne and address of principal officer:DANA WILKIE	for affiliates?	Yes X No
			ME AS C ABOVE	H(b) Are all affiliates in	
			us: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a	a list. (see instructions)
_			OMMUNITYFOODBANK.NET	H(c) Group exemption	
				r of formation: 1992	M State of legal domicile: CA
Pa		Summ			
Activities & Governance			scribe the organization's mission or most significant activities: DISTRIBUT OCUNTY	E FOOD TO TH	HE HUNGRY IN
erne			is box 🕨 🔲 if the organization discontinued its operations or disposed of mo		ts.
OV	3 1	Number o	of voting members of the governing body (Part VI, line 1a)	3	15
8	4 1	Number o	of independent voting members of the governing body (Part VI, line 1b)	4	15
es	5	Total nun	nber of employees (Part V, line 2a)	5	33
viti	6	Total nun	nber of volunteers (estimate if necessary)	6	5800
Act	7a 1	Total gros	ss unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
	b 1	Vet unrel	ated business taxable income from Form 990-T, line 34	7b	0.
				Prior Year	Current Year
e	8 (Contribut	ions and grants (Part VIII, line 1h)	8,959,509.	
Revenue	9 F	rogram	service revenue (Part VIII, line 2g)	398,913.	
3ev	10	nvestme	nt income (Part VIII, column (A), lines 3, 4, and 7d)	29,605.	
-	11 (Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	815,943.	
			enue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,203,970.	21,807,304.
	13 (Grants ar	nd similar amounts paid (Part IX, column (A), lines 1-3)		
			paid to or for members (Part IX, column (A), line 4)		HE STERRICKS
es	15 5	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	737,154.	1,076,142.
Expenses	16a l	Professio	nal fundraising fees (Part IX, column (A), line 11e)		
X	b i	Total fund	draising expenses (Part IX, column (D), line 25) 441,723.		
ш			penses (Part IX, column (A), lines 11a-11d, 11f-24f)	10,054,813	
			enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,791,967	
. 20	19	Revenue	less expenses. Subtract line 18 from line 12	<587,997.	> <105,664.>
Net Assets or Fund Balances				Beginning of Year	End of Year
SSE	20		ets (Part X, line 16)	3,421,657	
et A	21		ilities (Part X, line 26)	287,248.	
Zű.	22 1		ts or fund balances. Subtract line 21 from line 20	3,134,409	3,028,745.
Pa	art II	-	ture Block	and to the breat if an it was	And and desired the days around
		and compl	alties of perjury, I declare that I have examined this return, including accompanying schedules and statement ete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledg	ge.	oge and belief, it is true, correct,
				i	
Sig	95 I I I	Sin	nature of officer	Date	
Her	e	A CE		Date	
			ANA WILKIE, CEO		
_			1000	Sheck if Prepa	arer's identifying number
Paid	d	Preparer'signature	S S	elf- (see i	nstructions)
Pre	parer's	Firm's nan	, and the second	ORP EIN	
Use	Only	yours if self-emplo	BAMPBON & BAMPBON , CFA B, A PROF C	ORP EIN >	
		address, a ZIP + 4	CLOVIS, CA 93612	Dhona no	(559)291-0277
May	the IF		es this return with the preparer shown above? (see instructions)	Filone no.	X Vas No

FOOD OPPORTUNITIES ORGANIZATION & Form 990 (2008) DISTRIBUTION INC. 77-0320851 Page 2 Part III | Statement of Program Service Accomplishments (see instructions) Briefly describe the organization's mission: DISTRIBUTE FOOD TO THE HUNGRY IN FRESNO COUNTY. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes", describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes", describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.) (Expenses \$ 21172094. including grants of \$ 3,234,971.)(Revenue \$ 632,239.1 4a (Code: THE ORGANIZATION CONDUCTS A PROGRAM WHICH PROVIDES FOOD PANTRIES AND KITCHENS AND OTHER ORGANIZATIONS RESOURCES DEDICATED TO FEEDING THE HUNGRY. (Code:) (Expenses \$ including grants of \$) (Revenue \$ (Code:) (Expenses \$ including grants of \$) (Revenue \$

4d Other program services. (Describe in Schedule O.)

xpenses \$ including grants of \$

) (Revenue \$

4e Total program service expenses ►\$

21,172,094. (Must equal Part IX, Line 25, column (B).)

Form 990 (2008) DISTRIBUTION INC.

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)?	H		
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	1.11	Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	-	
6	Did the organization maintain any donor advised funds or any accounts where 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		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was	-	77	
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			-
	located outside the United States? If "Yes," complete Schedule F, Part III	16	1	X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	X	-
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.	24a	İ	x
h	If "No", go to question 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		21
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
d	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b		200		- 21
	prior year? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			1
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial	26		Х
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X

Form 990 (2008) DISTRIBUTION INC. Part IV | Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other		, ,	
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional	10	-	
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	94	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	191		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			- T
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	100	-	1
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	17.1		
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			17.
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Form **990** (2008)

Form 990 (2008) DISTRIBUTION INC.

Part V | Statements Regarding Other IRS Filings and Tax Compliance

		¥			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		6.9			
	U.S. Information Returns. Enter -0- if not applicable	1a	11			
b	Enter the number of Forms W-2G included in line 1a. Enter ·0· if not applicable		0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners?		iming	1c		Х
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1	I STATE OF THE SECTION AND ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION AND ADDRESS OF THE SECTION ADDRESS OF THE SECTION AND ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTION ADDRESS OF THE SECTI	10		
	filed for the calendar year ending with or within the year covered by this return	2a	33			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	11.00		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see		Υ			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year cover			За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	100	-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				-	
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a	1	X
b	If "Yes," enter the name of the foreign country:	134.4.5.5.41.4.5.11				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank and				
	Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans			5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entit					
Co	Tax Shelter Transaction?	01410101414141414	*************	5c		V
6a	Did the organization solicit any contributions that were not tax deductible?			6a	-	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution were not tax deductible?			6b	0.73	
7	Organizations that may receive deductible contributions under section 170(c).	*************		0.5		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of mo	re than \$75?	4	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		-
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it		***************			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			m		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	personal				
	benefit contract?		***********	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con			7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required			7g		X
b	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098			7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and se	The state of the s				
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring of	organization,	have			
	excess business holdings at any time during the year?	mainisten en en en		8		-
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?		terreterreterritarion	9a		-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	***************************************	+11441141111444444	9b	-	
10	Section 501(c)(7) organizations. Enter: N/A	1.2.1				
a	Initiation fees and capital contributions included on Part VIII, line 12					
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against	Tia				
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	126		120		
_	the year and the second of the year and year and yea	1 120		Гого	000	(2008)

