Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning and ending

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

C Name of organization
LOS ANGELES REGIONAL FOOD BANK

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1734 EAST 41ST STREET

City or town, state or province, country, and ZIP or foreign postal code
LOS ANGELES, CA 90058-1502

F Name and address of principal officer: MICHAEL FLOOD
SAME AS C ABOVE

D Employer identification number
95-3135649

E Telephone number
323-234-3030

G Gross receipts $ 77,842,943.

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ LAFOODBANK.ORG WWW.LAFIGHTSHUNGER.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1977

M State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: THE ORGANIZATION'S MISSION IS TO MOBILIZE RESOURCES TO FIGHT HUNGER IN OUR COMMUNITY.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	20
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	142
6	Total number of volunteers (estimate if necessary)	6	33000
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	65,895,037.	75,806,915.
9	Program service revenue (Part VIII, line 2g)	2,419,161.	1,833,214.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-1,250.	499.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	142,797.	163,857.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	68,455,745.	77,804,485.
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	52,228,754.	66,421,932.
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)	6,234,340.	6,815,906.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	420,487.	535,304.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,522,720.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,339,538.	4,966,917.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	63,223,119.	78,740,059.
19	Revenue less expenses. Subtract line 18 from line 12	5,232,626.	-935,574.

		Beginning of Current Year	End of Year
Net Assets or Fund Balances			
20	Total assets (Part X, line 16)	18,538,708.	17,590,594.
21	Total liabilities (Part X, line 26)	1,781,113.	1,732,096.
22	Net assets or fund balances. Subtract line 21 from line 20	16,757,595.	15,858,498.

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 5/14/14

▶ MICHAEL FLOOD, PRESIDENT/CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: LIOR TEMKIN	Preparer's signature: LIOR TEMKIN	Date: 04/29/14	Check ☐ if self-employed	PTIN: P00748170
Firm's name ▶ SINGERLEWAK LLP			Firm's EIN ▶ 95-2302617	
Firm's address ▶ 10960 WILSHIRE BLVD. STE 700 LOS ANGELES, CA 90024-3783			Phone no. (310) 477-3924	

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE ORGANIZATION'S MISSION IS TO MOBILIZE RESOURCES TO FIGHT HUNGER IN OUR COMMUNITY. TO FULFILL ITS MISSION, THE FOOD BANK:
* SOURCES AND ACQUIRES FOOD AND OTHER PRODUCTS AND DISTRIBUTES TO NEEDY PEOPLE THROUGH CHARITABLE AGENCIES OR DIRECTLY THROUGH PROGRAMS;

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 X No
If "Yes," describe these new services on Schedule O.

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

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

4a (Code:) (Expenses $ 21,756,723. including grants of $ 15,967,599.) (Revenue $ 1,997,071.)
GENERAL DISTRIBUTION OF PRODUCT TO AGENCIES PROVIDES DONATED AND PURCHASED FOOD AND OTHER GROCERY PRODUCTS TO 653 CHARITABLE ORGANIZATIONS SERVING 913 SITES LOCATED THROUGHOUT LOS ANGELES COUNTY. AGENCIES PROVIDE GROCERY PRODUCTS OR SERVE MEALS TO PEOPLE SEEKING OR REQUIRING ASSISTANCE AS DESIGNED BY THE PROGRAMS OF THE AGENCIES. IN ORDER FOR AN AGENCY TO RECEIVE GROCERY PRODUCT FROM THE FOOD BANK, AN AGENCY MUST COMPLETE THE FOOD BANK'S APPLICATION PROCESS AND THE FOOD BANK'S STAFF MUST CONDUCT AN ON-SITE MONITORING OF THE AGENCY'S SITE(S). ONCE APPROVED FOR MEMBERSHIP, AN AGENCY EITHER PICKS UP FROM THE FOOD BANK'S DISTRIBUTION CENTER OR RECEIVES A FOOD BANK DELIVERY DEPENDING ON THE LOCATION OF THE AGENCY. SHARED MAINTENANCE FEE RANGING FROM $0.03/LB TO $0.23/LB, WHICH SUPPORTS THE STORAGE AND DISTRIBUTION

4b (Code:) (Expenses $ 17,951,256. including grants of $ 16,954,828.) (Revenue $)
EMERGENCY FOOD ASSISTANCE PROGRAM (EFAP) PROVIDES COMMODITIES RECEIVED FROM THE UNITED STATES DEPARTMENT OF AGRICULTURE (USDA) TO AGENCIES SERVING LOW-INCOME FAMILIES AND INDIVIDUALS. EFAP IS PARTIALLY FUNDED BY USDA AND IS ADMINISTERED BY THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES. "GRANTS" RELATE TO FOOD DISTRIBUTIONS TO CHARITABLE ORGANIZATIONS.

