

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2013

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning JULY 01, 2013, and ending JUNE 30, 20 14

B Check if applicable: Address change Name change Initial return Terminated Amended return Application pending

C Name of organization THE GLOBAL FOODBANKING NETWORK

Doing Business As _____

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
203 N LASALLE STREET 1900

City or town, state or province, country, and ZIP or foreign postal code
CHICAGO, IL 60601

D Employer identification number
20-4268851

E Telephone number
(312)782-4560

F Name and address of principal officer: JEFFREY D. KLEIN
SAME AS C ABOVE

G Gross receipts \$ 2,238,431

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.FOODBANKING.ORG

K Form of organization: Corporation Trust Association Other ▶

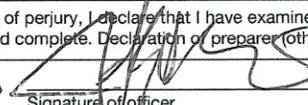
L Year of formation: 2006 **M** State of legal domicile: IL

H(c) Group exemption number ▶ _____

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>THE GLOBAL FOODBANKING NETWORK (GFN) IS A GLOBAL NOT-FOR-PROFIT ORGANIZATION DEDICATED TO ALLEVIATING WORLD HUNGER THROUGH FOOD BANKING. GFN CREATES, SUPPORTS, AND STRENGTHENS FOOD. (CONTINUED ON SCHEDULE O)</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	13
	6 Total number of volunteers (estimate if necessary)	6	36
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	2,058,590	2,215,332
	9 Program service revenue (Part VIII, line 2g)	17,306	20,775
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,054	2,324
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,077,950	2,238,431
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	48,000	458,372
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,095,582	1,190,530
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>292,699</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	405,388	432,183
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,548,970	2,081,085	
19 Revenue less expenses. Subtract line 18 from line 12	528,980	157,346	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 1,019,697	End of Year 1,225,992
	21 Total liabilities (Part X, line 26)	32,751	92,146
	22 Net assets or fund balances. Subtract line 21 from line 20	986,946	1,133,846

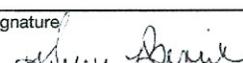
Part II Signature Block

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

Sign Here ▶  Signature of officer Date 10/24/14

JEFFREY D. KLEIN, PRESIDENT AND CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name <u>NICOLE BENCIK</u>	Preparer's signature 	Date <u>10/24/14</u>	Check <input type="checkbox"/> if self-employed	PTIN <u>P00756195</u>
Firm's name ▶ <u>CROWE HORWATH LLP</u>	Firm's EIN ▶ <u>35-0921680</u>	Phone no. <u>(312)899-7000</u>		
Firm's address ▶ <u>70 WEST MADISON STREET, SUITE 700, CHICAGO, IL 60602-4903</u>				

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 Yes No

1 Briefly describe the organization's mission:

TO ALLEVIATE GLOBAL HUNGER BY COLLABORATING TO DEVELOP FOOD BANKS IN COMMUNITIES WHERE THEY ARE NEEDED AROUND THE WORLD AND BY SUPPORTING FOOD BANKS WHERE THEY EXIST.

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

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

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 715,578 including grants of \$ 458,372) (Revenue \$)
BUILDING SIGNIFICANT CAPACITY AND REACH

GFN IS DEDICATED TO HELPING EXISTING FOOD BANK SYSTEMS BROADEN THEIR OPERATIONS, INCREASE IMPACT, AND DELIVER MORE FOOD TO MORE HUNGRY PEOPLE. DURING FY 2014, GFN WORKED WITH THE FOLLOWING COUNTRIES:

•ARGENTINA – THE FOOD BANK NETWORK IS COMPRISED OF SEVENTEEN FOOD BANKS, WITH TWO MORE IN DEVELOPMENT. GFN SUPPORT THROUGH ONE-ON-ONE TRAINING, TECHNICAL ASSISTANCE, AND PARTNERSHIP DEVELOPMENT ASSISTANCE, AS WELL AS THROUGH THE ANNUAL FOOD BANK LEADERSHIP INSTITUTE (FBLI), HAS CONTRIBUTED SIGNIFICANTLY TO THE NETWORK'S GROWTH AND EXPANSION. THIS PAST YEAR HAS SEEN SEVERAL SUCCESSFUL PROJECTS COMPLETED THAT HAVE ENHANCED THE FOOD BANKS' INDIVIDUAL AND COLLECTIVE EFFICIENCY, EFFECTIVENESS, AND REACH.

(CONTINUED IN SCHEDULE O)

4b (Code:) (Expenses \$ 196,374 including grants of \$ 0) (Revenue \$ 20,775)
TRAINING AND TECHNICAL ASSISTANCE RESOURCES

•H-E-B / GFN FOOD BANK LEADERSHIP INSTITUTE (FBLI) – GFN CONDUCTED THE 8TH ANNUAL FBLI AT THE HOUSTON FOOD BANK IN TEXAS, BRINGING TOGETHER 66 FOOD BANKERS FROM 31 COUNTRIES. THIS YEAR'S PROGRAM INCLUDED A HANDS-ON VOLUNTEER EXPERIENCE, OPERATIONAL SESSIONS ON THE SHOP FLOOR AND COURSES COVERING A RANGE OF TOPICS AS DIVERSE AS THE ROLES OF A NATIONAL NETWORK IN SUPPORTING AND PROMOTING FOOD BANKS, FEASIBILITY ANALYSIS AND BUSINESS PLAN DEVELOPMENT, UTILIZING VOLUNTEERS, FOOD SOURCING, DISASTER RECOVERY, FUNDRAISING, MARKETING, AND SUPPLY CHAIN MANAGEMENT. GFN ALSO HOSTED A RECEPTION TO INTRODUCE FOOD BANKERS FROM AROUND THE WORLD TO HOUSTON'S VIBRANT INTERNATIONAL COMMUNITY.

(CONTINUED IN SCHEDULE O)

4c (Code:) (Expenses \$ 28,956 including grants of \$ 0) (Revenue \$)
CREATING NEW FOOD BANKS

GFN IS INVOLVED IN A NUMBER OF PROJECTS AIMED AT CREATING FOOD BANKS WHERE THEY DO NOT EXIST. DURING FY 2014, GFN WORKED WITH THE FOLLOWING COUNTRIES:

•INDIA – THE INDIAN FOODBANKING NETWORK HAS SUPPORTED THE ESTABLISHMENT OF SEVERAL FOOD BANKS IN THE GREATER DELHI AREA, AND IS SUPPORTING THE ESTABLISHMENT OF FOOD BANKS IN SEVERAL OTHER CITIES AS WELL. GFN CONTINUES TO INTRODUCE GLOBAL RESOURCES, AND OFFERS COUNSEL REGARDING THE PLANNING FOR ADDITIONAL BANKS. GFN IS VERY INVOLVED IN THE EFFORT TO ESTABLISH A FOOD BANK IN BANGALORE. GFN EXPECTS TO SEE THE LAUNCH OF THIS FOOD BANK BEFORE THE END OF CALENDAR YEAR 2014.