Form 990 (2008) DISTRIBUTION INC. 77-0320851 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 15			
b	Enter the number of voting members that are independent 1b 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	1.5		
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	7		
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII. Section A, who cannot be reached at the	-10		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sec	tion B. Policies			
			Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		-	
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	1000	X
15	Did the process for determining compensation of the following persons include a review and approval by independent		100	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а	The organization's CEO, Executive Director, or top management official?	15a	X	
	Other officers or key employees of the organization?	15b		X
~	Describe the process in Schedule O. (see instructions)	100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
		16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	104		- 22
~	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	1	
Sec	tion C. Disclosure	Top		
17	List the states with which a copy of this Form 990 is required to be filed CA	_		
18		for		-
10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.	101		
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	ind fin	ancial	
10				
10	statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization.			

Form 990 (2008)

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

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

(A) Name and Title	(B) Average hours	(c		Pos		app	ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustae	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
MARK A. RILEY TREASURER	5.00	х	i	x		7		0.	0.	0.
ROBERT REYES VICE CHAIRMAN		x		х		1		0.	0.	0.
WARREN AUWAE CHAIRMAN	5.00	x		x		Ī		0.	0.	0.
DIANA MOCK DIRECTOR	5.00	х						0.	0.	0.
DAVID L. SCHECTER DIRECTOR		x	13	7				0.	0.	0.
BILL LITTLEWOOD DIRECTOR	5.00	x	Ž.					0.	0.	0.
GUS BONNER DIRECTOR	5.00	X						0.	0.	0.
LILY TANG DIRECTOR	5.00	x						0.	0.	0.
GARY R. SERRATO DIRECTOR	5.00	x					ij	0.	0.	0.
DENISE CEARBAUGH DIRECTOR	5.00	x						0.	0.	0.
RANDY WOOD DIRECTOR	5.00	x						0.	0.	0.
DAN BARTELL DIRECTOR	5.00	x			-	1		0.	0.	0.
JULIE OLSON-BUCHANAN DIRECTOR	5.00	Х	Ų.					0.	0.	0.
COBY HORTON DIRECTOR	5.00	Х						0.	0.	0
NICOLE PARRA DIRECTOR	5.00	х					1	0.	0.	0
DANA WILKIE CEO	40.00				x			90,061.	0.	0

Page 8

(A) Name and title	(B) Average			(C Posi	C) ition	1		(D) Reportable	(E) Reportable			=) nated
	hours	(c				арр	ly)	compensation from	compensation from related)	amou	int of ner
	week	Individual trustes or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC		from organ and re	nsation the
								4				
						4						
				1								
1b Total						Ļ		90,061.		0.		0
 Total number of individuals (including compensation from the organization Did the organization list any former of 	those in 1a) who r	eceiv	ed r	nore	tha	an \$1			mployee on			es No
 line 1a? If "Yes," complete Schedule J For any individual listed on line 1a, is t and related organizations greater than Did any person listed on line 1a receiv 	he sum of reporta \$150,000? If "Yes	ble c	omp ompl	ens ete	atio Sch	n an edul	d otl	or such individual	the organization		4	X
the organization? If "Yes," complete S											5	Х
Section B. Independent Contractors 1 Complete this table for your five higher the organization.	st compensated i	ndep	end	ent o	cont	tract	ors t	hat received more than	\$100,000 of com	pens	ation fro	m
(A Name and busi							1	(B) Description of s	services	С	(C) ompens	ation
Total number of independent contract from the organization	ors (including tho	se in	1) w	ho r	ece	ived	mor	e than \$100,000 in con	npensation			

FOOD OPPORTUNITIES ORGANIZATION &

77-0320851 Page 9 Form 990 (2008) DISTRIBUTION INC. Part VIII | Statement of Revenue (D) Revenue excluded from (A) (B) (C) Total revenue Related or Unrelated exempt function business tax under sections 512, 513, or 514 revenue revenue gifts, grants ilar amounts 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events 10 d Related organizations 1d Contributions, and other simi e Government grants (contributions) 1e 3,234,971. f All other contributions, gifts, grants, and similar amounts not included above 16,910,218. 15,778,567. g Noncash contributions included in lines 1a-1f: \$ 20,145,189 h Total, Add lines 1a-1f **Business Code** 900099 632,239. 632,239. 2 a SHARED MAINTENANCE FEE Program Service Revenue f All other program service revenue 632,239. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 6,781. 6,781. other similar amounts) Income from investment of tax-exempt bond proceeds -5 Royalties (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See 1,021,950 Part IV, line 18 b Less: direct expenses 1021950. 1021950. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code**

900099

1,145.

1,145.

21,807,304.

1,145.

1662115.

