

Return of Organization Exempt From Income Tax

2014

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C Name of organization Harry Chapin Food Bank of Southwest Florida Inc. D Employer identification no. 59-2332120. E Telephone number (239) 334-7007. F Name and address of principal officer: Fort Myers, FL 33901. H(a) Is this a group return for subordinates? No. H(b) Are all subordinates included? Yes. H(c) Group exemption number. I Tax-exempt status: 501(c)(3). J Website: www.harrychapinfoodbank.org. K Form of organization: Corporation. L Year of formation: 1983. M State of legal domicile: FL.

Part I Summary

Table with 4 columns: Description, Prior Year, Current Year. Rows include: 1 Mission statement, 2-7a Governance metrics, 8-12 Revenue, 13-19 Expenses, 20-22 Net Assets or Fund Balances.

Part II Signature Block

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

Sign Here: Keith Scoggins, Signature of officer, Date, Keith Scoggins, Chairman, Type or print name and title.

Paid Preparer Use Only: Jeffrey M Tuscan CPA, Preparer's signature, Date 10-26-2015, Check self-employed, PTIN P00184439, Firm's name Tuscan & Company PA, Firm's address 12621 World Plaza Ln Bldg 55 Fort Myers FL 33907, Firm's EIN, Phone no. 239-333-2090.

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

To overcome hunger in Charlotte, Collier, Glades, Hendry and Lee Counties through education in a cooperative effort with affiliated agencies in the procurement and distribution of food, equitably and without discrimination.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] Yes [] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 32,441,604 including grants of \$ 28,103,779) (Revenue \$)

Provided 18.4 million pounds of nutritious, quality food through 155 partner agencies and direct distribution to 320 pantries at 80 sites. The three largest programs include retail store reclamation and pick-up, agency distributions and mobile pantries.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 32,441,604

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	X	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
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		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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O check

Table with columns for line numbers (1a-14b), descriptions of tax items, and Yes/No columns. Includes sections for Form 1096, Form W-2G, Form W-3, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4966, Form 501(c)(7), Form 501(c)(12), Form 4947(a)(1), and Form 501(c)(29).

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members... 2 Did any officer, director, trustee... 3 Did the organization delegate control... 4 Did the organization make any significant changes... 5 Did the organization become aware... 6 Did the organization have members... 7a Did the organization have members... 7b Are any governance decisions... 8 Did the organization contemporaneously document... 8a The governing body? 8b Each committee with authority... 9 Is there any officer, director, trustee...

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters... 10b If "Yes," did the organization have written policies... 11a Has the organization provided a complete copy... 11b Describe in Schedule O the process... 12a Did the organization have a written conflict of interest policy... 12b Were officers, directors, or trustees... 12c Did the organization regularly and consistently monitor... 13 Did the organization have a written whistleblower policy... 14 Did the organization have a written document retention... 15 Did the process for determining compensation... 15a The organization's CEO, Executive Director... 15b Other officers or key employees... 16a Did the organization invest in, contribute assets to... 16b If "Yes," did the organization follow a written policy...

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed FL
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:
The Organization (239)334-7007, 3760 Fowler Street, Fort Myers, FL 33901

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <u>Noelle Melanson</u> Director/Chairperson	6.00	X		X			0	0	0	
(2) <u>Raymond Pavelka</u> Director/Vice Chairperson	5.00	X		X			0	0	0	
(3) <u>Craig Folk</u> Director/Treasurer	5.00	X		X			0	0	0	
(4) <u>Kristina Rodriguez</u> Director/Secretary	5.00	X		X			0	0	0	
(5) <u>Rabbi Jeremy Barras</u> Director	2.00	X					0	0	0	
(6) <u>John Belisle</u> Director	2.00	X					0	0	0	
(7) <u>William M Dillon</u> Director	2.00	X					0	0	0	
(8) <u>David Fry</u> Director	2.00	X					0	0	0	
(9) <u>Jan-Erik Hustrulid</u> Director	2.00	X					0	0	0	
(10) <u>Maura Matzko</u> Director	2.00	X					0	0	0	
(11) <u>Anne Rose</u> Director	2.00	X					0	0	0	
(12) <u>Brian Schwartz</u> Director	2.00	X					0	0	0	
(13) <u>P. Keith Scoggins</u> Director	2.00	X					0	0	0	
(14) <u>Bianca Ross</u> Director	2.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) <u>Al Brislain</u> CEO	<u>40.00</u>			X				121,584	0	33,913
(16) -----	-----									
(17) -----	-----									
(18) -----	-----									
(19) -----	-----									
(20) -----	-----									
(21) -----	-----									
(22) -----	-----									
(23) -----	-----									
(24) -----	-----									
(25) -----	-----									
1b Sub-total								121,584	0	33,913
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								121,584	0	33,913

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NLTG, Inc dba One to One Group, 7324 Delainey Ct., FL 34240	Direct Mail	278,899
Total Quality Logistics, 601 South Harbour Island Blvd, FL 33602	Transportation	122,849