(CONTINUED IN SCHEDULE O)

4d Other program services (Describe in Schedule O.)
(Expenses \$ 573,385 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses 1,514,293

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

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

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	4		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	13		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			✓
b	If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► [SEE SCHEDULE O](#)
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► **BETH SAKS, 203 N LASALLE STREET, SUITE 1900, CHICAGO, IL 60601, (312)782-4560, FAX: (312)782-4580**

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) TRACY, PAT CHAIRMAN	10	✓		✓			0	0	0	
(2) HELLQUIST, WAYNE VICE CHAIRMAN	2	✓		✓			0	0	0	
(3) CAVELIER, CARLOS ENRIQUE DIRECTOR (PARTIAL YEAR)	0.5	✓					0	0	0	
(4) CELAYA, FEDERICO GONZÁLEZ DIRECTOR	0.5	✓					0	0	0	
(5) CLAYTON, THE HONORABLE EVA DIRECTOR (PARTIAL YEAR)	0.5	✓					0	0	0	
(6) DAY, JAYNEE DIRECTOR	0.5	✓					0	0	0	
(7) DELMELLE, JEAN DIRECTOR	0.5	✓					0	0	0	
(8) FOX, CHERI DIRECTOR	0.5	✓					0	0	0	
(9) GILBERTSON, ALAN DIRECTOR	1	✓					0	0	0	
(10) KASDORF, ALFREDO DIRECTOR	0.5	✓					0	0	0	
(11) KNOTT, MATTHEW DIRECTOR (PARTIAL YEAR)	1	✓					0	0	0	
(12) KUREK, KAREN DIRECTOR (PARTIAL YEAR)	1	✓					0	0	0	
(13) LUGER, ELLEN GOLDBERG DIRECTOR	0.5	✓					0	0	0	
(14) RAMEY, JASON D. DIRECTOR	1	✓					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) RUDNICK, WILLIAM A. DIRECTOR	1	<input checked="" type="checkbox"/>						0	0	0
(16) SHANNON, TERRY DIRECTOR	1	<input checked="" type="checkbox"/>						0	0	0
(17) THOMAS, WILLIAM B. DIRECTOR	0.5	<input checked="" type="checkbox"/>						0	0	0
(18) KLEIN, JEFFREY D. PRESIDENT & CEO	40			<input checked="" type="checkbox"/>				170,583	0	26,276
(19) REBSTOCK, CHRISTOPHER SR. VP NETWORK DEVELOPMENT AND SECRETARY	40			<input checked="" type="checkbox"/>				139,433	0	20,688
(20) SAKS, BETH E. CFO, TREASURER, ASST. SECRETARY	32			<input checked="" type="checkbox"/>				96,655	0	23,096
(21) CANEPA, SUE DIRECTOR OF COMMUNICATIONS	40					<input checked="" type="checkbox"/>		104,802	0	21,912
(22)										
(23)										
(24)										
(25)										
1b Sub-total								511,473	0	91,972
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								511,473	0	91,972

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 **▶ 3**

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

Section B. Independent Contractors

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

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

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

Part VIII Statement of 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					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,215,332				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		2,215,332				
Program Service Revenue		Business Code					
	2a CONFERENCE REGISTRATION FEES	611430	20,775	20,775			
	b -----		0				
	c -----		0				
	d -----		0				
	e -----		0				
	f All other program service revenue .		0	0	0	0	
	g Total. Add lines 2a-2f		20,775				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,324			2,324	
	4 Income from investment of tax-exempt bond proceeds		0				
	5 Royalties		0				
	6a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)	0	0			
	d Net rental income or (loss)			0			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)	0	0			
	d Net gain or (loss)			0			
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
		c Net income or (loss) from fundraising events			0		
	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			0		
	10a Gross sales of inventory, less returns and allowances	a					
		b Less: cost of goods sold	b				
		c Net income or (loss) from sales of inventory			0		
Miscellaneous Revenue		Business Code					
11a -----			0				
b -----			0				
c -----			0				
d All other revenue			0	0	0		
e Total. Add lines 11a-11d			0				
12 Total revenue. See instructions.			2,238,431	20,775	0	2,324	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	0			
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	458,372	458,372		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	508,904	313,381	178,601	16,922
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	523,093	350,349	15,527	157,217
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	11,905	6,797	957	4,151
9 Other employee benefits	66,573	53,765	1,521	11,287
10 Payroll taxes	80,055	50,466	14,399	15,190
11 Fees for services (non-employees):				
a Management	0			
b Legal	0			
c Accounting	20,532		20,532	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	69,227	18,432	1,192	49,603
12 Advertising and promotion	0			
13 Office expenses	9,275	4,649	1,724	2,902
14 Information technology	0			
15 Royalties	0			
16 Occupancy	0			
17 Travel	167,106	135,454	28,771	2,881
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	0			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	3,443	2,202	568	673
23 Insurance	10,458	6,516	2,970	972
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 TELECOMMUNICATIONS	13,356	8,625	2,511	2,220
b PRINTING & MARKETING	22,256	19,693	325	2,238
c IT SOFTWARE PROGRAMS	28,826	11,228	1,517	16,081
d FEES	12,256	2,059	1,548	8,649
e All other expenses	75,448	72,305	1,430	1,713
25 Total functional expenses. Add lines 1 through 24e	2,081,085	1,514,293	274,093	292,699
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)	0			

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	0	1	1,067
	2 Savings and temporary cash investments	991,188	2	1,209,197
	3 Pledges and grants receivable, net	1,790	3	650
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	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	0	6	0
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	10,787	9	11,174
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	23,567		
	b Less: accumulated depreciation	20,088	5,012	10c 3,479
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	10,920	15	425
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,019,697	16	1,225,992	
Liabilities	17 Accounts payable and accrued expenses	32,751	17	46,880
	18 Grants payable	0	18	45,266
	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	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	32,751	26	92,146
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	634,786	27	1,008,800
	28 Temporarily restricted net assets	352,160	28	125,046
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	986,946	33	1,133,846
34 Total liabilities and net assets/fund balances	1,019,697	34	1,225,992	

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	2,238,431
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,081,085
3	Revenue less expenses. Subtract line 2 from line 1	3	157,346
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	986,946
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	-10,446
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,133,846

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		✓
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	✓	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	✓	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		✓
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2013

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

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 THE GLOBAL FOODBANKING NETWORK	Employer identification number 20-4268851
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

(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 in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									0

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,676,085	1,550,229	2,272,456	2,058,590	2,215,332	9,772,692
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	1,676,085	1,550,229	2,272,456	2,058,590	2,215,332	9,772,692
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						4,463,862
6 Public support. Subtract line 5 from line 4.						5,308,830

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	1,676,085	1,550,229	2,272,456	2,058,590	2,215,332	9,772,692
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,815	2,216	798	2,054	2,324	14,207
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	2,235	976	0	0	0	3,211
11 Total support. Add lines 7 through 10						9,790,110
12 Gross receipts from related activities, etc. (see instructions)					12	52,436
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	54.22 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	46.44 %
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

Part IV

Supplemental Information Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Return Reference	Identifier	Explanation						
		Description	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
SCHEDULE A, PART II, LINE 10	OTHER INCOME	OTHER INCOME	2,235	976				3,211
		Total	2,235	976	0	0	0	3,211

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2013

▶ 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

THE GLOBAL FOODBANKING NETWORK

Employer identification number

20-4268851

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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33¹/₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. 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).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Cat. No. 30613X Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization THE GLOBAL FOODBANKING NETWORK	Employer identification number 20-4268851
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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	----- ----- -----	\$ ----- 467,327	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	----- ----- -----	\$ ----- 300,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	----- ----- -----	\$ ----- 250,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	----- ----- -----	\$ ----- 175,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	----- ----- -----	\$ ----- 75,180	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	----- ----- -----	\$ ----- 71,700	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE GLOBAL FOODBANKING NETWORK	Employer identification number 20-4268851
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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
7		\$ 60,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 50,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ 40,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11		\$ 43,177	Person <input checked="" 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 THE GLOBAL FOODBANKING NETWORK	Employer identification number 20-4268851
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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
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----

Name of organization THE GLOBAL FOODBANKING NETWORK	Employer identification number 20-4268851
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Part III *Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year.* Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	-----	-----	-----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
-----	-----
-----	-----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	-----	-----	-----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
-----	-----
-----	-----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	-----	-----	-----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
-----	-----
-----	-----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	-----	-----	-----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
-----	-----
-----	-----

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2013

Open to Public Inspection

Employer identification number

20-4268851

THE GLOBAL FOODBANKING NETWORK

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 Total number at end of year, Aggregate contributions, Aggregate grants, Aggregate value, and questions about donor advisement.

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 Purpose(s) of conservation easements, Total number of easements, Total acreage, and various monitoring and reporting questions.

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 questions about reporting art and historical treasures, and amounts for revenues and assets.

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
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? **Yes** **No**

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

Part V Endowment Funds.