4c (Code:) (Expenses $ 14,432,464. including grants of $ 14,122,451.) (Revenue $)
PRODUCE AND PERISHABLE FOOD DISTRIBUTION PROVIDES A VARIETY OF FRESH FRUITS AND VEGETABLES AND OTHER PERISHABLE FOOD ITEMS TO AGENCIES. THE RAPID FOOD DISTRIBUTION PROGRAM IS A "JUST-IN-TIME" DELIVERY PROGRAM TO AGENCY SITES, AND AGENCIES ALSO PICK UP THESE FOOD ITEMS FROM THE FOOD BANK'S DISTRIBUTION CENTER. THE FOOD BANK ACQUIRES DONATED FRESH PRODUCE FROM LOCAL DONORS AND THROUGH A VALUE-ADDED PROCESSING PROGRAM ADMINISTERED BY THE CALIFORNIA ASSOCIATION OF FOOD BANKS. "GRANTS" RELATE TO FOOD DISTRIBUTIONS TO CHARITABLE ORGANIZATIONS.

4d Other program services (Describe in Schedule O.)
(Expenses $ 22,508,334. including grants of $ 19,377,055.) (Revenue $)

4e Total program service expenses ▶ 76,648,777.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

			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? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

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

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	62		
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		X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	142		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," to line 3b, provide an explanation in Schedule O*	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			X
b	If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
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			X
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		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
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			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
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?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
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			X
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 X

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	1a	20		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	20		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ CA

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.

X Own website ☐ Another's website X Upon request X 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: ▶

CZARINA LUNA - (323)234-3030

1734 EAST 41ST STREET, LOS ANGELES, CA 90058-1502

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 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) DINO BARAJAS	2.00									
BOARD MEMBER		X						0.	0.	0.
(2) DAVID BISHOP	2.00									
BOARD MEMBER		X						0.	0.	0.
(3) KARL E. BLOCK	2.00									
BOARD MEMBER		X						0.	0.	0.
(4) CHRISTINA E. CARROLL	2.00									
BOARD MEMBER		X						0.	0.	0.
(5) BRADFORD E. CHAMBERS	2.00									
BOARD MEMBER		X						0.	0.	0.
(6) RAVI CHATWANI	2.00									
BOARD MEMBER		X						0.	0.	0.
(7) JOSEPH E. DAVIS	4.00									
TREASURER		X		X				0.	0.	0.
(8) STEPHANIE EDENS	2.00									
BOARD MEMBER		X						0.	0.	0.
(9) JONATHAN FRIEDMAN	2.00									
BOARD MEMBER		X						0.	0.	0.
(10) RICHARD FUNG	2.00									
BOARD MEMBER		X						0.	0.	0.
(11) WHITNEY JONES ROY	2.00									
BOARD MEMBER		X						0.	0.	0.
(12) ROBERT W. KELLY	2.00									
BOARD MEMBER		X						0.	0.	0.
(13) GARY KIRKPATRICK	2.00									
BOARD MEMBER		X						0.	0.	0.
(14) DAVID LUWISCH	2.00									
BOARD MEMBER		X						0.	0.	0.
(15) BARRY SIEGEL	2.00									
BOARD MEMBER		X						0.	0.	0.
(16) MARK A. STEGEMOELLER	2.00									
BOARD MEMBER		X						0.	0.	0.
(17) CARY STROUSE	2.00									
BOARD MEMBER		X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JAMES A. THOMSON	2.00									
BOARD MEMBER		X						0.	0.	0.
(19) SUSAN LEONARD	4.00									
CHAIR		X		X				0.	0.	0.
(20) KAREN POINTER	4.00									
CORPORATE SECRETARY		X		X				0.	0.	0.
(21) MICHAEL FLOOD	40.00									
PRESIDENT/CEO				X				144,196.	0.	27,820.
1b Sub-total ▶								144,196.	0.	27,820.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								144,196.	0.	27,820.