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 264,755					
	b Membership dues	1b					
	c Fundraising events	1c 457,333					
	d Related organizations	1d					
	e Government grants (contributions) . .	1e 1,971,170					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 30,346,647					
	g Noncash contributions included in lines 1a-1f: \$	28,140,172					
	h Total. Add lines 1a-1f		33,039,905				
Program Service Revenue	2a Program Service Revenue	Business Code 624210	115,548	115,548			
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f		115,548				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,396			2,396	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			10,000				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)		10,000			
	d Net gain or (loss)			10,000	10,000		
	8a Gross income from fundraising events (not including \$ 457,333 of contributions reported on line 1c). See Part IV, line 18	a	1,044,689				
		b Less: direct expenses	b	69,247			
		c Net income or (loss) from fundraising events		975,442			975,442
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a	604,069					
	b Less: cost of goods sold	b	572,062				
	c Net income or (loss) from sales of inventory		32,007	32,007			
Miscellaneous Revenue		Business Code					
11a Transportation Reimburs	624210	24,942	24,942				
	b _____						
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d		24,942					
12 Total revenue. See instructions		34,200,240	182,497	0	977,838		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	22,069,834	22,069,834		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	6,033,945	6,033,945		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	119,804	90,495	8,959	20,350
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,126,354	1,606,160	159,010	361,184
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . .	128,713	97,225	9,625	21,863
9 Other employee benefits	466,579	361,100	31,539	73,940
10 Payroll taxes	176,166	133,068	13,174	29,924
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17 . .	276,119			276,119
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . .	46,334	34,998	3,465	7,871
12 Advertising and promotion				
13 Office expenses				
14 Information technology	57,959	44,878	4,494	8,587
15 Royalties				
16 Occupancy	107,977	98,923	5,814	3,240
17 Travel	21,353	12,289	5,234	3,830
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	139,417	132,046	842	6,529
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	357,572	357,572		
23 Insurance	59,702	46,324	3,990	9,388
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Vehicle	321,126	310,924	6,330	3,872
b Agency Program	250,724	250,724		
c Transportation	254,827	251,971	2,856	
d Pick and Pack Out	183,577	183,577		
e All other expenses	430,861	325,551	44,331	60,979
25 Total functional expenses. Add lines 1 through 24e .	33,628,943	32,441,604	299,663	887,676
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	265,947	1	326,739
	2 Savings and temporary cash investments	1,733,698	2	1,926,439
	3 Pledges and grants receivable, net	152,592	3	236,575
	4 Accounts receivable, net	188,246	4	270,623
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	1,256,242	8	1,285,275
	9 Prepaid expenses and deferred charges	69,215	9	29,885
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 6,698,753		
	b Less: accumulated depreciation	10b 1,874,137	4,671,691	10c 4,824,616
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	28,230	12	27,447
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	4,269	15	3,441
16 Total assets. Add lines 1 through 15 (must equal line 34)	8,370,130	16	8,931,040	
Liabilities	17 Accounts payable and accrued expenses	404	17	32,957
	18 Grants payable	204,232	18	284,793
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	2,376,650	23	2,184,957
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	170,311	25	238,503
	26 Total liabilities. Add lines 17 through 25	2,751,597	26	2,741,210
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,778,567	27	5,509,837
	28 Temporarily restricted net assets	812,468	28	652,495
	29 Permanently restricted net assets	27,498	29	27,498
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	5,618,533	33	6,189,830	
34 Total liabilities and net assets/fund balances	8,370,130	34	8,931,040	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	34,200,240
2	Total expenses (must equal Part IX, column (A), line 25)	2	33,628,943
3	Revenue less expenses. Subtract line 2 from line 1	3	571,297
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,618,533
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,189,830

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
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	X	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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

2014

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Name of the organization

Employer identification number

Harry Chapin Food Bank of Southwest Florida Inc

59-2332120

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows include: 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)); 15 Public support percentage from 2013 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2014; 16b 33 1/3% support test - 2013; 17a 10%-facts-and-circumstances test - 2014; 17b 10%-facts-and-circumstances test - 2013; 18 Private foundation.

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

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

Section A. Public Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or bus. under sec 513; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 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; c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2013 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2013 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2014

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

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

Name of the organization Harry Chapin Food Bank of Southwest Florida Inc	Employer identification number 59-2332120
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Organization type (check one):

- Filers of:** **Section:**
- Form 990 or 990-EZ 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

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 an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization 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), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization <u>Harry Chapin Food Bank of Southwest Florida Inc</u>	Employer identification number <u>59-2332120</u>
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<u>Florida Department of Agriculture</u> <u>407 South Calhoun Street</u> <u>Tallahassee, FL 32399</u>	\$ <u>2,113,708</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <u>Harry Chapin Food Bank of Southwest Florida Inc</u>	Employer identification number <u>59-2332120</u>
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	<u>USDA food commodities</u> _____ _____	\$ <u>1,530,358</u>	_____
—	_____ _____ _____	\$ _____	_____
—	_____ _____ _____	\$ _____	_____
—	_____ _____ _____	\$ _____	_____
—	_____ _____ _____	\$ _____	_____
—	_____ _____ _____	\$ _____	_____
—	_____ _____ _____	\$ _____	_____
—	_____ _____ _____	\$ _____	_____

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2014

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Harry Chapin Food Bank of Southwest Florida Inc Employer identification number 59-2332120

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	28,230	13,796			
b Contributions		12,000			
c Net investment earnings, gains, and losses	682	2,434			
d Grants or scholarships					
e Other expenditures for facilities and programs	1,074				
f Administrative expenses	391				
g End of year balance	27,447	28,230			

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 52.00 %
 - c Temporarily restricted endowment 48.00 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|-----|----|
| (i) unrelated organizations | X | |
| (ii) related organizations | | X |
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	952,422	518,304		1,470,726
b Buildings		3,349,005	485,623	2,863,382
c Leasehold improvements				
d Equipment		383,860	232,959	150,901
e Other STMDIE		1,495,162	1,155,555	339,607

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 4,824,616

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) Endowment Funds	27,447	FMV
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	27,447	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Accrued Payroll and Benefits	145,080
(3) Compensated Absences	93,423
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	238,503

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
 Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	34,496,183
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	34,496,183
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	(295,943)	
c	Add lines 4a and 4b		4c	(295,943)
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	34,200,240

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
 Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	33,924,886
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	572,062	
e	Add lines 2a through 2d		2e	572,062
3	Subtract line 2e from line 1		3	33,352,824
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	276,119	
c	Add lines 4a and 4b		4c	276,119
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	33,628,943

Part XIII Supplemental Information.

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

01. Other revenues included on Form 990 (Part XI, line 4b)

Cost of food of \$572,062 included in functional expenses on the Audited Statements was included on Part VII line 8c and Part VII line 10b respectively on the Form 990.

Professional Fundraising expenses of \$276,119 included net of fundraising revenue on the Audited Statement were reported on Part IX line 11e on the Form 990.

Part XIII Supplemental Information (continued)

02. Other expenses not included on Form 990 (Part XII, line 2d)

Cost of food of \$572,062 included in functional expenses on the Audited Statements was included on Part VII line 8c and Part VII line 10b respectively on the Form 990.

03. Other expenses included on Form 990 (Part XII, line 4b)

Professional Fundraising expenses of \$276,119 included net of fundraising gross proceeds on the Audited Statements was recorded in Part IX line 11e on the Form 990.