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

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

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

- a** Board designated or quasi-endowment ▶%
- b** Permanent endowment ▶%
- c** Temporarily restricted endowment ▶%

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

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

- (i)** unrelated organizations
- (ii)** related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				0
b Buildings				0
c Leasehold improvements				0
d Equipment		23,567	20,088	3,479
e Other				0
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				3,479

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
Total. (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) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	0	

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 XIII

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

Return Reference	Identifier	Explanation						
SCHEDULE D, PART X, LINE 2	FIN 48 (ASC 740) FOOTNOTE	<p>GFN HAS RECEIVED A DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE INDICATING THAT IT IS A NOT-FOR-PROFIT ENTITY AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ("IRC") AND IS EXEMPT FROM FEDERAL INCOME TAXES ON RELATED INCOME PURSUANT TO SECTION 501(A) OF THE IRC, EXCEPT FOR TAXES PERTAINING TO UNRELATED BUSINESS INCOME.</p> <p>GFN FOLLOWS GUIDANCE WITH RESPECT TO ACCOUNTING FOR UNCERTAIN TAX POSITIONS. NO PROVISION HAS BEEN MADE FOR INCOME TAXES IN THE ACCOMPANYING FINANCIAL STATEMENTS, AS GFN HAS HAD NO UNRELATED BUSINESS INCOME. MANAGEMENT BELIEVES GFN HAS NO MATERIAL UNRECOGNIZED INCOME TAX BENEFITS, INCLUDING ANY POTENTIAL LOSS OF ITS TAX EXEMPT STATUS. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE FINANCIAL STATEMENTS. THERE WERE NO INCOME TAX RELATED INTEREST OR PENALTIES RECOGNIZED BY GFN FOR THE YEARS ENDED JUNE 30, 2014 AND 2013. GFN HAS NOT BEEN EXAMINED BY ANY TAX JURISDICTION. GFN IS NO LONGER SUBJECT TO EXAMINATION FOR THE FISCAL YEARS ENDED JUNE 30, 2011 AND PRIOR. GFN RECOGNIZES INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST AND INCOME TAX EXPENSE, RESPECTIVELY. GFN RECOGNIZED AND ACCRUED NO AMOUNTS FOR INTEREST AND PENALTIES AS OF AND FOR THE YEARS ENDED JUNE 30, 2013 AND 2012. GFN DOES NOT EXPECT THE TOTAL AMOUNT OF UNRECOGNIZED TAX BENEFITS TO SIGNIFICANTLY CHANGE IN THE NEXT 12 MONTHS.</p>						
SCHEDULE D, PART XI, LINE 2D	OTHER REVENUES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	<table border="1"> <thead> <tr> <th data-bbox="513 747 1317 779">(a) Description</th> <th data-bbox="1317 747 1515 779">(b) Amount</th> </tr> </thead> <tbody> <tr> <td data-bbox="513 779 1317 810">REFUNDS FROM PRIOR YEARS</td> <td data-bbox="1317 779 1515 810">5,042</td> </tr> <tr> <td data-bbox="513 810 1317 842">NET OF EXPENSE REIMBURSEMENTS AND IN-KIND TRAVEL</td> <td data-bbox="1317 810 1515 842">11,876</td> </tr> </tbody> </table>	(a) Description	(b) Amount	REFUNDS FROM PRIOR YEARS	5,042	NET OF EXPENSE REIMBURSEMENTS AND IN-KIND TRAVEL	11,876
(a) Description	(b) Amount							
REFUNDS FROM PRIOR YEARS	5,042							
NET OF EXPENSE REIMBURSEMENTS AND IN-KIND TRAVEL	11,876							
SCHEDULE D, PART XII, LINE 2D	OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	<table border="1"> <thead> <tr> <th data-bbox="513 863 1317 894">(a) Description</th> <th data-bbox="1317 863 1515 894">(b) Amount</th> </tr> </thead> <tbody> <tr> <td data-bbox="513 894 1317 926">REFUNDS FROM PRIOR YEAR</td> <td data-bbox="1317 894 1515 926">5,042</td> </tr> <tr> <td data-bbox="513 926 1317 957">NET OF EXPENSE REIMBURSEMENTS AND IN-KIND TRAVEL</td> <td data-bbox="1317 926 1515 957">11,876</td> </tr> </tbody> </table>	(a) Description	(b) Amount	REFUNDS FROM PRIOR YEAR	5,042	NET OF EXPENSE REIMBURSEMENTS AND IN-KIND TRAVEL	11,876
(a) Description	(b) Amount							
REFUNDS FROM PRIOR YEAR	5,042							
NET OF EXPENSE REIMBURSEMENTS AND IN-KIND TRAVEL	11,876							

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990. ▶ See separate instructions.
- ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

THE GLOBAL FOODBANKING NETWORK

Employer identification number

20-4268851

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING	GRANT TO PURCHASE LAPTOPS, SOFTWARE, MANUAL PALLET JACK AND A/C UNITS.	8,000
(2) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING	GRANT TO PROVIDE SALARY AND EXPENSE SUPPORT FOR DESIGNATED STAFF AND THE PURCHASE OF REFRIGERATED AND FREEZER WALK-IN UNITS.	241,726
(3) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	GRANTMAKING	GRANT TO DEFRAY THE PERSONNEL, MARKETING, PROMOTION, SUPPLY AND FOOD EXPENSES OF THE BACKPACK PROGRAM.	36,000
(4) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	GRANTMAKING	GRANT FOR THE PURCHASE ELECTRIC FORKLIFT, TRUCK AND INFRASTRUCTURE IMPROVEMENTS.	164,646
(5) SOUTH AMERICA	0	0	GRANTMAKING	GRANT TO RENT A REFRIGERATED TRUCK.	8,000
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	0	0			458,372
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			458,372

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			NORTH AMERICA (CANADA & MEXICO ONLY)	PERSONNEL, MARKETING, PROMOTION, SUPPLY AND FOOD EXPENSES OF THE BACKPACK PROGRAM, INFRASTRUCTURE IMPROVEMENTS	200,646	WIRE TRANSFER			
(2)			SOUTH AMERICA	GRANT TO RENT A REFRIGERATED TRUCK.	8,000	WIRE TRANSFER			
(3)			EAST ASIA AND THE PACIFIC	GRANT TO PURCHASE LAPTOPS, SOFTWARE, MANUAL PALLET JACK AND A/C UNITS.	8,000	WIRE TRANSFER			
(4)			EUROPE (INCLUDING ICELAND AND GREENLAND)	GRANT TO PROVIDE SALARY AND EXPENSE SUPPORT FOR DESIGNATED STAFF AND THE PURCHASE OF REFRIGERATED AND FREEZER WALK-IN UNITS.	241,726	WIRE TRANSFER			
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 4