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PENSKE TRUCK LEASING P.O. BOX 7429, PASADENA, CA 91110	TRUCK LEASING	577,889.
RUSS REID COMPANY P.O. BOX 910215, PASADENA, CA 91109	DIRECT MAIL SERVICE	535,304.
LABOR READY P.O. BOX 31001-0257, PASADENA, CA 91110	TEMPORARY LABOR	480,924.
ROBERT HALF INTERNATIONAL, 865 S. FIGUEROA STREET #2600, LOS ANGELES, CA 90017	TEMPORARY LABOR	332,630.
ARAKELIAN ENTERPRISES, INC./ATHEN SERVICES P.O. BOX 60009, CITY OF INDUSTRY, CA 91716	WASTE DISPOSAL	214,002.

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 ▶ 8

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	149,367.			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	25,811,620.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	49,845,928.			
	g	Noncash contributions included in lines 1a-1f: $ 62,220,878.					
	h	**Total.** Add lines 1a-1f		75,806,915.			
Program Service Revenue			**Business Code**				
	2a	SHARED MAINTENANCE FEE	900099	1,134,123.	1,134,123.		
	b	SHOP SMART AND SAVE	900099	699,091.	699,091.		
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a-2f		1,833,214.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		499.			499.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including $ 149,367. of contributions reported on line 1c). See Part IV, line 18	a 38,458.				
	b	Less: direct expenses	b 38,458.				
	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					
	10a	Gross sales of inventory, less returns and allowances	a				
	b	Less: cost of goods sold	b				
	c	Net income or (loss) from sales of inventory					
		Miscellaneous Revenue	**Business Code**				
	11a	DELIVERY FEES	900099	80,385.	80,385.		
	b	RECYCLING REVENUES	900099	41,727.	41,727.		
	c	REGISTRATION FEES	900099	4,570.	4,570.		
	d	All other revenue	900099	37,175.	37,175.		
	e	**Total.** Add lines 11a-11d		163,857.			
	12	**Total revenue.** See instructions.		77,804,485.	1,997,071.	0.	499.

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	56,357,935.	56,357,935.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	10,063,997.	10,063,997.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	172,016.	147,842.	8,152.	16,022.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	5,808,748.	4,992,431.	275,282.	541,035.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	30,239.	25,989.	1,433.	2,817.
9 Other employee benefits	464,640.	399,343.	22,020.	43,277.
10 Payroll taxes	340,263.	292,445.	16,125.	31,693.
11 Fees for services (non-employees):				
a Management				
b Legal	9,497.	4,721.	2,806.	1,970.
c Accounting	77,450.	38,498.	22,884.	16,068.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	535,304.			535,304.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	418,212.	287,938.	10,100.	120,174.
12 Advertising and promotion				
13 Office expenses	625,698.	451,379.	34,424.	139,895.
14 Information technology				
15 Royalties				
16 Occupancy	1,251,508.	1,185,523.	42,654.	23,331.
17 Travel	17,891.	15,664.	1,292.	935.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	39,988.	35,462.	1,570.	2,956.
20 Interest	1,972.	1,972.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	508,983.	508,983.		
23 Insurance	522,421.	451,866.	39,197.	31,358.
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 REPAIRS AND MAINTENANCE	426,164.	382,598.	37,486.	6,080.
b UTILITIES	398,378.	360,878.	28,403.	9,097.
c AUTO AND TRUCK	327,049.	305,512.	20,829.	708.
d FREIGHT	254,272.	250,367.	3,905.	
e All other expenses	87,434.	87,434.		
25 **Total functional expenses.** Add lines 1 through 24e	78,740,059.	76,648,777.	568,562.	1,522,720.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		186,995.	1	132,330.
	2	Savings and temporary cash investments		3,510,769.	2	2,781,094.
	3	Pledges and grants receivable, net		2,220,785.	3	1,651,802.
	4	Accounts receivable, net		370,084.	4	422,382.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		6,438,472.	8	5,857,472.
	9	Prepaid expenses and deferred charges		254,560.	9	276,457.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 12,647,847.			
	b	Less: accumulated depreciation	10b 6,399,256.	5,368,336.	10c	6,248,591.
	11	Investments - publicly traded securities		188,707.	11	220,466.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		18,538,708.	16	17,590,594.
Liabilities	17	Accounts payable and accrued expenses		1,269,074.	17	1,407,873.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		53,534.	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		458,505.	25	324,223.
	26	**Total liabilities.** Add lines 17 through 25		1,781,113.	26	1,732,096.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		12,862,714.	27	14,626,837.
	28	Temporarily restricted net assets		3,784,881.	28	1,121,661.
	29	Permanently restricted net assets		110,000.	29	110,000.
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		16,757,595.	33	15,858,498.
	34	Total liabilities and net assets/fund balances		18,538,708.	34	17,590,594.