04. Footnote for uncertain tax position under FIN 48 (Part X)

Management has analyzed its various Federal filing positions and believes that the Organizations income tax filing positions and deductions are well documented, supported and contain no uncertain tax positions. Management believes the Organization met the requirements to maintain its tax-exempt status and has no income subject to unrelated business income tax. Additionally, management believes that no accruals for tax liabilities, interest or penalties are required. Therefore, no reserves for uncertain income tax positions have been recorded. The informational returns (Form 990) for the prior three fiscal years are open and subject to possible examination.

**SCHEDULE G
(Form 990 or 990-EZ)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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.

2014

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization

Employer identification number

Harry Chapin Food Bank of Southwest Florida Inc

59-2332120

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

Form 990-EZ filers are not required to complete this part.

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

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

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 NLTG Inc dba One to One G 7324 Delainey Ct, FL 34240	Direct Mail		X	859,144	276,119	583,025
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				859,144	276,119	583,025

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

Florida

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

		(a) Event #1 <u>Hunger Walk</u> (event type)	(b) Event #2 <u>Fowler St</u> (event type)	(c) Other events <u>3</u> (total number)	(d) Total events (add col. (a) through col. (c))	
Revenue	1	Gross receipts	534,354	510,335	1,044,689	
	2	Less: Contributions	304,627	152,706	457,333	
	3	Gross income (line 1 minus line 2)	(304,627)	534,354	357,629	
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	9,796	19,307	40,144	69,247
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				69,247
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				518,109	

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

Harry Chapin Food Bank of Southwest Flor

Employer identification number

59-2332120

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Abundant Grace Fellowship 2701 Cleveland Ave. 2 Fort Myers, FL 33908	42-1567485	3		10,777	Average Cost	Food commodities	Food for public distribution
(2)	Act Shelter PO Box 60401 Fort Myers, FL 33906	59-1864735	3		5,294	Average Cost	Food commodities	Food for public distribution
(3)	Adventist Comm Cape Coral 829 SE 47th Terrace Cape Coral, FL 33990	41-2279695	3		116,651	Average Cost	Food commodities	Food for public distribution
(4)	Afcaam Afterschool Program 3681 Michigan Ave. Fort Myers, FL 33916	65-0889322	3		10,847	Average Cost	Food commodities	Food for public distribution
(5)	All Souls Episcopal Pantry 14640 N. Cleveland Ave. North Fort Myers, FL 33903	65-0151247	3		99,525	Average Cost	Food commodities	Food for public distribution
(6)	Alva United Methodist P.O. Box 96 Alva, FL 33920	59-0250411	3		121,972	Average Cost	Food commodities	Food for public distribution
(7)	Amigos Center 106 S. 2nd St. Immokalee, FL 34142	59-3646095	3		283,931	Average Cost	Food commodities	Food for public distribution
(8)	Animal Refuge Center 18011 Old Bayshore Rd North Fort Myers, FL 33917	65-0057419	3		11,898	Average Cost	Food commodities	Food for public distribution
(9)	A2H of South Georgia 1411 Harbin Circle Valdosta, GA 31601	58-2208545	3		72,240	Average Cost	Food commodities	Food for public distribution
(10)	Harlem Heights Improvement 10511 Gladiolus Ave. Fort Myers, FL 33908	65-0323306	3		505,716	Average Coast	Food commodities	Food for public distribution

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

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

EEA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047

2014

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Name of the organization

Harry Chapin Food Bank of Southwest Florida Inc

Employer identification number

59-2332120

Part I General Information on Grants and Assistance

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Bonita Springs Asst Ofc 25300 Bernwood Dr 6 Bonita Springs, FL 34135	59-2337909	3		230,764	Average Cost	Food commodities	Food for public distribution
(2)	Bootstrap Ministry, Inc. 4801 Orange Grove Blvd. North Fort Myers, FL 33903	26-3644653	3		27,013	Average Cost	Food commodities	Food for public distribution
(3)	Broadway Church of God 3309 South Broadway Street Fort Myers, FL 33901	59-2398091	3		989,488	Average Cost	Food commodities	Food for public distribution
(4)	C.H.A.P.S., Inc. 18200 Paulson Dr. Port Charlotte, FL 33954	65-0498294	3		81,920	Average Cost	Food commodities	Food for public distribution
(5)	AIDS Healthcare Foundation 110 Se 10th Street Ste 1960 Fort Lauderdale, FL 33316	20-8744009	3		138,163	Average Cost	Food commodities	Food for public distribution
(6)	Cape Coral Caring Center 4645 SE 15th Ave. Cape Coral, FL 33904	65-0262583	3		83,080	Average Cost	Food commodities	Food for public distribution
(7)	Cape Coral Community Coop. 1105 Cultural Pkwy Cape Coral, FL 33991	59-2602772	3		141,726	Average Cost	Food commodities	Food for public distribution
(8)	Baker Center School 311 East Charlotte Ave Punta Gorda, FL 33950	65-0139525	3		26,496	Average Cost	Food commodities	Food for public distribution
(9)	Casa Maria Soup Kitchen 7775 Vanderbilt Beach Road Naples, FL 34120	59-2617151	3		33,189	Average Cost	Food commodities	Food for public distribution
(10)	Catholic Charity Bonita Spg 4235 Michigan Link Fort Myers, FL 33916	59-2473176	3		366,422	Average Cost	Food commodities	Food for public distribution

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

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EEA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047