C

11 a MISCELLANEOUS

d All other revenue

e Total. Add lines 11a-11d

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	00.004	55.054	40.004	0 000
	trustees, and key employees	90,061.	66,854.	13,904.	9,303
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	910,255.	675,701.	140,525.	94,029.
8	Pension plan contributions (include section 401(k)		.00		
	and section 403(b) employer contributions)				
9	Other employee benefits		XY		
10	Payroll taxes	75,826.	56,287.	11,706.	7,833.
11	Fees for services (non-employees):		55		
a	Management				
b	Legal	- An			
C	Accounting	10,700.	7,943.	1,652.	1,105
d	Lobbying		W	1 1 1 1 1 1 1	
e	Professional fundraising services. See Part IV, line 17	A 100 A			
f	Investment management fees	To			
g	Other			11	
12	Advertising and promotion				
13	Office expenses	49,850.	37,005.	7,696.	5,149
14	Information technology	9 9	4.1 (4.4)	100 000 000 000	
15	Royalties	Vib. All			
16	Occupancy	245,269.	182,068.	37,865.	25,336
17	Travel	17,958.	13,331.	2,772.	1,855
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest		h		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	123,926.	104,794.	19,132.	
23	Insurance				
24	Other expenses, Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	VALUE OF DISTRIBUTED CO	19,073,633.	19,073,633.		
b	PURCHASED COMMODITIES	457,421.	457,421.		
С	CONTRACT SERVICES	267,836.	5,863.		261,973
d	FREIGHT	149,466.	149,466.		
е	SUPPLIES/MATERIALS	131,078.	107,435.	4,847.	18,796
f	All other expenses	309,689.	234,293.	59,052.	16,344
25	Total functional expenses. Add lines 1 through 24f	21,912,968.	21,172,094.	299,151.	441,723
26	Joint Costs. Check here ► if following SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC. 77-0320851 Page 11 Form 990 (2008) Part X | Balance Sheet (A) Beginning of year (B) End of year 1,365,796. 1,489,677. Cash - non-interest-bearing 1 1 Savings and temporary cash investments 2 2 254,149. Pledges and grants receivable, net 76,649. 3 25,247. 40,030. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule I Notes and loans receivable, net _____ 7 1,209,021 441,116. Inventories for sale or use 8 37,019. 37,144. Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost basis ___ 10a | 1,466,837. b Less: accumulated depreciation. Complete 565,313. 683,814. 901,524. Part VI of Schedule D ______10b 10c 11 11 Investments - publicly traded securities Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 23,986. 21,786. Other assets. See Part IV, line 11 15 15 3,185,301. 3,421,657. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 65,171. 61,966. Accounts payable and accrued expenses 17 17 18 Grants payable 18 172,104. 15,000. 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow account liability. Complete Part IV of Schedule D 21 21 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 24 Other liabilities. Complete Part X of Schedule D 53,178. 76,385. 25 287,248. 156,556. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 3,134,409. 3,028,745. 27 Unrestricted net assets 27

Total net assets or fund balances 3,134,409. 33 3,028,745. 33 3,421,657. 3,185,301. Total liabilities and net assets/fund balances Part XI Financial Statements and Reporting Yes No 1 Accounting method used to prepare the Form 990: Cash X Accrual Other X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X b Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to lines 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? X 2c 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 X Act and OMB Circular A-133? 3a X

Temporarily restricted net assets

Organizations that do not follow SFAS 117, check here
and

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

b If "Yes," did the organization undergo the required audit or audits?

Retained earnings, endowment, accumulated income, or other funds

Permanently restricted net assets

complete lines 30 through 34.

36

28

29

30

31

32

28

30

31

32

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

2008
Open to Public Inspection

Name of the organization

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.

Employer identification number 77-0320851

Part I	Reason for	or Public Cha	arity Status (All organi	zations mu	st complet	te this par	t.) (see ins	tructions)				
The organ	ization is not a p	orivate foundatio	n because it is: (Please cl	heck only o	ne organiz	zation.)						
1	A church, conv	ention of church	nes, or association of chur	rches desc	ribed in se	ction 170	(b)(1)(A)(i)).				
2	A school descr	ibed in section	170(b)(1)(A)(ii). (Attach So	chedule E.)								
3	A hospital or a	cooperative hos	pital service organization	described	in section	170(b)(1)	(A)(iii). (At	tach Sche	dule H.)			
4			n operated in conjunction							e hospital	's nam	e,
	city, and state:											
5			e benefit of a college or u	iniversity or	wned or op	perated by	a governi	mental uni	t described	d in		
)(1)(A)(iv). (Com		4 ALCOHOL								
6 X			ment or governmental un					a vera la nome		X 0 - 2		
/ A		(1)(A)(vi). (Comp	eceives a substantial part plete Part II.)	or its supp	ort from a	governme	ental unit c	or from the	general pu	iblic desc	ribed i	n
8		Charles and Charle	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9			eceives: (1) more than 33			rom contr	ibutions, n	nembershi	o fees, and	dross red	ceints	from
			functions - subject to cert									
			taxable income (less sec									
		09(a)(2). (Comple			.,		aoquii ou i	, in orga	in incarion i ai		0, 10,	0.
10			operated exclusively to te	est for publ	ic safety. S	See section	on 509(a)(4	4), (see ins	tructions)			
11			operated exclusively for t							urposes c	of one	or
			izations described in sect									-,
			ng organization and comp					07102.021		K. (4,17,10, E).		
	a Type I	ь[1	e III - Fund		tegrated		d	Type III - C	Other	
e 🗔	By checking th	is box, I certify t	hat the organization is no	t controlled	directly o	r indirectly	y by one o	r more disc				n
			r than one or more public									
f			ritten determination from									
	supporting org	anization, check	this box	***********								
g	Since August 1	17, 2006, has the	e organization accepted a						sons?	2112502777		
	(i) A person	who directly or in	ndirectly controls, either a	alone or tog	ether with	persons o	described	in (ii) and (iii) below,		Yes	No
	the govern	ning body of the	supported organization?	mreine						11g(i)		
	(ii) A family m	nember of a pers	on described in (i) above	?			4 10 4 10 20 40 44 40 10	******		11g(ii)	731	1
	(iii) A 35% co	introlled entity of	a person described in (i)	or (ii) above	e?					11g(iii)	75	
h			on about the organization									
19.6.0		V0.742	(iii) Type of	It is the a	vanalastis a	AN DIA VA	a salie tha	T 6.2316	e 1	- /		
	of supported	(ii) EIN	organization		organization sted in your		u notify the tion in col.	organizatio	on in col.	(vii) Am		f
orga	nization		(described on lines 1-9		document?		r support?	(i) organiz U.S	ed in the	sup	port	
			above or IRC section (see instructions))	Yes	No	Yes	I No	Yes	No			
	-		(cos managinalis)			1,50	105	1.055	6,0		_	_
					1 1 1) e						
	-				-						-	_
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	-			-					-		_	_
	-								-			_
				-								
			+	1			-		-			_
					- 1							
				1								_