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	77,804,485.
2	Total expenses (must equal Part IX, column (A), line 25)	2	78,740,059.
3	Revenue less expenses. Subtract line 2 from line 1	3	-935,574.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	16,757,595.
5	Net unrealized gains (losses) on investments	5	36,477.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	15,858,498.

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: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	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?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	X	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization	**Employer identification number**
LOS ANGELES REGIONAL FOOD BANK	95-3135649

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)**		

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization 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	
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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.")	57,106,296.	64,421,655.	66,031,016.	65,895,037.	75,806,915.	329,260,919.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	57,106,296.	64,421,655.	66,031,016.	65,895,037.	75,806,915.	329,260,919.
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)						30,168,091.
6 **Public support.** Subtract line 5 from line 4.						299,092,828.

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	57,106,296.	64,421,655.	66,031,016.	65,895,037.	75,806,915.	329,260,919.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	19,659.	29,381.	1,244.	1,036.	499.	51,819.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	110,536.	147,642.	140,832.	142,797.	163,857.	705,664.
11 **Total support.** Add lines 7 through 10						330,018,402.

12 Gross receipts from related activities, etc. (see instructions)	12	11,651,702.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	90.63 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	85.61 %

16a **33 1/3% support test - 2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

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

Section A. Public Support

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

Section B. Total Support

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

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

DELIVERY FEES

2009 AMOUNT: $ 38,997.

2010 AMOUNT: $ 57,853.

2011 AMOUNT: $ 64,372.

2012 AMOUNT: $ 57,005.

2013 AMOUNT: $ 80,385.

RECYCLING REVENUES

2009 AMOUNT: $ 23,707.

2010 AMOUNT: $ 34,674.

2011 AMOUNT: $ 59,833.

2012 AMOUNT: $ 12,710.

2013 AMOUNT: $ 41,727.

REGISTRATION REVENUES

2009 AMOUNT: $ 8,360.

2010 AMOUNT: $ 11,725.

2011 AMOUNT: $ 6,385.

2012 AMOUNT: $ 8,582.

2013 AMOUNT: $ 4,570.

MISCELLANEOUS

2009 AMOUNT: $ 39,472.

2010 AMOUNT: $ 43,390.

2011 AMOUNT: $ 10,242.

2012 AMOUNT: $ 64,500.

2013 AMOUNT: $ 37,175.

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

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization
LOS ANGELES REGIONAL FOOD BANK

Employer identification number
95-3135649

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X ▶ $ _____

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

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

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ 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	188,707.	179,303.	179,303.	179,303.	179,303.
b Contributions					
c Net investment earnings, gains, and losses	31,759.	9,404.		1,640.	590.
d Grants or scholarships					
e Other expenditures for facilities and programs				1,640.	590.
f Administrative expenses					
g End of year balance	220,466.	188,707.	179,303.	179,303.	179,303.

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

a Board designated or quasi-endowment ▶ 50.11 %
b Permanent endowment ▶ 49.89 %
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:

		Yes	No
(i) unrelated organizations	3a(i)		X
(ii) related organizations	3a(ii)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,260,008.		2,260,008.
b Buildings		4,473,823.	2,424,881.	2,048,942.
c Leasehold improvements				
d Equipment		1,678,012.	1,448,062.	229,950.
e Other		4,236,004.	2,526,313.	1,709,691.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				6,248,591.

Schedule D (Form 990) 2013

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED EMPLOYEE BENEFITS	303,223.
(3) DEPOSITS	21,000.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	324,223.

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 [X]

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

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

1	Total revenue, gains, and other support per audited financial statements			1	78,002,017.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	36,477.		
b	Donated services and use of facilities	2b	161,055.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	197,532.
3	Subtract line **2e** from line **1**			3	77,804,485.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	77,804,485.

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

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

1	Total expenses and losses per audited financial statements			1	78,901,113.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	161,055.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	161,055.
3	Subtract line **2e** from line **1**			3	78,740,058.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	78,740,058.

Part XIII Supplemental Information.