2014

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Name of the organization

Harry Chapin Food Bank of Southwest Florida Inc

Employer identification number

59-2332120

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Catholic Charity Ft Myers 4235 Michigan Link Fort Myers, FL 33916	65-0889322	3		539,262	Average Cost	Food commodities	Food for public distribution
(2)	Catholic Charity Hendry Gla 4235 Michigan Link Fort Myers, FL 33916	59-2473176	3		100,536	Average Cost	Food commodities	Food for public distribution
(3)	All Faiths Food Bank 8171 Blaikie Court Sarasota, FL 34240	65-0115814	3		215,214	Average Cost	Food commodities	Food for public distribution
(4)	Charleston Pk Neighborhood 2541 Charleston Park Alva, FL 33920	59-3080357	3		51,780	Average Cost	Food commodities	Food for public distribution
(5)	Charlotte Cty Homeless Coal P.O. Box 380157 Murdock, FL 33938	65-0139525	3		394,584	Average Cost	Food commodities	Food for public distribution
(6)	Children Advocacy Center 3830 Evans Ave Fort Myers, FL 33901	59-2824352	3		109,834	Average Cost	Food commodities	Food for public distribution
(7)	Christ Community Church 4050 Colonial Blvd. Fort Myers, FL 33966	59-6514378	3		18,715	Average Cost	Food commodities	Food for public distribution
(8)	Clewiston Seventh Day Adven 545 E. Obispo Ave. Clewiston, FL 33440	20-5695382	3		7,067	Average Cost	Food commodities	Food for public distribution
(9)	American Legion Po Box 1055 Indianapolis, IN 46206	35-0144250	3		27,069	Average Cost	Food commodities	Food for public distribution
(10)	Community Co-op Ministries P.O. Box 2143 Fort Myers, FL 33902	59-2602772	3		339,877	Average Cost	Food commodities	Food for public distribution

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

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EEA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

2014

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Name of the organization

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Employer identification number

59-2332120

Part I General Information on Grants and Assistance

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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Community Resource Ctr Inc 5400 Riverside Dr. Punta Gorda, FL 33982	65-0496363	3		79,772	Average Cost	Food commodities	Food for public distribution
(2)	Compassion Avenue Inc P.O. Box 418 Clewiston, FL 33440	51-0477088	3		50,424	Average Cost	Food commodities	Food for public distribution
(3)	Coronado High School 3057 Cleveland Ave Fort Myers, FL 33901	75-3255798	3		20,865	Average Cost	Food commodities	Food for public distribution
(4)	Daniels Road Baptist Church 5878 Daniels Road Fort Myers, FL 33912	59-2350694	3		193,251	Average Cost	Food commodities	Food for public distribution
(5)	SVDP Church Elem Pantries 13031 Palm Beach Blvd Fort Myers, FL 33905	59-2824352	3		509,558	Average Cost	Food commodities	Food for public distribution
(6)	Discipleship Driven Ministr 3480 Depew Ave Port Charlotte, FL 33952	20-5840548	3		661,958	Average Cost	Food commodities	Food for public distribution
(7)	Americas Snd Harvest of Tam 4702 Transport Drive Bldg 6 Tampa, FL 33605	59-2116576	3		14,236	Average Cost	Food commodities	Food for public distribution
(8)	Eben-Ezer Baptist Church P.O. Box 6580 Fort Myers, FL 33911	65-0975889	3		44,833	Average Cost	Food commodities	Food for public distribution
(9)	Ebenezer Food Pantry P.O Box 6580 Fort Myers, FL 33911	65-0120343	3		14,890	Average Cost	Food commodities	Food for public distribution
(10)	Edgewater United Methodist 19190 Cochran Blvd. Port Charlotte, FL 33948	65-0235009	3		369,024	Average Cost	Food commodities	Food for public distribution

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

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EEA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Englewood E.Church of Chris 9600 Gulfstream Blvd. Englewood, FL 34224	26-3786816	3		24,564	Average Cost	Food commodities	Food for public distribution
(2)	Everglades City Comm Church 101 Copeland Ave S Everglades City, FL 34139	22-3934843	3		202,414	Average Cost	Food commodities	Food for public distribution
(3)	We Care Outreach Center 4231 Desoto Ave Fort Myers, FL 33905	61-1485045	3		163,827	Average Cost	Food commodities	Food for public distribution
(4)	F.I.S.H. of Sanibel 1630-B Periwinkle Way Sanibel, FL 33957	20-8892375	3		17,077	Average Cost	Food commodities	Food for public distribution
(5)	Faith Fellowship Food Pantr 6111 South Pointe Blvd. Fort Myers, FL 33919	65-0827752	3		24,471	Average Cost	Food commodities	Food for public distribution
(6)	Faith Presbyterian Church/W 4544 Coronado Pkwy Cape Coral, FL 33904	59-1021543	3		88,783	Average Cost	Food commodities	Food for public distribution
(7)	Family Resource Center 4209 Tamiami Trail East Naples, FL 34112	59-2473176	3		252,589	Average Cost	Food commodities	Food for public distribution
(8)	First Assembly of God 3220 Martin Luther King Blvd. Fort Myers, FL 33916	59-0782460	3		380,261	Average Cost	Food commodities	Food for public distribution
(9)	Wake America of Southwest F 2135 Central Ave Fort Myers, FL 33901	65-0997803	3		898,845	Average Cost	Food commodities	Food for public distribution
(10)	First Baptist Church of FM 130 Connecticut St. Fort Myers Beach, FL 33931	59-2495484	3		130,226	Average Cost	Food commodities	Food for public distribution

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

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EEA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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OMB No. 1545-0047

2014

**Open to Public
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Name of the organization

Harry Chapin Food Bank of Southwest Florida Inc

Employer identification number

59-2332120

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- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	First Baptist Church/Horn o 459 Gill St. Punta Gorda, FL 33950	59-6167083	3		55,362	Average Cost	Food commodities	Food for public distribution
(2)	First Community Congregatio 200 E Leland Heights Blvd. Lehigh Acres, FL 33936	59-1969598	3		1,244,031	Average Cost	Food commodities	Food for public distribution
(3)	First Macedonia 411 E. Charlotte Ave. Punta Gorda, FL 33950	65-0360165	3		11,505	Average Cost	Food commodities	Food for public distribution
(4)	First United Methodist Chur 303 N 9th St Immokalee, FL 34142	59-1963954	3		10,547	Average Cost	Food commodities	Food for public distribution
(5)	FGCU Food Pantry 10501 FGCU Blvd. South Fort Myers, FL 33965	65-0403969	Government		11,085	Average Cost	Food commodities	Food for public distribution
(6)	Bethel Assembly of God 1445 N Boonville Ave Springfield, MO 65802	44-0577787	3		16,214	Average Cost	Food commodities	Food for public distribution
(7)	Vineyard Community Church 923 SE 47th Terrace Cape Coral, FL 33904	59-2706764	3		66,523	Average Cost	Food commodities	Food for public distribution
(8)	Fort Myers Christian Center 3500 Fowler St. Fort Myers, FL 33901	65-0937140	3		196,782	Average Cost	Food commodities	Food for public distribution
(9)	Ft. Myers Shores Seventh Da 14830 Palm Beach Blvd. Fort Myers, FL 33905	65-1136427	3		22,053	Average Cost	Food commodities	Food for public distribution
(10)	Ft. Myers Rescue Mission 6900 Mission Lane Fort Myers, FL 33916	59-2469860	3		980,243	Average Cost	Food commodities	Food for public distribution