Schedule A (Form 990 or 990-EZ) 2008 DISTRIBUTION INC. 77-0320851 Page 2
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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and					100	
membership fees received. (Do not						
include any "unusual grants.")	8,765,230.	9,360,678.	10,908,326.	9,774,328.	21,167,139.	59,975,701.
2 Tax revenues levied for the organ-					-	
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities	- 0					
furnished by a governmental unit to			1	1		
the organization without charge						
4 Total. Add lines 1 - 3	8,765,230.	9,360,678.	10,908,326,	9,774,328.	21,167,139.	59,975,701.
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,			1			
column (f)						
6 Public Support. Subtract line 5 from line 4.	7 - 4					59,975,701.
Section B. Total Support				9		
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	8,765,230.	9,360,678.	10,908,326.	9,774,328.	21,167,139.	59,975,701.
8 Gross income from interest,						
dividends, payments received on		- 100				
securities loans, rents, royalties			F			
and income from similar sources	1,255.	2,225.	11,225.	29,605.	6,781.	51,091.
9 Net income from unrelated business		ar Table	W.		7 - 7 - 1	
activities, whether or not the			P			
business is regularly carried on		74.				
10 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)	10,994.	1,533.	1,793.	1,124.	1,145.	16,589.
11 Total support. Add lines 7 through 10						60,043,381.
12 Gross receipts from related activities,	etc. (see instruction	ns)			12 2	,248,068.
13 First five years. If the Form 990 is for			d, fourth, or fifth tax	x year as a sectio		* * - · · · · · · · ·
organization, check this box and stop	here		***************************************			▶□
Section C. Computation of Public	c Support Per	centage				
14 Public support percentage for 2008 (lin	ne 6, column (f) div	ided by line 11, c	olumn (f))	**********	14	99.89 %
15 Public support percentage from 2007	Schedule A, Part IV	V-A, line 26f			15	99.13 %
16a 33 1/3% support test - 2008. If the or	ganization did not	check the box on	line 13, and line 1	4 is 33 1/3% or r	nore, check this bo	x and
stop here. The organization qualifies a	s a publicly suppo	rted organization				▶ X
b 33 1/3% support test - 2007. If the or	ganization did not	check a box on li	ne 13 or 16a, and I	ine 15 is 33 1/3%	or more, check th	is box
and stop here. The organization qualif	ies as a publicly su	pported organiza	tion			>
17a 10% -facts-and-circumstances test						
and if the organization meets the "fact						
meets the "facts-and-circumstances" t	est. The organizati	on qualifies as a	oublicly supported	organization		D
b 10% -facts-and-circumstances test						
more, and if the organization meets the	The second secon			2	and the second s	
organization meets the "facts-and-circle						
18 Private foundation. If the organization						
					edule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2008 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (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 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 - 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 1% of the total of lines 9. 10c, 11, and 12 for the year or \$5,000 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) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 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 2008 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f) % 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 % 19a 33 1/3% support tests - 2008. 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 - 2007. 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

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization
FOOD OPPORTUNITIES ORGANIZATION &
DISTRIBUTION INC.

Organization type (check one):

Filers of:

Section:

Employer identification number
77-0320851

X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. (Note, Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.) General Rule For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules X For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Employer identification number

77-0320851

Part I	Contributors	(see instructions)
--------	--------------	--------------------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1	USDA-EMERGENCY FOOD ASSISTANCE PROGRAM FNS, ROOM 502, PARK OFFICE CENTER 3101 PARK CENTER DRIVE ALEXANDRIA, VA 22302	\$2,479,325.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Aggregate contributions	
2	FOSTER FARMS 3380 W. ASHLAN FRESNO, CA 93722	\$407,790.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Aggregate contributions	
3	FOWLER PACKING 8570 S. CEDAR FRESNO, CA 93725	\$546,020.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Aggregate contributions	
4	KRAFT FOODS, INC. 1055 NORTH AVENUE FRESNO, CA 93725	\$658,188.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
5	FOODLINK FOR TULARE COUNTY 7427 W. SUNNYVIEW AVENUE VISALIA, CA 93291	\$\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
6	AG AGAINST HUNGER 1355 ABBOTT STREET #206 SALINAS, CA 93901	\$802,174.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)

DISTRIBUTION INC.

Name of organization FOOD OPPORTUNITIES ORGANIZATION & Employer identification number

77-0320851

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1,20,41	FOOD COMMODITIES		
1		\$\$\$\$	/ /08
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
100	FOOD COMMODITIES		
2		\$\$	/ /08
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- 7	FOOD COMMODITIES		
3			
		s546,020.	/ /08
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	FOOD COMMODITIES		
4		\$658,188.	/_/08
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	FOOD COMMODITIES		
5		s901,970.	/ /08
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	FOOD COMMODITIES		
6			/ /08

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.