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

PART X, LINE 2:

EXPLANATION: IN ACCORDANCE WITH FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC NO. 740, "UNCERTAINTY IN INCOME TAXES" ("ASC 740"), THE FOOD BANK RECOGNIZES THE IMPACT OF TAX POSITIONS IN THE FINANCIAL STATEMENTS IF THAT POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED ON AUDIT, BASED ON THE TECHNICAL MERITS OF THE POSITION. TO DATE, THE FOOD BANK HAS NOT RECORDED ANY UNCERTAIN TAX POSITIONS. THE FOOD BANK RECOGNIZES POTENTIAL ACCRUED INTEREST AND PENALTIES RELATED TO UNCERTAIN TAX POSITIONS IN INCOME TAX EXPENSE. DURING THE YEAR ENDED DECEMBER 31, 2013, THE FOOD BANK PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS AND DID NOT NOTE ANY MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR WHICH MIGHT HAVE

Part XIII Supplemental Information *(continued)*

AN ADVERSE EFFECT ON ITS TAX-EXEMPT STATUS.

THE US FEDERAL, STATE OR LOCAL INCOME RETURNS OF THE FOOD BANK STILL OPEN

AND SUBJECT TO EXAMINATIONS BY TAX AUTHORITIES ARE SUMMARIZED AS FOLLOWS:

JURISDICTION	OPEN TAX YEARS
FEDERAL	2010 - 2013
STATE	2009 - 2013

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

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

OMB No. 1545-0047

2013

Open To Public Inspection

Name of the organization

LOS ANGELES REGIONAL FOOD BANK

Employer identification number

95-3135649

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

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

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

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

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

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
RUSS REID - 2 NORTH LAKE AVE. SUITE 600, PASADENA, CA	DIRECT MAIL SERVICE		X	1,276,503.	535,304.	741,199.
Total ▶				1,276,503.	535,304.	741,199.

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

CA

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

		(a) Event #1 ANNUAL LUNCHEON (event type)	(b) Event #2 CANSTRUCTION (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	172,348.	15,477.		187,825.
	2 Less: Contributions	144,604.	4,763.		149,367.
	3 Gross income (line 1 minus line 2)	27,744.	10,714.		38,458.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	27,744.	10,714.		38,458.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				38,458.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				0.

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____ .

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $ _____

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: RUSS REID

(I) ADDRESS OF FUNDRAISER: 2 NORTH LAKE AVE. SUITE 600, PASADENA, CA 91101

Part IV **Supplemental Information** *(continued)*

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization
LOS ANGELES REGIONAL FOOD BANK

Employer identification number
95-3135649

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] Yes [ ] No

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VARIOUS CHARITABLE ORGANIZATIONS	APPLIED FOR		0.	56,357,935.	SEE SCHEDULE O	GROCERY PRODUCT	SEE MISSION STATEMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... ▶ 674.

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

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule I (Form 990) (2013)**

332101
10-29-13

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
GROCERY PRODUCTS	37258	10,063,997.	0.	SEE SCHEDULE O	GROCERY PRODUCTS

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

SCHEDULE I PART II & PART III:

EXPLANATION: IN 2013, THE FOOD BANK DISTRIBUTED $56,357,935 WORTH OF GROCERY PRODUCTS THROUGH ITS VARIOUS FOOD DISTRIBUTION PROGRAMS TO ITS NETWORK OF 674 AGENCIES IN LOS ANGELES COUNTY. THROUGH THESE AGENCIES, AN ESTIMATED 1 MILLION PEOPLE RECEIVED FOOD ASSISTANCE THROUGHOUT LOS ANGELES COUNTY. ADDITIONALLY, THE FOOD BANK DIRECTLY DISTRIBUTED $10,063,997 WORTH OF GROCERY PRODUCTS TO 37,258 INDIVIDUAL RECIPIENTS THROUGH THE USDA-COMMODITY SUPPLEMENTAL FOOD PROGRAM, THE BACKPACK PROGRAM AND OTHER DISTRIBUTION PROGRAMS. THE 37,258 PROGRAM RECIPIENTS

Part IV Supplemental Information

ARE A DUPLICATED NUMBER AS THEY RECEIVE FOOD ON A REGULAR BASIS.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**
▶ **Information about Schedule J (Form 990) and its instructions is at** *www.irs.gov/form990*

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

LOS ANGELES REGIONAL FOOD BANK

Employer identification number

95-3135649

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.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**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.			
	☐ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☒ Compensation survey or study		
	☒ Form 990 of other organizations	☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		X
	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**		X
b	Any related organization?	**5b**		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	**6a**		X
b	Any related organization?	**6b**		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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) MICHAEL FLOOD	(i)	144,196.	0.	0.	7,994.	19,826.	172,016.	0.
PRESIDENT/CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