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

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EEA

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

2014

**Open to Public
Inspection**

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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Fort Myers Spanish SDA Chur 9838 Bernwood Place Fort Myers, FL 33966	52-6037545	3		306,282	Average Cost	Food commodities	Food for public distribution
(2)	God's Precious Gifts, Inc 429 E. Virginia Ave Punta Gorda, FL 33950	03-0604004	3		20,157	Average Cost	Food commodities	Food for public distribution
(3)	Grace Community Center 13 SE 21st Place Cape Coral, FL 33990	26-2720721	3		333,763	Average Cost	Food commodities	Food for public distribution
(4)	Grace Place for Children & P.O. Box 990531 Naples, FL 34116	65-1229558	3		582,441	Average Cost	Food commodities	Food for public distribution
(5)	Grace United Methodist Chur 14036 Matanzas Drive Fort Myers, FL 33905	36-2167731	3		18,598	Average Cost	Food commodities	Food for public distribution
(6)	Guadalupe Social Services 211 9th St. South Immokalee, FL 34142	59-2473176	3		287,466	Average Cost	Food commodities	Food for public distribution
(7)	Helps Outreach 2025 J and C Blvd 1 Naples, FL 34109	47-0951406	3		209,354	Average Cost	Food commodities	Food for public distribution
(8)	Hendry-Glades Mental Health 601 W Alvarez Ave. Clewiston, FL 33440	59-1558636	3		7,786	Average Cost	Food commodities	Food for public distribution
(9)	Holy Trinity Lutheran Churc 2565 Tamiami Trail Port Charlotte, FL 33952	59-1439248	3		55,959	Average Cost	Food commodities	Food for public distribution
(10)	Hope Club House 3602 Broadway Ave Fort Myers, FL 33901	30-0437443	3		11,098	Average Cost	Food commodities	Food for public distribution

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

Harry Chapin Food Bank of Southwest Florida Inc

Employer identification number

59-2332120

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(1)	House of Prayer IV 2112 Mitchel Court Fort Myers, FL 33916	43-2043791	3		51,662	Average Cost	Food commodities	Food for public distribution
(2)	Iglesia Bautista Nuevo Test 300 South James St Labelle, FL 33935	65-0397182	3		320,789	Average Cost	Food commodities	Food for public distribution
(3)	Carl-Con Group Home 104 Ortona St Lehigh Acres, FL 33936	65-0265397	3		38,270	Average Cost	Food commodities	Food for public distribution
(4)	Interfaith Charities of Sou 17592 Rockefeller Cir Fort Myers, FL 33967	65-0362473	3		73,640	Average Cost	Food commodities	Food for public distribution
(5)	David Lawrence Center 6075 Golden Gate Pkwy Naples, FL 34116	59-2206025	3		10,586	Average Cost	Food commodities	Food for public distribution
(6)	Jesus Loves You Ministries, P.O. Box 380275 Murdock, FL 33938	26-1128961	3		16,788	Average Cost	Food commodities	Food for public distribution
(7)	Juan Diego Center 26650 Noble Lane Bonita Springs, FL 34135	59-3742064	3		56,374	Average Cost	Food commodities	Food for public distribution
(8)	Lehigh Acres Christian Chur 50 Bell Blvd. Lehigh Acres, FL 33936	59-2168522	3		76,506	Average Cost	Food commodities	Food for public distribution
(9)	Lehigh Community Services 9 Beth Stacy Blvd. Lehigh Acres, FL 33971	59-1773738	3		37,394	Average Cost	Food commodities	Food for public distribution
(10)	Lehigh SDA Church 190 Homestead Rd S Lehigh Acres, FL 33936	65-0550589	3		215,651	Average Cost	Food commodities	Food for public distribution

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(1)	Liberty Youth Ranch 11081 Liberty Ranch Rd. Bonita Springs, FL 34135	38-3674666	3		22,547	Average Cost	Food commodities	Food for public distribution
(2)	Lifeline Family Center 907 SE 5th Ave. Cape Coral, FL 33904	65-0529641	3		29,850	Average Cost	Food commodities	Food for public distribution
(3)	McGregor Baptist Pantry 3750 Colonial Blvd. Fort Myers, FL 33966	59-2115730	3		402,530	Average Cost	Food commodities	Food for public distribution
(4)	Meals of Hope 2221 Corporation Blvd Naples, FL 34109	27-0268307	3		103,716	Average Cost	Food commodities	Food for public distribution
(5)	Morningstar Baptist Church 5160 Richmond Ave. Fort Myers, FL 33905	65-0245964	3		213,762	Average Cost	Food commodities	Food for public distribution
(6)	N.Naples United Methodist C 6000 Goodlette-Frank Rd Naples, FL 34109	36-2167731	3		82,689	Average Cost	Food commodities	Food for public distribution
(7)	Nations Association P.O.Box 1060 Fort Myers, FL 33902	59-1840066	3		31,790	Average Cost	Food commodities	Food for public distribution
(8)	Nature's Cove, Inc. 18060 Elmwood Drive Alva, FL 33920	65-0697850	3		37,424	Average Cost	Food commodities	Food for public distribution
(9)	NCEF Avalon Elementary 3300 Thomasson Drive Naples, FL 34112	65-1001650	3		86,078	Average Cost	Food commodities	Food for public distribution
(10)	New Hope Ministries 7675 Davis Blvd Naples, FL 34104	59-2276660	3		41,750	Average Cost	Food commodities	Food for public distribution