Employer identification number 77-0320851

	organizations Maintaining Donor Advise organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)	*1	H W
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 ad	
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds may	
	for charitable purposes and not for the benefit of the donor of		
Pai			, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		A visit of the second
	Preservation of land for public use (e.g., recreation or p		historically important land area
	Protection of natural habitat	Preservation of cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	ervation contribution in the form of a c	onservation easement on the last day
	of the tax year.		Held at the End of the Year
-	Total number of conservation easements		
b			A
C		ucture included in (a)	***************************************
d	생물 경기가 되지 않는 이번 이번 시간 나는 나는 사람들이 되었다면 하는 사람들이 나가 되었다.		
3	Number of conservation easements modified, transferred, rel		
	year >	cased, extinguished, or terminated by	the organization during the taxable
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		and
6	Staff or volunteer hours devoted to monitoring, inspecting, a	nd enforcing easements during the vea	an-manifold distribution — 155
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organization	T. [10] 보이겠다. 하게 하시는 이 역시 교수의 - 디스에게 들어보고 T. 크린다.[1] = -	
	conservation easements.		
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of	public service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	items.	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and ba	lance sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public sen	vice, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
			2 6
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
a	Revenues included in Form 990, Part VIII, line 1		> \$
b			A CONTRACTOR OF THE CONTRACTOR

FOOD OPPORTUNITIES ORGANIZATION &

Schedule D (Form 990) 2008

DISTRIBUTION INC.

77-0320851 Page 2

Par	t III Organizations Maintaining	Collections of A	t, Historical T	reasures, or (Other Simila	ır Asset	S (continue	ed)
3	Using the organization's accession and oth	ner records, check any	of the following th	at are a significan	t use of its coll	ection item	ns (check a	11
	that apply):							
a	Public exhibition	d	Loan or ex	change programs				
b	Scholarly research	e	Other					
C	Preservation for future generations							
4	Provide a description of the organization's	collections and explai	n how they further	the organization's	s exempt purpo	se in Part	XIV.	
5	During the year, did the organization solicit	or receive donations	of art, historical tre	asures, or other s	imilar assets			
	to be sold to raise funds rather than to be	maintained as part of t	he organization's	collection?		norm.	Yes	No
Par	rt IV Trust, Escrow and Custodi reported an amount on Form 990, F		. Complete if orga	nization answered	"Yes" to Form	990, Part	IV, line 9, c	or .
1a	Is the organization an agent, trustee, custo on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XI						14,500	774
		Company of the Compan					Amount	
C	Beginning balance				1c			
	Additions during the year							
е	Distributions during the year							
f	Ending balance							
2a	Did the organization include an amount on	Form 990, Part X, line	21?	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		- 1	Yes	No
	If "Yes," explain the arrangement in Part XI			***************************************				
	rt V Endowment Funds. Complete		ered "Yes" to Form	990, Part IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two years ba		ears back	(e) Four year	ars back
1a	Beginning of year balance		1-4111-00	(-) me jemes a	157 10:25 2		1-1: 2:	
	Contributions			1				
	Investment earnings or losses							
	Grants or scholarships							
	Other expenditures for facilities			1				
e								
			-	+	-			
1	Administrative expenses			+				
g	End of year balance			-				
2	Provide the estimated percentage of the y							
a	Same a read Activities and activities contesting		_%					
b	The state of the s	%						
C		_%	ie w w		Carrier Control			
3a	Are there endowment funds not in the pos	session of the organiz	ation that are held	and administered	for the organiz	zation	[ve	11.0
	by:						Ye	es No
	(i) unrelated organizations							-
	(ii) related organizations				,		3a(ii)	
b	If "Yes" to 3a(ii), are the related organization						3b	
4	Describe in Part XIV the intended uses of t							
Pa	rt VI Investments - Land, Buildi		1					
	Description of investment	(a) Cost or o basis (investi	100000000000000000000000000000000000000	st or other is (other)	(c) Depreciation	n	(d) Book v	alue
1a	Land							
	Buildings							0.
	Leasehold improvements			75,870.	34,2			,580.
	Equipment			69,746.	240,9			,760.
	Other		6	21,221.	290,0	37.		,184.
	II. Add lines 1a-1e. (Column (d) should equal		umn (B), line 10(c).)		P	901	,524.

77-0320851 Page 3

Part VII Investments - Other Securities. Set (a) Description of security or category (including name of security)	(b) Book value	(c) Me	ethod of valuation	
inancial derivatives and other financial products		20000000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,77972
Closely-held equity interests				
Other				
		7		
otal. (Col (b) should equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related. S		ne 13.		
	(b) Book value		ethod of valuation	on:
(a) Description of investment type	(b) Book value		nd-of-year marke	
		- 8		
		V. 200		
		4		
		E 4		
	100			
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)	- 4 - 1			
Part IX Other Assets. See Form 990, Part X, line				
	Description			(b) Book value
(2)	Becomption			3.4 23.10 7.30
Total. (Column (b) should equal Form 990, Part X, col (B) I Part X Other Liabilities. See Form 990, Part X	line 15.)			
Part X Other Liabilities. See Form 990, Part X (a) Description of liability	, line 25.	(b) Amount		
		(b) Amount		
Federal income taxes	TRO	76 305		
PAYROLL AND RELATED LIABILITE	LES	76,385.		
	- /			
Total. (Column (b) should equal Form 990, Part X, col (B)	line 25.)	76,385.		

FOOD OPPORTUNITIES ORGANIZATION &

77-0320851 Page 4 Schedule D (Form 990) 2008 DISTRIBUTION INC. Part XI | Reconciliation of Change in Net Assets from Form 990 to Financial Statements 21,807,304. Total revenue (Form 990, Part VIII, column (A), line 12) 21,912,968. Total expenses (Form 990, Part IX, column (A), line 25) <105,664.> Excess or (deficit) for the year. Subtract line 2 from line 1 3 Net unrealized gains (losses) on investments 4 Donated services and use of facilities 5 5 Investment expenses 6 Prior period adjustments 7 7 Other (Describe in Part XIV) Total adjustments (net). Add lines 4-8 9 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9. <105,664. 10 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 21,807,304. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments 2b b Donated services and use of facilities c Recoveries of prior year grants 2c d Other (Describe in Part XIV) 2d Add lines 2a through 2d 2e 21,807,304. Subtract line 2e from line 1 3 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 b Other (Describe in Part XIV) c Add lines 4a and 4b 4c 21,807,304. Total revenue, Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.) 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 21,912,968. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments 2b c Losses reported on Form 990, Part IX, line 25 2c 2d d Other (Describe in Part XIV) 2e e Add lines 2a through 2d Subtract line 2e from line 1 21,912,968. 3 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 b Other (Describe in Part XIV) c Add lines 4a and 4b 4c 21,912,968. Total expenses, Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.) Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

2008

Open To Public Inspection

Name of the organization

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.