3 Enter total number of other organizations or entities ▶ 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* Yes No

Schedule F (Form 990) 2013

Part V

Supplemental Information Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f)(accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Identifier	Explanation
SCHEDULE F, PART I, LINE 2	PROCEDURES FOR MONITORING USE OF GRANT FUNDS	<p>THE GLOBAL FOODBANKING NETWORK (GFN) MAKES OCCASIONAL GRANTS TO FOOD BANKS OR NATIONAL FOOD BANK NETWORKS IN COUNTRIES OTHER THAN THE UNITED STATES FOR A VARIETY OF PURPOSES. THE MAJORITY OF GRANTS ARE AIMED AT HELPING THE GRANTEE TO EXPAND OPERATIONAL OR PROGRAMMATIC CAPACITY/ REACH, AND ACCORDINGLY ARE AWARDED FOR THE PURCHASE OF VEHICLES OR EQUIPMENT, HIRING OF STAFF, OR ACQUISITION OR IMPROVEMENT OF WAREHOUSE FACILITIES. GRANTEES ARE SELECTED BASED ON A COMBINATION OF FACTORS, INCLUDING:</p> <ul style="list-style-type: none"> •SPECIFIC NEEDS IDENTIFIED BY THE POTENTIAL GRANTEE, •GFN ABILITY TO RAISE THE RESOURCES NEEDED TO FUND THOSE NEEDS, •THE CONDUCT OF BUSINESS AND LEGAL DUE DILIGENCE TO QUALIFY THE POTENTIAL GRANTEE IN ACCORDANCE WITH GFN, US LEGAL, AND DONOR CRITERIA, •THE WILLINGNESS OF THE GRANTEE TO EXECUTE A GRANT AGREEMENT THAT STIPULATES, AMONG OTHER THINGS, THE PURPOSE OF THE GRANT, THE RESTRICTED USE(S) OF THE GRANT, AND REPORTING REQUIREMENTS TO FACILITATE MONITORING. <p>WHEN A GRANT IS OFFERED TO A GRANTEE, GFN NEGOTIATES A GRANT AGREEMENT WITH THE GRANTEE THAT ADDRESSES ALL RELEVANT PROGRAMMATIC AND LEGAL REQUIREMENTS RELATED TO THE GRANT, AND THEN ENGAGES IN-COUNTRY COUNSEL TO CONDUCT LEGAL DUE DILIGENCE ON THE GRANTEE, ASSURING THAT IT IS A LEGALLY ESTABLISHED, IN-GOOD-STANDING ENTITY IN ITS COUNTRY AND HAS LEGAL AUTHORITY TO ENTER INTO A BINDING GRANT AGREEMENT. FINALLY, GFN SCREENS THE GRANTEE, ITS GOVERNING BOARD, ITS MANAGEMENT AND KEY STAFF WITH AUTHORITY TO DISBURSE GRANT FUNDS, AND THE BANK WHERE THE FUNDS WILL BE HELD AGAINST SEVERAL TERRORIST WATCH LISTS. ONLY AFTER THE AGREEMENT IS SIGNED AND BOTH THE LEGAL DUE DILIGENCE AND THE SCREENING PROCESS ARE POSITIVELY COMPLETED WILL GFN TRANSFER THE FUNDS TO THE GRANTEE.</p> <p>THE GRANT AGREEMENT IS A LEGALLY BINDING CONTRACT, AND IT STIPULATES THE TIMELINE AND CONTENT FOR PERIODIC REPORTS BY THE GRANTEE TO GFN ON THE USE OF THE GRANT FUNDS AND THEIR IMPACT. A STANDARD FINANCIAL REPORT TEMPLATE IS INCORPORATED IN THE GRANT AGREEMENT, AND THE CONTENT OF NARRATIVE REPORTS IS ALSO DEFINED. GRANT FUNDS ARE TYPICALLY REQUIRED TO BE HELD IN SEPARATE ACCOUNTS ESTABLISHED SOLELY FOR THESE FUNDS IN ORDER TO FACILITATE AUDITING, IF IT SHOULD BE NECESSARY. REPORT DUE DATES ARE TRACKED AND FOLLOW-UP ON DELINQUENT OR MISSING REPORTS IS CONDUCTED AS NEEDED.</p>
SCHEDULE F, PART I, LINE 3	METHOD TO ACCOUNT FOR EXPENDITURES ON ORG.'S FINANCIAL STATEMENTS	<p>EAST ASIA AND THE PACIFIC: ACCRUAL</p> <p>EUROPE (INCLUDING ICELAND AND GREENLAND): ACCRUAL</p> <p>NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL</p> <p>SOUTH AMERICA: ACCRUAL</p>
SCHEDULE F, PART II, LINE 1	METHOD USED TO ACCOUNT FOR GRANTS ON ORG'S FINANCIAL STATEMENTS	<p>EAST ASIA AND THE PACIFIC: ACCRUAL</p> <p>EUROPE (INCLUDING ICELAND AND GREENLAND): ACCRUAL</p> <p>NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL</p> <p>SOUTH AMERICA: ACCRUAL</p>

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

THE GLOBAL FOODBANKING NETWORK

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No. 1545-0047

2013

Open to Public Inspection

Employer identification number

20-4268851

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 checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" 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) and 501(c)(4) organizations must complete lines 5–9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	✓
b Any related organization?	5b	✓
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	✓
b Any related organization?	6b	✓
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	✓
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	✓
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	KLEIN, JEFFREY D., PRESIDENT & CEO	(i) 170,583	0	0	5,857	20,419	196,859	0
	(ii)	0	0	0	0	0	0	0
2	REBSTOCK, CHRISTOPHER, SR. VP NETWORK DEVELOPMENT AND SECRETARY	(i) 139,433	0	0	6,885	13,803	160,121	0
	(ii)	0	0	0	0	0	0	0
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)							

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.