LOS ANGELES REGIONAL FOOD BANK

Employer identification number

95-3135649

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	8	50,636.	MARKET VALUE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory	X	1,345	62,170,242.	FMV DETERM. BY 3RD PARTY
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ ( )				
26	Other ▶ ( )				
27	Other ▶ ( )				
28	Other ▶ ( )				

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

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

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

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

TO FULFILL ITS MISSION, THE FOOD BANK:

* SOURCES AND ACQUIRES FOOD AND OTHER PRODUCTS AND DISTRIBUTES TO NEEDY PEOPLE THROUGH CHARITABLE AGENCIES OR DIRECTLY THROUGH PROGRAMS;

* ENERGIZES THE COMMUNITY TO GET INVOLVED AND SUPPORT HUNGER RELIEF;

* CONDUCTS HUNGER EDUCATION AND AWARENESS CAMPAIGNS AND ADVOCATES FOR PUBLIC POLICIES THAT ALLEVIATE HUNGER.

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

* ENERGIZES THE COMMUNITY TO GET INVOLVED AND SUPPORT HUNGER RELIEF;

* CONDUCTS HUNGER EDUCATION AND AWARENESS CAMPAIGNS AND ADVOCATES FOR PUBLIC POLICIES THAT ALLEVIATE HUNGER.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

COST OF FOOD, IS PAID BY AGENCIES THAT RECEIVE CERTAIN FOOD INDUSTRY DONATED PRODUCTS THROUGH THE FOOD BANK'S GENERAL FOOD DISTRIBUTION PROGRAM. PURCHASED FOOD THAT IS DISTRIBUTED THROUGH THE SHOP-SMART-SAVE PROGRAM HAS AN AVERAGE MARGIN OF 15%, THUS ALLOWING THE FOOD BANK TO RECOUP SOME OF ITS STORAGE AND DISTRIBUTION COSTS. SHOP-SMART-SAVE PROGRAM REVENUES ARE INCLUDED UNDER GENERAL FOOD DISTRIBUTION PROGRAM."GRANTS" RELATE TO FOOD DISTRIBUTIONS TO CHARITABLE AGENCIES.

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

COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) PROVIDES USDA COMMODITIES TO SENIORS AGE 60 AND OLDER, PREGNANT WOMEN, MOTHERS POSTPARTUM FOR UP TO

Name of the organization: LOS ANGELES REGIONAL FOOD BANK

Employer identification number: 95-3135649

ONE YEAR AND CHILDREN AGES ONE TO SIX. BECAUSE OTHER GOVERNMENT PROGRAMS SERVE THE SAME POPULATION OF CHILDREN AND WOMEN, THE FOOD BANK'S CSFP CLIENTELE IS 99% SENIORS. THE VAST MAJORITY OF CSFP PRODUCT IS DISTRIBUTED BY FOOD BANK STAFF TO RECIPIENTS AT SITES LOCATED THROUGHOUT LOS ANGELES COUNTY. AN ANNUAL "CASELOAD" OF THE TOTAL NUMBER OF PEOPLE THE FOOD BANK CAN SERVE IS DETERMINED BY THE PROGRAM'S ADMINISTRATOR, THE CALIFORNIA DEPARTMENT OF EDUCATION. "GRANTS" RELATE TO DIRECT FOOD DISTRIBUTION TO INDIVIDUALS.

EXPENSES: $7,851,186 GRANTS: $6,072,874 REVENUE: $0

SENIOR NUTRITION/BROWN BAG PROGRAM PROVIDES GROCERY PRODUCTS TO AGENCIES SERVING PREDOMINANTLY SENIORS. AGENCY REPRESENTATIVES PICK UP GROCERY PRODUCTS AT THE FOOD BANK'S DISTRIBUTION CENTER ON FRIDAYS AND ASSEMBLE GROCERY BAGS AT THEIR DISTRIBUTION SITES. "GRANTS" RELATE TO FOOD DISTRIBUTIONS TO CHARITABLE AGENCIES.