Employer identification number 77-0320851

Schedule G (Form 990 or 990-EZ) 2008

Part I Fundraising Activities	. Complete if the organization a	inswered "\	'es" to	Form 990, Part IV, I	ine 17.	
Indicate whether the organization rais X Mail solicitations	e X So	licitation of	non-g	overnment grants		
b Email solicitations				nment grants		
c Phone solicitations	g X Sp	ecial fundra	ising	events		
d In-person solicitations 2 a Did the organization have a written of	or oral agreement with any indiv	idual /inalu	ding o	ffinara directora tru	toon or	
key employees listed in Form 990, P	art VII) or entity in connection w	vith profess	ional f	undraising services?	Yes	
b If "Yes," list the ten highest paid ind compensated at least \$5,000 by the						be
compondated at loads \$6,000 by the	organization: Form 550-E2 mer		7	To complete this tal		
(i) Name of individual or entity (fundraiser)	(ii) Activity	fund have c or cor contrib	Did alser ustody trol of utions?	(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			
	3	10	-			
	1	- 19	É			
			3			
		7				
		S. V.				
	100					
	100					
	- 100	- D	7			
		7				
Total -						
3 List all states in which the organization	on is registered or licensed to so	olicit funds	or has	been notified it is ex	empt from registrat	ion or licensing.
			-			

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

FOOD OPPORTUNITIES ORGANIZATION &

Schedule G (Form 990 or 990-EZ) 2008 DISTRIBUTION INC. 77-0320851 Pag

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

77-0320851 Page 2

_		on Form 990-EZ, line 6a. List events with	gross receipts greater th	nan \$5,000. (b) Event #2	(c) Other Events		
			CULTIVATION/		(c) Other Events	(d) Total Events (Add col. (a) through	
				TOURNAMENT	2	col. (c))	
en			(event type)	(event type)	(total number)	001. (0)/	
Revenue	1 Gros	ss receipts	954,584.	45,740.	21,626.	1,021,950	
	2 Less	s: Charitable contributions					
	3 Gros	ss revenue (line 1 minus line 2)	954,584.	45,740.	21,626.	1,021,950	
	4 Cas	h prizes		-			
ses	5 Non	-cash prizes					
Exper	6 Ren	t/facility costs			25,336.	25,336	
Direct Expenses	7 Oth	er direct expenses	261,974.		154,413.	416,387	
	Direct expense summary. Add lines 4 through 7 in column (d)						
	9 Net	income summary. Combine lines 3 and	8 in column (d)		•	580,227	
Pa	art III	Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or r	eported more than		
m		\$15,000 on Form 990-EZ, line 6a.	(a) Diagram	(b) Pull tabs/Instant	4.1011	(d) Total gaming (Add	
Revenue			(a) Bingo	binga/progressive bingo	(c) Other gaming	col. (a) through col. (c	
Re	4 0	- income	1,000				
	1 Gro	ss revenue	4.7				
es	2 Cas	h prizes	700				
suac	3 Non	-cash prizes					
Direct Expenses	77	t/facility costs	1				
	5 Oth	er direct expenses					
	5 0111	er direct expenses	Yes %	Yes %	Yes %		
	6 Volu	inteer labor	☐ No	No	No		
	7 Dire	ct expense summary. Add lines 2 throug	gh 5 in column (d)	***************************************		(
	8 Net	gaming income summary. Combine lines	s 1 and 7 in column (d)				
3						Yes No	
9		e state(s) in which the organization oper		11.0			
	o If "No,"	ganization licensed to operate gaming a Explain:	ctivities in each of these	states?		9a	
		y of the organization's gaming licenses	revoked, suspended or te	erminated during the tax y	year?	10a	
ı	o If "Yes,"	Explain:		1.00 / 10.0			
11	Does th	e organization operate gaming activities	with nonmembers?			11	
		요. 그 그 그 집에 가는 이 지난데요 그렇게 보고싶어 그래요이 이 귀하면요. 이 점이 없어 하는데 없다.					

FOOD OPPORTUNITIES ORGANIZATION &

Scriedule G (Form 990 of 990-EZ) 2008 DIBIRIDOTION TINC:	77-0320	Yes Yes	_
13 Indicate the percentage of gaming activity operated in:	1		
a The organization's facility 13a	%		
b An outside facility 13b	%		
Indicate the percentage of gaming activity operated in: The organization's facility An outside facility The organization's facility The organization's facility The organization's facility The organization's facility The organization's facility The organization's gaming/special events books and records: The organization has an address of the person who prepares the organization's gaming/special events books and records: The organization have a contract with a third party from whom the organization receives gaming revenue? The organization have a contract with a third party from whom the organization receives gaming revenue? The organization have a contract with a third party from whom the organization receives gaming revenue? The organization receives gaming revenue? The organization receives gaming revenue? The organization receives gaming revenue? The organization receives gaming revenue? The organization receives gaming revenue? The organization organization receives gaming revenue? The organization receives gaming reven	cords:	3 3	
Name ►			
Address >		Sec.	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a	
b If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	ount		
of gaming revenue retained by the third party > \$			
c If "Yes," enter name and address:	- 0		
Name >		-	
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			
		17a	
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the	3		

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE M (Form 990)

NonCash Contributions

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

2008

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990.

FOOD OPPORTUNITIES ORGANIZATION &
DISTRIBUTION INC.