2013

Open to Public Inspection

Name of the Organization
THE GLOBAL FOODBANKING NETWORK

Employer Identification Number
20-4268851

Return Reference	Identifier	Explanation
FORM 990, PART I, LINE 1	BRIEF MISSION	<p>(CONTINUED FROM FORM 990, PART I, LINE 1)</p> <p>BANKS AND FOOD BANK NETWORKS AROUND THE WORLD, IN COUNTRIES OTHER THAN THE US. GFN CURRENTLY SUPPORTS EXISTING AND DEVELOPING FOOD BANKS AND NATIONAL FOOD BANK NETWORKS IN MORE THAN 30 COUNTRIES, HOME TO APPROXIMATELY ONE-THIRD OF THE WORLD'S EIGHT HUNDRED MILLION UNDERNOURISHED PEOPLE.</p>
FORM 990, PART III, LINE 4A	PROGRAM SERVICE ACCOMPLISHMENT	<p>BUILDING SIGNIFICANT CAPACITY AND REACH (CONTINUATION #1)</p> <ul style="list-style-type: none"> •BULGARIA – THE FOOD BANK HAS SETTLED INTO A NEW HOME LOCATED WITHIN THE CITY'S FRESH PRODUCE MARKET, CREATING EXCELLENT ACCESS TO SIGNIFICANT AMOUNTS OF FRESH FRUITS AND VEGETABLES EVERY DAY. THE RECENT ACQUISITION OF TWO NEW REFRIGERATED VANS POSITIONS THE FOOD BANK TO BROADEN ITS ACCESS TO FRESH AND FROZEN PRODUCTS, THEREBY ENHANCING THE VOLUME AND VARIETY OF PRODUCTS AVAILABLE TO ITS BENEFICIARIES. THE BOARD AND MANAGEMENT OF THE FOOD BANK HAVE FOCUSED ON A STRATEGIC PLANNING PROCESS WITH INPUT FROM GFN THAT WILL GUIDE THEM INTO MORE EFFICIENT AND MORE EFFECTIVE SERVICES, AND ULTIMATELY, GREATER IMPACT IN THE COMMUNITIES THEY SERVE. GFN WILL CONTINUE TO BRING NEW CONTACTS TO THE FOOD BANK AND PROVIDE TRAINING AND TECHNICAL ASSISTANCE, BOTH DIRECTLY AND THROUGH FBFI, TO HELP IT REACH ITS GOALS. •CHILE – RED DE ALIMENTOS HAS CONTINUED TO EXPAND BOTH CAPACITY AND REACH IN AND AROUND SANTIAGO, AND IS IN THE PROCESS OF ESTABLISHING A BRANCH OPERATION IN CONCEPCION. FOR THE SECOND YEAR, GFN PROVIDED A GRANT THAT HAS ENABLED THE FOOD BANK TO EXPAND THE VOLUME OF FRESH AND REFRIGERATED FOODS THAT IT IS ABLE TO HANDLE BY COVERING LOGISTICS COSTS RELATED TO TRANSPORTING SUCH PRODUCTS. GFN CONTINUES TO PROVIDE ONGOING TRAINING AND TECHNICAL ASSISTANCE AND INTRODUCTION TO POTENTIAL GLOBAL RESOURCE PROVIDERS. THE FOOD BANK IS A REGULAR PARTICIPANT IN THE FBFI. •COLOMBIA – FOOD BANKING CONTINUES TO EVOLVE IN COLOMBIA, WITH STRONGER PROGRAMMING AND CREATIVE, UNIQUE INITIATIVES DEVELOPING IN INDIVIDUAL FOOD BANKS TO ADDRESS THE NEED FOR STRONGER NUTRITION AND EDUCATION OF THE BENEFICIARIES. WITH SUPPORT FROM GFN, NEW OPERATING STANDARDS HAVE BEEN DEVELOPED FOR ALL FOOD BANKS IN THE NATIONAL NETWORK, AND EDUCATION RESOURCES ARE BEING DEVELOPED TO BRING THE FOOD BANKS INTO FULL COMPLIANCE WITH THESE STANDARDS. GFN CONTINUES TO DELIVER TECHNICAL ASSISTANCE, PROGRAMMATIC COUNSEL, AND INTRODUCTION TO RESOURCE PROVIDERS TO ASSIST THE NETWORK IN ITS EFFORTS. THE FOOD BANKS IN COLOMBIA ARE REGULAR PARTICIPANTS IN FBFI. •DOMINICAN REPUBLIC – THE YOUNG FOOD BANK CONTACTED GFN AFTER ITS LAUNCH OF OPERATIONS AND REQUESTED ASSISTANCE IN REFINING ITS OPERATING PROTOCOLS. AFTER PARTICIPATING IN THE FBFI, THE FOOD BANK REQUESTED THAT GFN MAKE AN IN-COUNTRY SITE VISIT. GFN WAS ABLE TO ASSIST IN RE-DEFINING OPERATING PROCEDURES IN SEVERAL KEY AREAS, AND THE FOOD BANK IS IN THE MIDST OF IMPLEMENTING CHANGES THAT WILL BOTH INCREASE ITS EFFECTIVENESS AND EFFICIENCY. •EL SALVADOR – THE FOOD BANK IN EL SALVADOR CONTINUES TO EXPAND ITS OPERATIONS AND EFFECTIVENESS. GFN ASSISTED THE FOOD BANK IN THIS PAST YEAR WITH PRIORITIZING ITS FOCUS ON INCREASING THE HUMAN RESOURCES CAPACITY, WAREHOUSING CAPACITY, AND LOGISTICS FOR A BROADER PRESENCE TO ACCESS PRODUCT DONATION OFFERS BEYOND SAN SALVADOR. GFN ALSO PROVIDES INTRODUCTIONS TO POTENTIAL GLOBAL RESOURCE PROVIDERS WITH PARTICULAR INTERESTS IN EL SALVADOR WHO MAY PROVIDE FOOD, FUNDS, EQUIPMENT, SERVICES, ETC. EXPOSURE TO BEST PRACTICES AND VARIOUS RESOURCES IDENTIFIED AT FBFI PROVIDE ONGOING SUPPORT TO THIS YOUNG FOOD BANK AS WELL. •HONG KONG – THE FOOD BANK HAS EXPANDED ITS WAREHOUSE CAPACITY, AND, USING GRANTS FROM BANK OF AMERICA MERRILL LYNCH AND GFN, IS SIGNIFICANTLY ENHANCING THE CAPACITY AND FUNCTIONALITY OF THAT SPACE. THE FOOD BANK ALSO LAUNCHED A SCHOOL-BASED FEEDING PROGRAM THAT IS HAVING A SIGNIFICANT IMPACT ON THE NUTRITIONAL CONDITION OF THE BENEFICIARIES. GFN HAS SUCCESSFULLY INTRODUCED A NUMBER OF KEY GLOBAL CONTACTS TO WORK WITH THE FOOD BANK ON EXPANDING ITS OPERATIONS, AND CONTINUES TO PROVIDE TRAINING AND TECHNICAL ASSISTANCE. THE FOOD BANK IS A REGULAR PARTICIPANT IN THE FBFI. •MEXICO – GFN HAS BEEN ABLE TO RENEW FUNDING TO CONTINUE THE EXPANSION OF SERVICES AND ESTABLISHMENT OF SPECIAL PROGRAMS AIMED AT IMPROVING THE NUTRITIONAL IMPACT OF MANY FOOD BANKS ON THEIR BENEFICIARIES. THESE GRANTS SPECIFICALLY SUPPORT FOOD BANKS OPERATING BACKPACK PROGRAMS AND IMPLEMENTING SIGNIFICANT CAPACITY EXPANSION AND NUTRITION PROMOTION PROGRAMMING. THE NATIONAL NETWORK HAS CONTINUED TO ENHANCE ITS ROLE IN WORKING WITH THE FEDERAL GOVERNMENT TO CREATE RESOURCES FOR EXPANDING THE REACH AND CAPACITY OF FOOD BANKS, AND HAS SEEN SEVERAL SUCCESSSES IN THIS EFFORT. GFN HAS HELPED THE NATIONAL NETWORK DEFINE EXAMPLES OF POSITIVE GOVERNMENTAL ENGAGEMENT IN OTHER COUNTRIES AS PART OF THIS EFFORT. GFN CONTINUES TO INTRODUCE RESOURCES AND SERVICES TO SUPPORT THE EXPANSION AND ENHANCEMENT OF FOOD BANKING IN MEXICO, AND THE NETWORK IS A STRONG PARTICIPANT IN FBFI. GFN PROVIDES ONGOING TRAINING AND TECHNICAL ASSISTANCE, INCLUDING A 3-DAY CUSTOMIZED SESSION AT THE FOOD BANK IN FT. MYERS, FL FOCUSED ON ENHANCING THE NATIONAL NETWORK'S ROLE IN SERVING ITS MEMBER FOOD BANKS. <p>(SEE CONTINUATION #2 BELOW)</p>