EXPENSES: $3,626,622 GRANTS: $3,255,937 REVENUE: $0

EMERGENCY FOOD AND SHELTER PROGRAM ADMINSTERED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA) AND FEMA (ARRA) PROVIDES FUNDS FOR THE PURCHASE OF FOOD ITEMS BY THE FOOD BANK FOR DISTRIBUTION TO AGENCIES AND THROUGH FOOD BANK PROGRAMS. SHARED MAINTENANCE FEE OF APPROXIMATELY $0.14/LB, WHICH SUPPORTS THE STORAGE AND DISTRIBUTION COST OF FOOD, IS PAID BY AGENCIES THAT RECEIVE PURCHASED FOOD UNDER THE FEMA PROGRAM."GRANTS" RELATE TO FOOD DISTRIBUTIONS TO CHARITABLE AGENCIES.

EXPENSES: $24,911 GRANTS: $24,911 REVENUE: $0

FOOD RESCUE PROGRAM IS DESIGNED TO UTILIZE VOLUNTEERS TO SORT SALVAGE AND OTHER PRODUCT DONATIONS FROM RETAILERS TO ENSURE THAT ONLY

Name of the organization: LOS ANGELES REGIONAL FOOD BANK

Employer identification number: 95-3135649

WHOLESOME PRODUCTS ARE DISTRIBUTED TO AGENCIES SERVED BY THE FOOD BANK.

FOOD SALVAGED IS PART OF THE GENERAL FOOD DISTRIBUTION "GRANT" NUMBER.

EXPENSES: $203,049 GRANTS: $0 REVENUE: $0

PRODUCT DONATIONS AND EXTRA HELPINGS PROGRAM IS THE FOOD BANK'S

SOLICITATION EFFORTS OF FOOD COMPANIES THROUGHOUT LOS ANGELES COUNTY.

EXTRA HELPINGS IS THE FOOD BANK'S PROGRAM THAT LINKS AGENCIES DIRECTLY

WITH DONORS IN ORDER TO QUICKLY PICK-UP AND DISTRIBUTE PREPARED AND

PERISHABLE FOODS. "GRANTS" RELATE TO FOOD DISTRIBUTIONS TO CHARITABLE

AGENCIES THROUGH THE EXTRA HELPINGS PROGRAM.

EXPENSES: $8,424,660 GRANTS: $8,105,750 REVENUE: $0

KIDS CAFE (TM) AND USDA SUMMER FOOD SERVICE PROGRAM (SFSP) PROVIDE

NUTRITIOUS MEALS AND SNACKS TO LOW-INCOME CHILDREN AT AGENCY SITES

LOCATED THROUGHOUT LOS ANGELES COUNTY. KIDS CAFE (TM) IS A NATIONAL

PROGRAM DEVELOPED BY FEEDING AMERICA. SFSP FUNDING OFFSETS SOME OF THE

FOOD AND OTHER COSTS ASSOCIATED WITH PROVIDING A MEAL TO CHILDREN

DURING THE SUMMER. SFSP FUNDING OFFSETS SOME OF THE FOOD AND OTHER

COSTS ASSOCIATED WITH PROVIDING A SNACK TO CHILDREN IN AFTER-SCHOOL

PROGRAMS. SFSP IS ADMINISTERED BY THE CALIFORNIA DEPARTMENT OF

EDUCATION.

EXPENSES: $1,222,477 GRANTS: $1,159,287 REVENUE: $0

THE CHILD AND ADULT CARE FOOD PROGRAM (CACFP) PROVIDES AFTERSCHOOL

MEALS TO CHILDREN AT FOOD BANK AGENCY SITES THROUGHOUT LOS ANGELES

COUNTY. THE AFTERSCHOOL MEAL COMPONENT REPLACED THE AFTERSCHOOL SNACK

COMPONENT STARTING IN NOVEMBER 2013 AT THE VAST MAJORITY OF FOOD BANK

AGENCY SITES. SIMILAR TO SFSP, FEDERAL FUNDING REIMBURSES THE FOOD BANK

Name of the organization: LOS ANGELES REGIONAL FOOD BANK

Employer identification number: 95-3135649

FOR THE MEAL COST AND PART OF THE PROGRAM OPERATING EXPENSES.

EXPENSES: $251,331 GRANTS: $208,551 REVENUE: $0

BACKPACK PROGRAM PROVIDES FOOD TO CHILDREN TO CONSUME OVER THE COURSE

OF THE WEEKEND. PRINCIPALS, ADMINSTRATORS AND TEACHERS RECOMMEND WHICH

CHILDREN ARE TO BE SERVED BY THE BACKPACK PROGRAM AND FOOD BANK STAFF

AIDES IN THE DISTRIBUTION OF THE BACKPACKS OF FOOD AT SCHOOL SITES.