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(1)	New Life Assembly of God 5146 Leonard Blvd. Lehigh Acres, FL 33973	59-2126484	3		48,086	Average Cost	Food commodities	Food for public distribution
(2)	First Christian Church Napl PO Box 1986 Indianapolis, IN 46206	35-0868116	3		13,886	Average Cost	Food commodities	Food for public distribution
(3)	Nextep Inc. 8981 Daniels Blvd. Fort Myers, FL 33912	26-4144992	3		107,973	Average Cost	Food commodities	Food for public distribution
(4)	Oasis Community Food Pantry 1110 Ashlar Ave Lehigh Acres, FL 33936	59-1318118	3		165,232	Average Cost	Food commodities	Food for public distribution
(5)	Octagon Wild Life 41660 Horseshoe Rd. Punta Gorda, FL 33982	59-2298305	3		244,789	Average Cost	Food commodities	Food for public distribution
(6)	Page Park Improvement Assoc 507 Center Rd Fort Myers, FL 33907	59-6155104	3		83,411	Average Cost	Food commodities	Food for public distribution
(7)	Fort Myers Seventh Day Adve 12501 Old Columbia Pike Silver Spring, MD 20904	52-0643036	3		16,431	Average Cost	Food commodities	Food for public distribution
(8)	Habitat for Humanity 11145 Tamiami Trail E. Naples, FL 34113	59-1834379	3		19,607	Average Cost	Food commodities	Food for public distribution
(9)	Pine Island Food Pantry 12175 Stringfellow Rd. Bokeelia, FL 33922	27-1757051	3		54,529	Average Cost	Food commodities	Food for public distribution
(10)	Pine Manor Improvement Asso P.O.Box 61464 Fort Myers, FL 33906	65-0133208	3		40,447	Average Cost	Food commodities	Food for public distribution

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(1)	Point of Light Fellowship, P.O. Box 2751 Okeechobee, FL 34973	27-3160770	3		83,140	Average Cost	Food commodities	Food for public distribution
(2)	Port Charlotte Church of Ch 20484 Midway Blvd. Port Charlotte, FL 33952	59-6153816	3		127,236	Average Cost	Food commodities	Food for public distribution
(3)	Redeemer Haitian Baptist Ch 3856 Evans Ave. Fort Myers, FL 33901	57-1178818	3		24,033	Average Cost	Food commodities	Food for public distribution
(4)	Renew First Assemblies Mini 3805 The Lord's Way Naples, FL 34113	59-1759946	3		90,638	Average Cost	Food commodities	Food for public distribution
(5)	S. Ft. Myers Food Pantry Co 8260 Cypress Lake Dr. Fort Myers, FL 33919	59-1649348	3		1,002,697	Average Cost	Food commodities	Food for public distribution
(6)	Salvation Army 25221 Bernwood Dr. S. 2 Bonita Springs, FL 34135	58-0660607	3		509,004	Average Cost	Food commodities	Food for public distribution
(7)	Salvation Army Service Clew 335 Central Ave Clewiston, FL 33440	59-0631403	3		17,457	Average Cost	Food commodities	Food for public distribution
(8)	Senior Friendship Centers, 5272 Summerlin Commons Way Fort Myers, FL 33907	59-1522614	3		69,209	Average Cost	Food commodities	Food for public distribution
(9)	Seventh Day Adventist Comm. 2036 Loveland Blvd. Punta Gorda, FL 33980	52-6037545	3		11,096	Average Cost	Food commodities	Food for public distribution
(10)	St. Francis of Assisi 5265 Placida Rd. Englewood, FL 34224	59-1933467	3		37,159	Average Cost	Food commodities	Food for public distribution

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(1)	St. John XXIII Catholic Church 13060 Palomino Ln Fort Myers, FL 33912	85-8012705	3		10,619	Average Cost	Food commodities	Food for public distribution
(2)	St. Joseph the Worker P.O.Box 1109 Moore Haven, FL 33471	59-2545812	3		261,526	Average Cost	Food commodities	Food for public distribution
(3)	St. Mark Coptic Orthodox Church 11926 Fairway Lakes Dr Fort Myers, FL 33913	65-0311824	3		21,987	Average Cost	Food commodities	Food for public distribution
(4)	St. Matthew's House 2001 Airport Rd. South Naples, FL 34112	65-0097432	3		101,535	Average Cost	Food commodities	Food for public distribution
(5)	St. Vincent de Paul- Church 13031 Palm Beach Blvd. Fort Myers, FL 33905	59-2824352	3		90,831	Average Cost	Food commodities	Food for public distribution
(6)	St. Vincent de Paul- Grand P.O.Box 2546 Fort Myers, FL 33902	13-5562362	3		1,202,303	Average Cost	Food commodities	Food for public distribution
(7)	St. Vincent de Paul- Naples 4451 Mercantile Ave Naples, FL 34104	59-1711287	3		45,536	Average Cost	Food commodities	Food for public distribution
(8)	St. Vincent de Paul- Port Charlotte 21505 Augusta Ave. Port Charlotte, FL 33952	37-1566756	3		81,517	Average Cost	Food commodities	Food for public distribution
(9)	St. Vincent de Paul- Punta Gorda 25200 Airport Rd. Punta Gorda, FL 33950	80-0029958	3		249,473	Average Cost	Food commodities	Food for public distribution
(10)	St. Vincent de Paul- St. Manassas 2080 Tamiami Tr. Port Charlotte, FL 33948	59-1905861	3		37,098	Average Cost	Food commodities	Food for public distribution

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(1)	Suncoast Neighborhood Taskf 2440 Thompson St. Fort Myers, FL 33901	94-3415530	3		583,768	Average Cost	Food commodities	Food for public distribution
(2)	Integrity Church Naples 12820 Tamiami Trl N Ste 2 Naples, FL 34110	26-1668738	3		35,930	Average Cost	Food commodities	Food for public distribution
(3)	Jesus the Worker 881 Nuna Ave Fort Myers, FL 33905	59-1970832	3		45,964	Average Cost	Food commodities	Food for public distribution
(4)	Tice United Methodist Pantr 4545 Tice Street Fort Myers, FL 33905	59-1155134	3		478,270	Average Cost	Food commodities	Food for public distribution
(5)	Tree of Life Church 2132 Shadowlawn Drive Naples, FL 34112	59-1315066	3		109,234	Average Cost	Food commodities	Food for public distribution
(6)	Trinity Baptist Church Punt 11234 Royal Rd. Punta Gorda, FL 33955	64-0147009	3		29,693	Average Cost	Food commodities	Food for public distribution
(7)	Trinity United Methodist Ch P.O. Box 495895 Port Charlotte, FL 33949	59-6515026	3		89,438	Average Cost	Food commodities	Food for public distribution
(8)	Yah Yah Girls Inc 1133 Bal Harbour Blvd Punta Gorda, FL 33950	37-1475987	3		6,833	Average Cost	Food commodities	Food for public distribution
(9)	Jewish Family and Community 5025 Castello Drive Naples, FL 34103	45-3980909	3		20,446	Average Cost	Food commodities	Food for public distribution
(10)	Justins Place 2001 Airport Road S. Naples, FL 34112	65-1110501	3		38,665	Average Cost	Food commodities	Food for public distribution

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(1)	K9 Search and Rescue of Sou 18221 Palm Creek Dr North Fort Myers, FL 33917	65-0471808	3		5,256	Average Cost	Food commodities	Food for public distribution
(2)	Kiwanis Club of Fort Myers 1634 Woodford Avenue Fort Myers, FL 33901	59-6153448	3		42,826	Average Cost	Food commodities	Food for public distribution
(3)	Nami of Collier Co Inc 6216 Trail Blvd Bldg C Naples, FL 34108	65-0047747	3		12,412	Average cost	Food commodities	Food for public distribution
(4)	North Nicolas High School 3200 North Tamiami Trail Naples, FL 34103	75-3255798	3		15,388	Average cost	Food commodities	Food for public distribution
(5)	Northside Naples Kiwanis Cl 850 Park Shore Drive Naples, FL 34103	59-2461340	3		10,724	Average cost	Food commodities	Food for public distribution
(6)	Our Mothers Home 18011 S. Tamiami Trail #16-106 Fort Myers, FL 33908	65-0510103	3		5,553	Average cost	Food commodities	Food for public distribution
(7)	Philabundance 3616 S Galloway St Philadelphia, PA 19148	23-2290505	3		21,672	Average cost	Food commodities	Food for public distribution
(8)	Second Harvest Food Bank of 411 Mercy Drive Orlando, FL 32805	59-2142315	3		134,848	Average cost	Food commodities	Food for public distribution
(9)	Shy Wolf Sanctuary 1161 27th St SW Naples, FL 34117	59-3691867	3		11,964	Average cost	Food commodities	Food for public distribution
(10)	St Martin de Porres Outreac 4711 Palm Beach Blvd Fort Myers, FL 33905	46-4001708	3		120,495	Average cost	Food commodities	Food for public distribution

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(1)	Treasure Coast Food Bank 401 Angle Road Fort Pierce, FL 34947	65-0123281	3		78,743	Average cost	Food commodities	Food for public distribution
(2)	Palmetto Church of God 1123 Palmetto Ave Fort Myers, FL 33916	65-0497066	3		94,776	Average cost	Food commodities	Food for public distribution
(3)	Harvest Field Church 6431 Arc Way Fort Myers, FL 33966	27-2904147	3		222,457	Average cost	Food commodities	Food for public distribution
(4)	Mission Peniel-Peace River 5600 Peace River Rd North Port, FL 34287	59-2958426	3		18,919	Average cost	Food commodities	Food for public distribution
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								

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Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Food for animal distribution	1		651,641	Average Cost	Food commodities
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

01. Monitoring procedures (Part I, line 2)

Harry Chapin Food Bank (HCFB) tracks all food assistance distributed. Eligibility is determined by location and selection is based on completion of a formal application and annual monitoring.

Selection criteria is scored as a pass or fail based on length of service to the community, tax exempt status, board of directors list provided, food handler certification, pest control verification, passing inspection, new partner certification and agreement to HCFB terms.

**SCHEDULE J
(Form 990)**

Compensation Information

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

OMB No. 1545-0047

2014

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

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

Harry Chapin Food Bank of Southwest Flor

59-2332120

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/>	First-class or charter travel		
<input type="checkbox"/>	Travel for companions		
<input type="checkbox"/>	Tax indemnification and gross-up payments		
<input type="checkbox"/>	Discretionary spending account		
<input type="checkbox"/>	Housing allowance or residence for personal use		
<input type="checkbox"/>	Payments for business use of personal residence		
<input type="checkbox"/>	Health or social club dues or initiation fees		
<input type="checkbox"/>	Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input type="checkbox"/>	Compensation committee		
<input type="checkbox"/>	Independent compensation consultant		
<input type="checkbox"/>	Form 990 of other organizations		
<input type="checkbox"/>	Written employment contract		
<input type="checkbox"/>	Compensation survey or study		
<input type="checkbox"/>	Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment?	4a	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization?	5a	X
b	Any related organization?	5b	X
	If "Yes" to line 5a or 5b, describe in Part III.		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization?	6a	X
b	Any related organization?	6b	X
	If "Yes" to line 6a or 6b, describe in Part III.		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) 2014

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Al Brislain 1 CEO	(i)	111,584	10,000	0	0	33,913	155,497	0
	(ii)	0	0	0	0	0	0	0
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2014

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, of Form 990-EZ, Part V, line 38a or 40b.**

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

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

Open to Public Inspection

Name of the organization

Employer identification number

Harry Chapin Food Bank of Southwest Florida Inc

59-2332120

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)													
(4)													
(5)													
Total ▶ \$ _____													

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					

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

Schedule L (Form 990 or 990-EZ) 2014

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) John Belisle (see below)	Board Member	97,858	Insurance policy purchases		X
(2) Al Brislain (see below)	President & CEO	24,942	Reimbursement of Transportation		X
(3)					
(4)					
(5)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

1. Supplemental Information for Schedule L

Part IV Additional Information

John Belisle, Board member is a Vice President of BB&T Bank and BB&T Oswald Trippe, which is a broker of various insurance policies of the organization. Mr. Belisle recuses himself from direct negotiations with his employer and is not compensated in any fashion.