Return Reference	Identifier	Explanation
FORM 990, PART III, LINE 4A	PROGRAM SERVICE ACCOMPLISHMENT	<p>BUILDING SIGNIFICANT CAPACITY AND REACH (CONTINUATION #2)</p> <ul style="list-style-type: none"> •RUSSIA – FOODBANK RUS CONTINUES TO OPERATE ITS UNIQUE “VIRTUAL FOOD BANK” MODEL, MOVING MILLIONS OF POUNDS OF FOOD DIRECTLY FROM DONORS TO THE FEEDING PROGRAMS THAT NEED THEM. THE FOOD BANK CONTINUES TO ACHIEVE SIGNIFICANT GROWTH IN ITS PARTNERSHIPS WITHIN THE FOOD INDUSTRY, AND GFN HAS BEEN ABLE TO MAKE SIGNIFICANT INTRODUCTIONS TO GLOBAL RESOURCE PROVIDERS, RESULTING IN STRONG PARTNERSHIPS IN-COUNTRY. GFN PROVIDES ONGOING TRAINING AND TECHNICAL ASSISTANCE, INCLUDING BOTH ATTENDANCE AT FBFI AND A 3-DAY INTENSIVE ON-SITE CUSTOMIZED SESSION AT THE FOOD BANK IN FT. MYERS, FL THAT RESULTED IN SIGNIFICANT PROGRAM EXPANSION FOR FOODBANK RUS. •SINGAPORE – THE FOOD BANK HAS EXPANDED ITS OPERATIONS SIGNIFICANTLY, AND HAS FOCUSED ITS EFFORTS IN THE PAST YEAR ON BUILDING ITS PARTNERSHIPS WITH THE FOOD INDUSTRY AND OTHER MULTINATIONAL COMPANIES TO EXPAND BOTH THE VOLUME AND VARIETY OF PRODUCTS FOR THE FEEDING PROGRAMS IT SUPPLIES. MENTORING, FORMAL TRAINING, AND ON-SITE TECHNICAL ASSISTANCE BY GFN HAVE HELPED THIS NEW FOOD BANK TO ADVANCE ITS DEVELOPMENT QUICKLY. GFN CONTINUES ALSO TO PROVIDE INTRODUCTION TO POTENTIAL GLOBAL RESOURCE PROVIDERS WITH INTERESTS IN SINGAPORE, AND ANTICIPATES THE FOOD BANK BECOMING A CERTIFIED MEMBER BEFORE THE END OF 2014. THE FOOD BANK IS EXPECTED TO RETURN FOR A SECOND TIME TO FBFI IN 2015. •TAIWAN – TAIWAN PEOPLES’ FOOD BANK ASSOCIATION HAS SPENT THE PAST YEAR ON REFINING ITS ORGANIZATIONAL STRUCTURE WHILE WORKING TO ENHANCE ITS SUPPORT BASE THROUGHOUT THE COUNTRY. GFN HAS BEEN VERY INVOLVED IN THE FOOD BANK’S INTERNAL OPERATIONAL ASSESSMENTS, DEVELOPMENT OF RELEVANT NEW OPERATING PROTOCOLS, AND THE ESTABLISHMENT OF SIGNIFICANT PARTNERSHIPS WITH GLOBAL PARTNERS. GFN HAS INTRODUCED A NUMBER OF GLOBAL RESOURCE PROVIDERS AND CONTINUES TO OFFER TRAINING AND TECHNICAL ASSISTANCE. •UNITED KINGDOM – WITH RENEWED GRANTS FROM GFN, FARESHARE UK HAS CONTINUED TO ASSIST TWO DEPOTS IN THE NORTH OF ENGLAND WITH ACQUISITION OF NEW FACILITIES, RELEVANT EQUIPMENT AND VEHICLE PURCHASES, AND PROGRAM UNDERWRITING, ALL ENABLING THE DEPOTS TO EXPAND THEIR CAPACITY AND THEIR REACH. NATIONALLY, FARESHARE HAS CONTINUED TO ENHANCE ITS POSTURE WITH THE FOOD AND GROCERY INDUSTRIES, RESULTING IN SIGNIFICANT GROWTH IN VOLUME AND VARIETY OF PRODUCT, AND IN STRONGER REPUTATION FOR EFFECTIVENESS AND IMPACT. GFN CONTINUES TO PROVIDE TECHNICAL ASSISTANCE AND INTRODUCTION TO POTENTIAL GLOBAL RESOURCE PROVIDERS, INCLUDING AN INTRODUCTION THAT LED TO A \$50,000 DIRECT GRANT FOR SUPPORT OF ONE OF THE DEPOTS. FARESHARE IS EXPECTED TO RETURN TO FBFI IN 2015.
FORM 990, PART III, LINE 4B	PROGRAM SERVICE ACCOMPLISHMENT	<p>TRAINING AND TECHNICAL ASSISTANCE RESOURCES (CONTINUATION #1)</p> <p>FBFI IS A VITAL PART OF ACHIEVING GFN’S MISSION TO ALLEVIATE GLOBAL HUNGER, AND SERVES TO ENHANCE GFN’S ABILITY TO PROMOTE FOOD BANKING AROUND THE WORLD. FBFI WILL RETURN TO HOUSTON IN MARCH, 2015.</p> <ul style="list-style-type: none"> •TRAINING LIBRARY – GFN CONTINUES TO EXPAND THE LIBRARY OF TRAINING MATERIALS TO ASSIST FOOD BANKS AND FOOD BANK PLANNERS IN THEIR EFFORTS TO CREATE STRONGER, MORE EFFICIENT INFRASTRUCTURES. THIS INCLUDES DOWNLOADABLE TOOLKITS ON SUBJECTS INCLUDING A FEASIBILITY ANALYSIS, FOOD SOURCING TOOLKIT, IT OVERVIEW AND TEMPLATES TO ASSIST WITH CREATING BUDGETS AND PLANNING.
FORM 990, PART III, LINE 4C	PROGRAM SERVICE ACCOMPLISHMENT	<p>CREATING NEW FOOD BANKS (CONTINUATION #1)</p> <ul style="list-style-type: none"> •PARAGUAY – THE FOOD BANK CONTINUES TO EXPAND ITS REACH AND IMPACT IN PARAGUAY, AND HAS FINALIZED IMPROVEMENTS TO ITS FACILITY TO ENABLE THE HANDLING OF FRESH FRUITS AND VEGETABLES. THESE MODIFICATIONS WILL HOPEFULLY FACILITATE A SIGNIFICANT INCREASE IN VOLUME AND NUTRITIONAL VALUE FOR THE BENEFICIARIES. GFN HAS PROVIDED TECHNICAL ASSISTANCE IN THE HANDLING AND DISTRIBUTION OF FRESH PRODUCTS TO ASSIST IN THE PLANNING FOR THIS PROGRAM’S DEVELOPMENT. GFN CONTINUES TO PROVIDE TRAINING AND TECHNICAL ASSISTANCE AND INTRODUCTIONS TO POTENTIAL GLOBAL RESOURCE PROVIDERS.
FORM 990, PART III, LINE 4D	DESCRIPTION OF OTHER PROGRAM SERVICES	<p>(EXPENSES \$ 257,317 INCLUDING GRANTS OF \$ 0)</p> <p>PUBLIC EDUCATION</p> <p>EDUCATING THE PUBLIC ABOUT GLOBAL HUNGER AND FOOD WASTE AND HOW FOOD BANKING HELPS ALLEVIATE THESE INTERRELATED PROBLEMS HELPS GFN ADVANCE THE CAUSE OF GLOBAL FOOD BANKING. GFN’S EDUCATIONAL OUTREACH INCLUDES A MONTHLY ENEWSLETTER, REGULAR COMMUNICATION VIA SOCIAL MEDIA, CONTENT DEVELOPMENT FOR GFN’S WEBSITE, AND CREATION AND DISTRIBUTION OF VIDEOS AND OTHER EDUCATIONAL MATERIALS.</p> <p>GFN ALSO LEVERAGES FBFI TO EDUCATE THE GENERAL PUBLIC AND SPECIFIC TARGET AUDIENCES ABOUT GLOBAL HUNGER, FOOD BANKING AND FOOD WASTE. AT FBFI, GFN PROVIDES THE PUBLIC INFORMATION THROUGH TRADITIONAL AND SOCIAL MEDIA CHANNELS. GFN’S LEADERSHIP REGULARLY PARTICIPATES IN KEY INTERNATIONAL CONFERENCES WITH OTHER THOUGHT LEADERS. GFN MAXIMIZES THE VALUE OF THESE GATHERINGS BY PROVIDING THE PUBLIC WITH INFORMATION DISCUSSED AT THESE GATHERINGS. IN ADDITION, GFN WRITES AND CONTRIBUTES EDUCATIONAL ARTICLES FOR A VARIETY OF PUBLICATIONS AS A WAY TO RAISE AWARENESS ABOUT HUNGER, FOOD BANKING AND FOOD WASTE.</p>
FORM 990, PART III, LINE 4D	DESCRIPTION OF OTHER PROGRAM SERVICES	<p>(EXPENSES \$ 115,748 INCLUDING GRANTS OF \$ 0)</p> <p>OTHER PROGRAM SERVICES</p> <p>VOLUNTEERISM:</p> <p>GFN CONTINUES TO ESTABLISH RELATIONSHIPS WITH MAJOR MULTINATIONAL CORPORATIONS TO DESIGN AND CONDUCT CORPORATE VOLUNTEER PROGRAMS IN MULTIPLE COUNTRIES AND THEN FACILITATING IN ESTABLISHING THESE PROGRAMS AT A LOCAL LEVEL. THIS WILL GRANT FOOD BANKS ACCESS TO SPECIALIST SKILLS THAT THEY</p>