"GRANTS" RELATE TO DIRECT FOOD DISTRIBUTION TO INDIVIDUALS.

EXPENSES: $612,894 GRANTS: $549,745 REVENUE: $0

CALFRESH/FOOD STAMP OUTREACH AND THE NUTRITION EDUCATION PROGRAM ARE

PARTIALLY FUNDED BY THE USDA THROUGH THE CALIFORNIA DEPARTMENT OF

HEALTH SERVICES AND THROUGH ITS AGENT, THE CALIFORNIA ASSOCIATION OF

FOOD BANKS. THE FOOD BANK'S CALFRESH FOOD STAMP OUTREACH EFFORTS FOCUS

ON LINKING AGENCY RECIPIENTS WHO ARE ELIGIBLE FOR THE FOOD STAMP

PROGRAM (NOW CALLED CALFRESH) WITH LOCAL LOS ANGELES COUNTY DEPARTMENT

OF PUBLIC SOCIAL SERVICES' OFFICES. NUTRITION EDUCATION EFFORTS FOCUS

ON THE EDUCATION OF AGENCY REPRESENTATIVES AND THE RECIPIENTS OF FOOD

BANK PROGRAMS.

EXPENSES: $291,204 GRANTS: $0 REVENUE: $0

TOTAL FOR ALL OTHER PROGRAMS (AS EXPLAINED ABOVE):

EXPENSES $ 22,508,334. INCLUDING GRANTS OF $ 19,377,055. REVENUE $ 0.

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

EXPLANATION: FORM 990 WAS PREPARED BY SINGERLEWAK LLP AND DISTRIBUTED TO

THE AUDIT COMMITTEE FOR REVIEW. ONCE APPROVED BY THE AUDIT COMMITTEE THE

FORM IS MADE AVAILABLE TO THE REST OF THE BOARD PRIOR TO ELECTRONIC FILING.

Name of the organization: LOS ANGELES REGIONAL FOOD BANK

Employer identification number: 95-3135649

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

EXPLANATION: FOOD BANK OFFICERS REVIEW THE CONFLICT OF INTEREST FORMS ON AN ANNUAL BASIS.

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

EXPLANATION: FOR THE PRESIDENT'S SALARY, THE BOARD RELIES ON COMPARATIVE SALARY INFORMATION OF OTHER LARGE FOOD BANKS FROM AROUND THE COUNTRY AND OF OTHER LOS ANGELES-BASED SOCIAL SERVICE ORGANIZATIONS. HIS PERFORMANCE REVIEW WAS CONDUCTED BY THE BOARD CHAIRMAN AND THE IMMEDIATE PAST CHAIRMAN, AND THE FULL BOARD REVIEWED THE SALARY INFORMATION AND PASSED A RESOLUTION SETTING HIS NEW SALARY.

THE CALIF. NONPROFIT INTEGRITY ACT REQUIRES THE BOARD TO REVIEW THE SALARY AND BENEFITS OF THE CEO AND CFO ANNUALLY, WHICH THE BOARD REVIEWS AT THE OCTOBER MEETING. NO CHANGES HAVE BEEN MADE BY THE BOARD DURING THIS ANNUAL REVIEW OF SALARY AND BENEFITS. THE BOARD THEN APPROVES THE OVERALL BUDGET THAT INCLUDES STAFF SALARY INCREASES, AND THE INCREASE IS MERIT BASED ON THE ANNUAL PERFORMANCE REVIEW (AS WITH ALL OTHER EMPLOYEES), AND THE PRESIDENT APPROVES THE INCREASE WITH ALL OTHER STAFF INCREASES DURING THE FEBRUARY-MARCH PERIOD WHEN THE ANNUAL PERFORMANCE REVIEWS OF THE FOOD BANK STAFF IS CONDUCTED.

FORM 990, PART VI, SECTION C, LINE 18:

EXPLANATION: THE ORGANIZATION MAKES THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENT AVAILABLE FOR PUBLIC INPECTION BY KEEPING "PUBLIC INSPECTION" COPIES AVAILABLE IN ORGANIZATION'S MAIN OFFICE.

Name of the organization: LOS ANGELES REGIONAL FOOD BANK

Employer identification number: 95-3135649

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

EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE FOR PUBLIC INPECTION BY KEEPING "PUBLIC INSPECTION" COPIES AVAILABLE IN THE ORGANIZATION'S MAIN OFFICE.