Employer identification number 77-0320851

T CII	Types of Froperty	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of dete revenue		g	
1	Art - Works of art		1					
2	Art - Historical treasures							
3	Art - Fractional interests	1	-					
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							-
10	Securities - Closely held stock				=			
11	Securities - Partnership, LLC, or		1 - 7	175				
10	trust interests		6					
12 13	Securities - Miscellaneous Qualified conservation contribution					_		_
13				10.0				
14	(historic structures) Qualified conservation contribution (other)							
14							_	
15	Real estate - Residential						_	_
16	Real estate - Commercial							_
17	Real estate - Other	-	470					_
18	Collectibles	X		15 770 567	GEN. INV. AT	DAT	D 17	ATT
19	Food inventory	Δ		13,110,301.	GEN. INV. AI	LAT	K V	ALIU
20	Drugs and medical supplies	-					_	_
21	Taxidermy							
22	Historical artifacts						_	
23	Scientific specimens		All-					
24	Archeological artifacts							_
25	Other ()							
26	Other ()							
27	Other ()		-	2				
28	Other ()		in 1200.5					_
29	Number of Forms 8283 received by the organization completed Form 828							
							Yes	No
30a	During the year, did the organization receive by						7111	
	at least three years from the date of the initial							-
	the entire holding period?					30a		X
	If "Yes," describe the arrangement in Part II.						7,	
31	Does the organization have a gift acceptance					31		X
32a	Does the organization hire or use third parties contributions?					32a		х
b	If "Yes," describe in Part II.							
33	If the organization did not report revenues in c describe in Part II.	olumn (c) fo	or a type of pro	perty for which column (a) is	checked,			

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

FOOD OPPORTUNITIES ORGANIZATION & DISTRIBUTION INC.

Employer identification number 77-0320851

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS REVIEWED BY THE CFO
AND A MEMBER OF THE AUDIT COMMITTEE PRIOR TO FILING. COPIES ARE AVAILABLE
TO THE BOARD AND GENERAL PUBLIC UPON REQUEST.
FORM 990, PART VI, SECTION B, LINE 12C: DURING AUDIT PROCESS, BOARD IS
ASKED TO DISCLOSE ANY POSSIBLE RELATED PARTY TRANSACTIONS AND CONFLICTS OF
INTEREST.
FORM 990, PART VI, SECTION B, LINE 15: BOARD OF DIRECTORS APPROVES
COMPENSATION PAID TO CEO. APPROVED IN CLOSED SESSION OF MEETING AND
DOCUMENTED. REMAINDER OF EMPLOYEES ARE DETERMINED BY CEO WITHIN
PREDETERMINED PAY SCALES. PAY SCALES WERE DEVELOPED BY MANAGEMENT STUDENTS
AT CALIFORNIA STATE UNIVERSITY-FRESNO.
FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL STATEMENTS ARE MAINTAINED
AT THE COMMUNITY FOOD BANK OFFICES AND ARE AVAILABLE FOR REVIEW AT THAT
LOCATION.

Current Year Deduction	0	0	0	0.		3,982.	209.	115.	702.	1,384.	192.	525.	2,333.	1,871.	431.	2,328.	1,512.	81.
Current Sec 179				0														
Accumulated Depreciation				0		11,946.	226.	202.	761.	1,384.	192.	525.	2,333.					
Basis For Depreciation				0.		155,314.	8,133.	4,500.	27,385.	53,985.	7,500.	20,481.	35,000.	6,859.	22,400.	121,080.	8,316.	1,057.
Reduction In Basis			1	0	1													
Bus % Excl					V		4											
Unadjusted Cost Or Basis				0.		155,314.	8,133.	4,500.	27,385.	53,985.	7,500.	20,481.	35,000.	6,859.	22,400.	121,080.	8,316.	1.057.
No.	16	16	16			9100	016	016	016	016	016	910	016	16	016	016	16	7
Life	000.	000.	000.			39.0	39.0	39.0	39.0	39.0	39.0	39.0	15.0	3.70	39.0	39.0	3.70	3 30
Method						SL	SL	SL	SL	SL	SL	SL	SL	SL	SI	SL	SL	GT.
Date Acquired						063005SL	051507SL	092706SL	061207SL	063007SL	061907SL	5063007	W063007SL	070108SL	100108SL	100108SL	103108SL	031909ST.
Description				* 990 PAGE 10 TOTAL OTHER	BUILDINGS	32FREEZER/COOLER		S FOF	Ti-	ARGES F	CONCRETE GUARDS FOR FREEZER/COOLER	62WAREHOUSE IMPROVEMENTS063007SL	ELECTRICAL WORK ON NEW 63BUILDING	73SPRINKLER SYSTEM	74COOLER	75FREEZER	76FREEZER BUMPS	DOCK STRIP DOOR
Asset No.	Ħ	m	19	* 0	Д	32F	57 <u>1</u>	580	59F	60F	61F	62W	63B	738	74C	75F	76F	7 T

828102 04-25-08

(D) - Asset disposed

2008 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

066

Asset No.	Description	Date Acquired N	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* 990 PAGE 10 TOTAL BUILDINGS					472,010.		0	472,010.	17,569.	0.	15,665.
	FURNITURE & FIXTURES											
9	6(D)PHONE SYSTEM	091797SL	L 5	00.	16	2,000.		1	2,000.	2,000.		0
7	7(D)PENTIUM II COMPUTER022299SL	1022299SI	L 7	00.	16	1,593.			1,593.	1,593.		0
00	8(D)COMPUTER	070899SL	L 7	00.	16	2,732.	V		2,732.	2,732.		0
ŏ	9OFFICE	072299SL		7.00	16	175.			175.	175.		0.
10	10OFFICE EQUIPMENT	083099SL	L 7	00.	16	129.	2		129.	129.		0
11	11 (D) COMPUTER	043000SL	L 7	00.	16	1,259.			1,259.	1,259.		0.
12	12(D)COMPUTER	092600SL	L 7	00.	16	806.			806.	806.		0.
13(13COMPUTER	013001SL	Г 7	00.	16	849.			849.	849.		0.
14	14FAX MACHINE	051701SL	L 7	00.	16	483.			483.	483.		0.
15(15COMPUTER-LAPTOP	060801SL	L 7	00.	16	1,512.			1,512.	1,512.		0.
16	16COMPUTER-SERVER	021202SL	L S	00.	16	1,800.		j	1,800.	1,800.		0
17	SION SOFTWA	043002SL	n L	00.	16	17,275.			17,275.	17,275.		0
34.	DELL COMPUTERS AND SERVER	043005SL	L S	00.	16	14,455.			14,455.	9,155.		2,891.
43(43OFFICE EQUIPMENT	093005SL	L 7	00.	16	16,218.			16,218.	6,372.		2,317.
55		052307SL	L 7	00.	16	26,444.			26,444.	4,093.		3,778.
56	(D)TELEPHONE & PAGING 56SYSTEM	06300781		7.00 1	91	10,210.			10,210.	1,459.		0.