Return Reference	Identifier	Explanation
		<p>MIGHT NOT OTHERWISE BE ABLE TO OBTAIN. IN ADDITION TO TRADITIONAL FOOD BANKING PARTNERS, GFN HAS IDENTIFIED, INTRODUCED AND HELPED STRUCTURE EMPLOYEE ENGAGEMENT PROGRAMS WITH NON-FOOD RELATED COMPANIES THUS MAKING ADDITIONAL PROFESSIONAL SKILLS AND SERVICES AVAILABLE TO FOOD BANKS.</p> <p>CONSTITUENT MANAGEMENT DATABASE: GFN UPGRADED THE CONSTITUENT MANAGEMENT DATABASE TO REDUCE ONGOING OPERATING COSTS AND ENHANCE FUNCTIONALITY. NEW FUNCTIONALITY SUPPORTS COORDINATING MULTINATIONAL EMPLOYEE ENGAGEMENT PROGRAMS WITH PARTNERS AND PROVIDES ENHANCED REPORTING ON FOOD SOURCING ACTIVITIES.</p>
FORM 990, PART III, LINE 4D	DESCRIPTION OF OTHER PROGRAM SERVICES	<p>(EXPENSES \$ 110,274 INCLUDING GRANTS OF \$ 0)</p> <p>ONGOING OPERATIONAL SUPPORT</p> <p>GFN CONTINUES TO PROVIDE TRAINING, TECHNICAL ASSISTANCE AND INTRODUCTIONS TO POTENTIAL GLOBAL RESOURCE PROVIDERS TO: AUSTRALIA, BRAZIL, CANADA, COSTA RICA, ECUADOR, GUATEMALA, HONDURAS, ISRAEL, NAMIBIA, NIGERIA, PERU, SIERRA LEONE, SOUTH AFRICA, SOUTH KOREA AND TURKEY.</p>
FORM 990, PART III, LINE 4D	DESCRIPTION OF OTHER PROGRAM SERVICES	<p>(EXPENSES \$ 52,223 INCLUDING GRANTS OF \$ 0)</p> <p>ALLIANCE BUILDING</p> <p>CONTRIBUTED TO HIGH-LEVEL INTERNATIONAL DISCUSSIONS ON HUNGER, CHILDHOOD NUTRITION, FOOD WASTE AND THE ENVIRONMENT, INCLUDING:</p> <ul style="list-style-type: none"> •FEBA CONFERENCE – FRANCE •INTERNATIONAL SEMINAR ON FOOD SECURITY, PRESENTED BY WALMART INSTITUTE AND MESA BRASIL/SESC - BRAZIL •LATIN AMERICA WORLD BUSINESS FORUM, PRESENTED BY THE ASSOCIATION OF INDUSTRIAL LATIN AMERICANS (AILA) AND CENTRO FOX - MEXICO •SAVE FOOD CONGRESS - GERMANY •UNEP THINK.EAT.SAVE - NEW YORK
FORM 990, PART III, LINE 4D	DESCRIPTION OF OTHER PROGRAM SERVICES	<p>(EXPENSES \$ 37,823 INCLUDING GRANTS OF \$ 0)</p> <p>DEVELOPING FOOD SOURCING CAPABILITIES</p> <p>GFN DEVELOPED STRONGER RELATIONSHIPS WITH MANY MAJOR MULTINATIONAL FOOD AND GROCERY COMPANIES AND ESTABLISHED RELATIONSHIPS WITH SOME INGREDIENTS COMPANIES. GFN CONTINUES TO PROVIDE TECHNICAL ASSISTANCE TO MEMBER FOOD BANKS TO FACILITATE INCREASED FOOD DONATIONS AND MAKE INTRODUCTIONS BETWEEN FOOD BANKS AND CORPORATE CONTACTS AT A LOCAL LEVEL.</p>
FORM 990, PART VI, SEC A, LINE 1A	DELEGATE BROAD AUTHORITY TO A COMMITTEE	<p>THE CORPORATION'S BYLAWS AUTHORIZE ITS BOARD OF DIRECTORS ("BOD)", WHICH IS ITS GOVERNING BODY, TO CREATE BY RESOLUTION A SEVEN-DIRECTOR EXECUTIVE COMMITTEE CONSISTING OF THOSE DIRECTORS WHO ARE FROM TIME TO TIME THE CHAIRPERSON OF THE BOD, THE VICE CHAIRPERSON OF THE BOD, THE CHAIRPERSONS OF THE FOUR STANDING COMMITTEES CREATED BY THE BYLAWS (THE AUDIT COMMITTEE, THE FINANCE COMMITTEE, THE NOMINATING AND BOARD DEVELOPMENT COMMITTEE, AND THE STRATEGIC PLANNING COMMITTEE) PLUS ONE ADDITIONAL "AT-LARGE" DIRECTOR APPOINTED BY THE BOD. THE BOD HAS ADOPTED A RESOLUTION CREATING SUCH EXECUTIVE COMMITTEE.</p> <p>UNDER THE CORPORATION'S BYLAWS, THE EXECUTIVE COMMITTEE SHALL HAVE AND EXERCISE THE AUTHORITY OF THE BOD IN THE MANAGEMENT OF THE CORPORATION (INCLUDING MATTERS INVOLVING CONFLICTS OF INTEREST UNDER THE BYLAWS, WHICH INCORPORATE THE CORPORATION'S CONFLICT OF INTEREST POLICY) BETWEEN REGULAR MEETINGS OF THE BOD EXCEPT WITH RESPECT TO ACTS AND MATTERS EXPRESSLY RESERVED TO THE BOD ITSELF BY SECTION 108.40 OF THE ILLINOIS GENERAL NOT FOR PROFIT CORPORATIONS ACT OR THE PROVISION OF THE BYLAWS THAT LIMIT THE AUTHORITY OF ANY COMMITTEE AND EXCEPT FOR ANY FUNCTIONS OR AUTHORITY OF THE BOD SPECIFICALLY DELEGATED TO ANOTHER COMMITTEE BY RESOLUTION OF THE BOD ADOPTED BY A MAJORITY OF DIRECTORS IN OFFICE.</p> <p>THE EXECUTIVE COMMITTEE DOES NOT HAVE AUTHORITY TO DO ANY OF THE FOLLOWING:</p> <ol style="list-style-type: none"> (1)ADOPT A PLAN FOR THE DISTRIBUTION OF THE ASSETS OF THE CORPORATION OR FOR DISSOLUTION; (2)APPROVE OR RECOMMEND TO MEMBERS ANY ACT WHICH IS REQUIRED BY THE ILLINOIS GENERAL NOT FOR PROFIT CORPORATION ACT TO BE APPROVED BY MEMBERS, BUT ONLY IF AND TO THE EXTENT THAT MEMBERS ARE EVER GIVEN THE RIGHT TO APPROVE SUCH ACT BY AMENDMENT TO THE CORPORATION'S ARTICLES OF INCORPORATION OR BYLAWS (MEMBERS HAVE NOT BEEN GIVEN SUCH RIGHT); (3)FILL VACANCIES ON THE BOD OR ANY OF ITS COMMITTEES; (4)ELECT, APPOINT OR REMOVE ANY OFFICER OR DIRECTOR OR MEMBER OF ANY COMMITTEE; (5)ADOPT, AMEND OR REPEAL THE BYLAWS OR THE ARTICLES OF INCORPORATION; (6)ADOPT A PLAN OF MERGER OR CONSOLIDATION OR AUTHORIZE THE SALE, LEASE, EXCHANGE OR MORTGAGE OR ALL OR SUBSTANTIALLY ALL OF THE PROPERTY OR ASSETS OF THE CORPORATION; OR (7)AMEND, ALTER, REPEAL OR TAKE ACTION INCONSISTENT WITH ANY RESOLUTION OR ACTION OF THE BOD WHEN THE RESOLUTION OR ACTION OF THE BOD PROVIDES BY ITS TERMS THAT IT SHALL NOT BE AMENDED ALTERED OR REPEALED BY ACTION OF A COMMITTEE.
FORM 990, PART VI, SEC B, LINE	REVIEW OF FORM 990 BY GOVERNING BODY	A DRAFT OF THIS FORM 990 WAS INITIALLY PREPARED BY THE CORPORATION'S CHIEF FINANCIAL OFFICER ("CFO"), IN CONSULTATION WITH THE CORPORATION'S OUTSIDE TAX

Return Reference	Identifier	Explanation
11B		<p>PREPARATION FIRM (SELECTED BY THE BOD UPON THE RECOMMENDATION OF ITS AUDIT COMMITTEE). THE DRAFT WAS THEN REVIEWED BY THE CORPORATION'S OUTSIDE TAX PREPARATION FIRM, WHICH IN CONSULTATION WITH THE CFO MADE SUCH REVISIONS TO THE DRAFT AS IT CONSIDERED APPROPRIATE, AND THE DRAFT RESULTING FROM THAT REVIEW WAS CIRCULATED TO THE CORPORATION'S CHIEF EXECUTIVE OFFICER ("CEO"), SENIOR VICE PRESIDENT, NETWORK DEVELOPMENT, DIRECTOR OF DONOR RELATIONS, DIRECTOR OF COMMUNICATIONS, THE CORPORATION'S OUTSIDE LAW FIRM, AND THE AUDIT COMMITTEE. THEIR COMMENTS WERE THEN CONSIDERED BY THE CFO AND REFLECTED IN A REVISED DRAFT AS THE CFO, IN CONSULTATION WITH THE CORPORATION'S OUTSIDE TAX PREPARATION FIRM, CONSIDERED APPROPRIATE. A DRAFT RESULTING FROM THIS PROCESS WAS THEN DISCUSSED BY THE AUDIT COMMITTEE AT A MEETING HELD ON OCTOBER 21, 2014, ALSO ATTENDED BY THE CFO AND REPRESENTATIVES FROM THE CORPORATION'S OUTSIDE TAX PREPARATION AND LAW FIRM. THE AUDIT COMMITTEE APPROVED THAT DRAFT FOR SUBMISSION TO THE BOD. THE DRAFT WAS PROVIDED TO ALL THE MEMBERS OF THE BOD IN ADVANCE OF, AND, APPROVED FOR FILING AT, A MEETING OF THE BOD HELD ON OCTOBER 22, 2014.</p>
FORM 990, PART VI, SEC B, LINE 12C	CONFLICT OF INTEREST POLICY	<p>THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED ANNUALLY TO THE CORPORATION'S DIRECTORS, KEY EMPLOYEES AND ANY CORPORATE OFFICERS WHO ARE NOT KEY EMPLOYEES. THEY ARE REQUIRED TO DISCLOSE ACTUAL OR POTENTIAL CONFLICTS OF INTEREST, ASKED TO SIGN AN ANNUAL DECLARATION AND AGREE TO BRING TO THE BOD'S ATTENTION ANY FUTURE SITUATION NOT DISCLOSED IN THE DECLARATION. ALL BOD PROSPECTIVE CANDIDATES ARE REQUIRED TO COMPLETE A DECLARATION PRIOR TO THE BOD VOTE.</p> <p>THE BOD OR THE EXECUTIVE COMMITTEE HAS THE POWER TO CONSIDER POTENTIAL CONFLICT SITUATIONS AS THEY BECOME AWARE OF THEM AND DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS.</p> <p>IF THE BOD HAS REASONABLE CAUSE TO BELIEVE A KNOWN OR POSSIBLE CONFLICT OF INTEREST WAS NOT DISCLOSED AND AFTER AFFORDING THE PERSON AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE, IS REQUIRED TO TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.</p> <p>IN ADDITION, THE CORPORATION'S CONFLICT OF INTEREST POLICY FOR ALL EMPLOYEES IS CONTAINED IN ITS EMPLOYEE MANUAL. IT REQUIRES THAT BOTH A DISCLOSURE OF CONFLICTS AND COMPLETION OF AN ANNUAL DISCLOSURE STATEMENT IS COMPLETED ANNUALLY.</p>
FORM 990, PART VI, SEC B, LINE 15A	PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	<p>THE FINANCE COMMITTEE (WHICH CONSISTS OF MEMBERS OF THE BOD, NONE OF WHOM IS COMPENSATED FOR HIS OR HER SERVICE, AND DOES NOT INCLUDE ANY EMPLOYEES) REVIEWS THE CURRENT AND PROPOSED COMPENSATION OF THE CEO, THE CFO AND SUCH OF ITS OTHER CORPORATE OFFICERS AND/OR KEY EMPLOYEES AS THE COMMITTEE DETERMINES, REPORTS AT LEAST ANNUALLY TO THE BOARD REGARDING THE COMMITTEE'S CONCLUSIONS AND RECOMMENDATIONS CONCERNING THE CURRENT AND PROPOSED COMPENSATION OF THE CEO AND MAKES SUCH REPORTS AND/OR RECOMMENDATIONS TO THE BOD AS THE COMMITTEE DETERMINES APPROPRIATE REGARDING THE CURRENT AND PROPOSED EXECUTIVE COMPENSATION OF GFN'S CORPORATE OFFICERS AND/OR KEY EMPLOYEES.</p> <p>IN CARRYING OUT THESE FUNCTIONS, THE COMMITTEE REVIEWS SELECTED CURRENT NONPROFIT SALARY SURVEYS WHICH CONSIDER THE SPECIFIC STAFF POSITION, BUDGET SIZE OF THE ORGANIZATION, TYPE OF ORGANIZATION, AND GEOGRAPHIC LOCATION. AFTER THIS REVIEW, THE COMMITTEE PRESENTS ITS FINDINGS AND RECOMMENDATIONS TO THE BOD FOR FINAL DISCUSSION AND APPROVAL.</p> <p>THIS REVIEW OCCURS WITH THE ANNUAL BUDGETING PROCESS, USUALLY IN MAY OR JUNE. (IN ADDITION, AS PART OF ITS REVIEW OF THE CORPORATION' PROPOSED ANNUAL OPERATING BUDGET, THE COMMITTEE DISCUSSES STAFF COMPENSATION GENERALLY AS TO THOSE STAFF MEMBERS WHOSE INDIVIDUAL COMPENSATION IT DOES NOT REVIEW.) THE MOST RECENT REVIEW OCCURRED IN JUNE, 2014. THE DELIBERATIONS OF THE FINANCE COMMITTEE ARE CONTEMPORANEOUSLY MINUTED.</p>
FORM 990, PART VI, SEC B, LINE 15B	PROCESS TO ESTABLISH COMPENSATION OF OTHER EMPLOYEES	<p>SEE NARRATIVE FOR PART VI, LINE 15A.</p> <p>THE POSITIONS COVERED UNDER THE PROCESS DESCRIBED IN PART VI, LINE 15A INCLUDE:</p> <ul style="list-style-type: none"> - PRESIDENT AND CEO - CHIEF FINANCIAL OFFICER AND TREASURER - SR. VP NETWORK DEVELOPMENT AND SECRETARY - ASSISTANT SECRETARY
FORM 990, PART VI, SEC C, LINE 17	STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	AL, AK, AR, CA, CT, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, NH, NJ, NM, NY, NC, OH, OK, OR, PA, RI, SC, TN, UT, VT, VA, WV, WI
FORM 990, PART VI, LINE 18	PUBLIC INSPECTION FOR FORMS 990 AND 1023	THE CORPORATION MAKES ITS FORM 990 AVAILABLE THROUGH ITS OWN WEBSITE AND PROVIDES ITS FORM 1023 UPON REQUEST.
FORM 990, PART VI, SEC C, LINE 19	REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	THE CORPORATION'S AUDITED FINANCIAL STATEMENTS ARE POSTED TO ITS WEBSITE ANNUALLY. THE CORPORATION'S ANNUAL REPORTS (WHICH INCLUDE THE MOST RECENT AUDITED STATEMENTS OF FINANCIAL POSITION AND ACTIVITIES) ARE ALSO POSTED TO ITS WEBSITE ANNUALLY. THESE DOCUMENTS APPEAR UNDER THE "PUBLICATIONS" PAGE OF THE WEBSITE. THE CORPORATION DOES NOT MAKE ITS GOVERNING DOCUMENTS OR CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC (OTHER THAN TO THE EXTENT THEY ARE

Return Reference	Identifier	Explanation					
		INCLUDED IN ANOTHER DOCUMENT THAT IS PUBLICLY AVAILABLE).					
FORM 990 , PART XI, LINE 9	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	<table border="1"> <thead> <tr> <th data-bbox="505 180 1317 222">(a) Description</th> <th data-bbox="1317 180 1523 222">(b) Amount</th> </tr> </thead> <tbody> <tr> <td data-bbox="505 222 1317 262">DECREASE IN NET ASSETS IN-KIND</td> <td data-bbox="1317 222 1523 262">- 10,446</td> </tr> </tbody> </table>		(a) Description	(b) Amount	DECREASE IN NET ASSETS IN-KIND	- 10,446
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