Al Brislain (President & CEO) is married to the Executive Director of The Association of Florida Food Banks, which is a Grantor to the organization. The organization received \$24,942 reimbursement of transportation costs during the year ended June 30, 2015 from The Association of Florida Food Banks.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2014

Department of the Treasury
Internal Revenue Service

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

**Open to Public
Inspection**

Name of the organization

Employer identification number

Harry Chapin Food Bank of Southwest Florida Inc

59-2332120

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1				
2				
3				
4				
5				
6	X	2	9,000	Indepent Appraisal
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17	X		0	
18				
19	X	3	28,140,172	Avg Cost Purchase
20				
21				
22				
23				
24				
25	X	1	10,716	Actual Invoicing
26				
27				
28				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Harry Chapin Food Bank of Southwest Florida Inc

Employer identification number

59-2332120

01. Form 990 governing body review (Part VI, line 11)

The 990 is reviewed and approved by the CEO and Director of Administration. It will also be reviewed by the Finance Committee, time permitting. A copy of the Form 990 will be provided to the Board of Directors prior to filing.

02. Conflict of interest policy compliance (Part VI, line 12c)

Each member of the Board and management completes an annual certification. Any verified infraction can lead to dismissal.

03. CEO, executive director, top management comp (Part VI, line 15a)

The executive committee of the Board reviews the annual salary survey prepared by Feeding America, a national nonprofit distributor of donated produce in the food bank network, and prepares written documentation of the review process and salary recommendation. The Board then approves the executive director's salary. Furthermore, during fiscal 2014-2015 the organization prepared a benchmark of all salaries including the CEO for Board review.

04. Other officer or key employee compensation (Part VI, line 15b)

Salaries for key employees are determined by the President, in consultation with the Executive Committee. Furthermore, during fiscal 2014-2015 the organization prepared a benchmark of all salaries including the CEO for board review.

05. Governing documents, etc, available to public (Part VI, line 19)

Financial Statements are posted on the organization's website, along with the US Form 990. Upon request, the public can receive copies of specific policies, with the concurrence by either the CEO or the Board.

Name of the organization

Employer identification number

Harry Chapin Food Bank of Southwest Florida Inc

59-2332120

06. Significant program services not listed on prior year return (Part III, line

Commodities Supplemental Food Program (CSFP) commenced sign-up and distribution starting

March 2015. CSFP is a program for low income elderly.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2014, or fiscal year beginning 07-01-2014, and ending 06-30-2015

2014

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**

▶ **Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.**

Name of exempt organization

Employer identification number

Harry Chapin Food Bank of Southwest Florida Inc

59-2332120

Name and title of officer

Keith Scoggins, Chairman

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, or 5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, or 5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here	▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	.....	1b	<u>34,200,240</u>
2a Form 990-EZ check here	▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	.....	2b	_____
3a Form 1120-POL check here	▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	.....	3b	_____
4a Form 990-PF check here	▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	.....	4b	_____
5a Form 8868 check here	▶ <input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	.....	5b	_____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize Tuscan & Company PA to enter my PIN 33901 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____

Date ▶ 10-26-2015

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

657347 33907
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____

Date ▶ 10-26-2015

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2014)

FOR YOUR RECORDS ONLY
Federal Supporting Statements

2014 PG01

Name(s) as shown on return

FEIN

Harry Chapin Food Bank of Southwest Florida Inc

59-2332120

Form 990, Schedule D, Part VI, Line 1e
Investments - Other

Statement #D1e

<u>Description of Investment</u>	<u>Cost/basis (Investment)</u>	<u>Cost/basis (Other)</u>	<u>Depr</u>	<u>Book Value</u>
Vehicles	0	1,495,162	1,155,555	339,607
Total	<u>0</u>	<u>1,495,162</u>	<u>1,155,555</u>	<u>339,607</u>

Name(s) as shown on return

FEIN

Harry Chapin Food Bank of Southwest Florida Inc

59-2332120

Form 990; Part VIII; Line 1c

Description	Amount
Events	\$ 457,333
Total:	\$ 457,333

Government Grants Part VIII Line 1e Noncash

Description	Amount
USDA	\$ 1,499,947
USDA CSFP	30,411
Total:	\$ 1,530,358

Other Grants and Donations Part VIII line 1f

Description	Amount
Grants and Donations	\$ 2,877,689
Direct Mail	859,144
Total:	\$ 3,736,833

Form 990; Part VIII; Line 8a

Description	Amount
Fundraising Other	\$ 483,032
Fundraising Restricted Purc	27,303
Capital Campaign Fowler St	534,354
Total:	\$ 1,044,689

Form 990; Part VIII; Line 8b

Description	Amount
Events	\$ 33,823
Other	16,117
Fundraising Exp Cap Campaign	19,307
Total:	\$ 69,247

Name(s) as shown on return

FEIN

Harry Chapin Food Bank of Southwest Florida Inc

59-2332120

Other Expense part IX Line 24e Program Services

Description	Amount
Maintenance	\$ 91,298
Other	234,253
Total:	\$ 325,551

Other Expenses part IX Line 24 Management and General

Description	Amount
Maintenance	\$ 3,454
Other	40,877
Total:	\$ 44,331

Other Expenses Part IX Line 24e Fundraising

Description	Amount
Other	\$ 60,979
Total:	\$ 60,979

Form 990; Sch D; Part V; Line 1a

Description	Amount
SWFCF	\$ 15,498
Community Foundation of Collier	10,683
Charlotte Community Foundation	2,049
Total:	\$ 28,230

Form 990; Sch D; Part V; Line 1c

Description	Amount
SWFCF	\$ 219
Community Foundation of Collier	463
Total:	\$ 682

Form 990; Sch D; Part V; Line 1e

Description	Amount
SWFCF	\$ 1,074
Total:	\$ 1,074

Name(s) as shown on return

FEIN

Harry Chapin Food Bank of Southwest Florida Inc

59-2332120

Form 990; Sch D; Part V; Line 1c

Description	Amount
SWFCF	\$ 303
Community Foundation of Collier	88
Total:	\$ 391

Form 990; Schedule D; Part XI; Line 4b Other

Description	Amount
Cost of Food	\$ (572,062)
Professional Fundraising Expenses	276,119
Total:	\$ -295,943

Form 990; Schedule D; Part XII; Line 2d Other

Description	Amount
Cost of Food	\$ 572,062
Total:	\$ 572,062

Form 990; Schedule D; Part XII; Line 4b Other

Description	Amount
Professional Fundraising Expenses	\$ 276,119
Total:	\$ 276,119