828102 04-25-08

(D) - Asset disposed

2008 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

066

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Bus Cost Or Basis Ex	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
651	65RACKING	052908SL		10.0016	16	44,551.			44,551.	371.		4,455.
99	66PLUMBING WASH STATION	062308	8SL	3.70	16	3,859.			3,859.			1,052.
718		071008SL		7.00	16	6,923.		1	6,923.			989.
728	IRCROSOFT EXC ERVER	103108SL	SL	5.00	16	1,712.			1,712.			228.
- pad	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES					154,985.		.0	154,985.	52,063.	0	15,710.
	MACHINERY & EQUIPMENT											
181	18PRODUCE BINS	033195SL		10.0016	16	1,618.	7		1,618.	1,618.		0
201	20PLASTIC FIELD BINS	031598	8SI	7.00	16	3,800.			3,800.	3,800.		0
210	21CARDINAL SCALE	122297	7SL	7.00	16	2,384.			2,384.	2,384.		0
22	22MITSUBISHI FORKLIFT	070998	8SL	7.00	16	18,726.			18,726.	18,726.		0
23	23STORAGE TRAILER	102400SL	SL	7.00	16	2,026.	T		2,026.	2,026.		0
241	24PLASTIC BINS	031901SL		7.00	16	3,969.			3,969.	3,969.		0
251	25FORKLIFT-SPLIT	032700SL		7.00	16	11,596.			11,596.	11,596.		0
261	26FORKLIFT	081501SL		2.00	16	9,148.			9,148.	9,148.		0
281	28POWERED PALLET JACK	111101SL		2.00	16	3,444.	1		3,444.	3,444.		0
291	29PALLET REEFER	101801SL		5.00	16	23,838.			23,838.	23,838.		0
311	31BRYANT CONDENSING UNIT	UNITO 6030381		2.00	16	1,800.	i		1,800.	1,800.		0
3315	15 PALLET JACKS	063005SL		5.00	16	6,937.			6,937.	4,161.		1,389.

828102 04-25-08

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2008 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

066

Asset No.	Description	Date Acquired Method	lod Life	e No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
35	35BINS	043005SL	10.	0016	7,500.			7,500.	2,375.		750.
42		063006SL	5.0	0 16	9,554.			9,554.	3,822.		0.
44	WAREHOUSE EQUIPMENT-2	071805SL	5.0	0 16	30,179.		1	30,179.	17,605.		6,036.
45	IC RYDER	JACKS081005SL	5.0	0 16	21,167.			21,167.	12,347.		4,234.
46	ELECTRIC DEEP REACH	121605SL	5.0	0 16	36,345.	V		36,345.	18,173.		7,269.
47	474-LIFT MOUNT SCALES	113005EL	5.0	0 16	7,234.			7,234.	3,738.		1,447.
48	48WAREHOUSE EQUIPMENT	093005SL	5.0	0 16	7,553.			7,553.	4,155.		1,511.
49	49LOT SAFE T-RAIL	073105SL	7.00	0 16	5,354.			5,354.	2,231.		765.
50	50PALLET RACKS	073105SL	10.	0016	11,960.			11,960.	3,488.		1,196.
51	51STRETCH WRAP MACHINE	090705SL	7.0	0 16	8,588.			8,588.	3,476.		1,227.
7.0	A.	100908EL	5.0	0 16	2,500.			2,500.			375.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT				237,220.		0	237,220.	157,920.	0	26,199.
	TRANSPORTATION EQUIPMENT										
7	N.	052799SL	7.00	0 16	40,162.			40,162.	40,162.		0
4	1999 INTERNATIONAL	060499SL	7.0	00 16	68,600.			68,600.	68,600.		.0
Ω	SCARGO VAN	032700SL	7.00	0 16	19,250.			19,250.	19,250.		0.
38	2005 FREIGHTLINER 38M2106	05300581	5.0	00 16	64,156.			64,156.	39,562.		12,831.
39	39CON AGRA TRUCK	063005SL	5.0	00 16	41,000.			41,000.	24,600.		8,200.

828102 04-25-08

(D) - Asset disposed

	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
0	JEEP AND FORD EXPLORER 40(DONATED)	063005SL		5.00	16	10,450.			10,450.	6,270.		2,090.
H	2 FORD WINDSTAR VANS	18900E90		5.00	16	3,475.			3,475.	1,390.		695.
2	52TRAILER - VIN#4266564	121806SL		2.00	16	15,810.		1	15,810.	4,743.		3,162.
3	53TRAILER - VIN#U553905	122106SL		5.00	16	13,667.			13,667.	4,100.		2,733.
4	642007 HINE VIN #S50812	091207SL		2.00	16	100,045.	V		100,045.	15,007.		20,009.
00	2008 HINO VIN #52266 - 68LINCY	121308SL		2.00	16	88,039.			88,039.			8,804.
9		3040109S		2.00	16	156,567.			156,567.			7,828.
	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPME	IV)				621,221.		0	621,221.	223,684.	0.	66,352.
	* GRAND TOTAL 990 PAGE 10 DEPR	F)			P	1,485,436.		0.	1,485,436.	451,236.	0.	123,926.
											1	

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone