

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**2006**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A For the 2006 calendar year, or tax year beginning** **JUL 1, 2006** **and ending** **JUN 30, 2007**

<b>B</b> Check if applicable:	Please use IRS label or print or type. See Specific Instructions.	<b>C Name of organization</b> <b>ATLANTA COMMUNITY FOOD BANK</b>	<b>D Employer identification number</b> <b>58-1376648</b>
<input type="checkbox"/> Address change		Number and street (or P.O. box if mail is not delivered to street address)	<b>E Telephone number</b> <b>(404) 892-9822</b>
<input type="checkbox"/> Name change		Room/suite	
<input type="checkbox"/> Initial return		<b>732 JOSEPH E LOWERY BLVD NW</b>	
<input type="checkbox"/> Final return		City or town, state or country, and ZIP + 4	<b>F Accounting method:</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <b>&gt;</b>
<input type="checkbox"/> Amended return		<b>ATLANTA, GA 30318-</b>	
<input type="checkbox"/> Application pending		<b>• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).</b>	

<b>G Website:</b> <b>WWW.ACFB.ORG</b>	<b>H and I are not applicable to section 527 organizations.</b>
<b>J Organization type</b> (check only one) <input checked="" type="checkbox"/> 501(c) ( <b>3</b> ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>K</b> Check here <input type="checkbox"/> if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.	<b>H(b)</b> If "Yes," enter number of affiliates <b>&gt;</b> <b>N/A</b>
<b>L</b> Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 <b>&gt;</b> <b>50,339,648.</b>	<b>H(c)</b> Are all affiliates included? <b>N/A</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list.)
	<b>H(d)</b> Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<b>I</b> Group Exemption Number <b>&gt;</b> <b>N/A</b>
	<b>M</b> Check <input type="checkbox"/> if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

	<b>1</b>	Contributions, gifts, grants, and similar amounts received:		
<b>Revenue</b>	<b>a</b>	Contributions to donor advised funds	<b>1a</b>	
	<b>b</b>	Direct public support (not included on line 1a)	<b>1b</b>	<b>40,085,878.</b>
	<b>c</b>	Indirect public support (not included on line 1a)	<b>1c</b>	<b>36,658.</b>
	<b>d</b>	Government contributions (grants) (not included on line 1a)	<b>1d</b>	<b>8,103,789.</b>
	<b>e</b>	<b>Total</b> (add lines 1a through 1d) (cash \$ <b>13,937,195.</b> noncash \$ <b>34,289,130.</b> )	<b>1e</b>	<b>48,226,325.</b>
	<b>2</b>	Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>	
	<b>3</b>	Membership dues and assessments	<b>3</b>	
	<b>4</b>	Interest on savings and temporary cash investments	<b>4</b>	<b>107,619.</b>
	<b>5</b>	Dividends and interest from securities	<b>5</b>	<b>61,823.</b>
	<b>6a</b>	Gross rents	<b>6a</b>	
<b>6b</b>	Less: rental expenses	<b>6b</b>		
<b>6c</b>	Net rental income or (loss). Subtract line 6b from line 6a	<b>6c</b>		
<b>7</b>	Other investment income (describe <b>&gt;</b> <b>UNVESTED EMPLOYEE ANNUITY PAYBACK</b> )	<b>7</b>	<b>16,281.</b>	
<b>8a</b>	Gross amount from sales of assets other than inventory	(A) Securities	<b>8a</b>	<b>8,000.</b>
		(B) Other	<b>8b</b>	<b>5,592.</b>
			<b>8c</b>	<b>2,408.</b>
		<b>d</b>	Net gain or (loss). Combine line 8c, columns (A) and (B) <b>STMT 1</b> <b>STMT 2</b>	<b>8d</b>
<b>9</b>	Special events and activities (attach schedule). If any amount is from gaming, check here <input checked="" type="checkbox"/>			
<b>a</b>	Gross revenue (not including \$ <b>139,685.</b> of contributions reported on line 1b)		<b>9a</b>	<b>73,235.</b>
		Less: direct expenses other than fundraising expenses	<b>9b</b>	<b>67,452.</b>
		Net income or (loss) from special events. Subtract line 9b from line 9a	<b>9c</b>	<b>SEE STATEMENT 3</b> <b>5,783.</b>
<b>10a</b>	Gross sales of inventory, less returns and allowances		<b>10a</b>	
		Less: cost of goods sold	<b>10b</b>	
		Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	<b>10c</b>	
<b>11</b>	Other revenue (from Part VII, line 103)	<b>11</b>		
<b>12</b>	<b>Total revenue.</b> Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	<b>12</b>	<b>48,620,110.</b>	
<b>Expenses</b>	<b>13</b>	Program services (from line 44, column (B))	<b>13</b>	<b>43,092,748.</b>
	<b>14</b>	Management and general (from line 44, column (C))	<b>14</b>	<b>1,545,013.</b>
	<b>15</b>	Fundraising (from line 44, column (D))	<b>15</b>	<b>998,771.</b>
	<b>16</b>	Payments to affiliates (attach schedule)	<b>16</b>	
	<b>17</b>	<b>Total expenses.</b> Add lines 16 and 44, column (A)	<b>17</b>	<b>45,636,532.</b>
<b>Net Assets</b>	<b>18</b>	Excess or (deficit) for the year. Subtract line 17 from line 12	<b>18</b>	<b>2,983,578.</b>
	<b>19</b>	Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>	<b>15,265,741.</b>
	<b>20</b>	Other changes in net assets or fund balances (attach explanation) <b>SEE STATEMENT 4</b>	<b>20</b>	<b>-92,969.</b>
	<b>21</b>	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	<b>21</b>	<b>18,156,350.</b>

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>23</b> Specific assistance to individuals (attach schedule)				
<b>24</b> Benefits paid to or for members (attach schedule)				
<b>25a</b> Compensation of current officers, directors, key employees, etc. listed in Part V-A <b>STMT 6</b>	361,385.	103,924.	180,707.	76,754.
<b>b</b> Compensation of former officers, directors, key employees, etc. listed in Part V-B	0.	0.	0.	0.
<b>c</b> Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>26</b> Salaries and wages of employees not included on lines 25a, b, and c	3,232,003.	2,490,874.	465,436.	275,693.
<b>27</b> Pension plan contributions not included on lines 25a, b, and c	173,235.	128,176.	26,763.	18,296.
<b>28</b> Employee benefits not included on lines 25a - 27	305,276.	229,602.	57,072.	18,602.
<b>29</b> Payroll taxes	251,049.	182,371.	54,798.	13,880.
<b>30</b> Professional fundraising fees	11,625.			11,625.
<b>31</b> Accounting fees	54,974.		54,974.	
<b>32</b> Legal fees				
<b>33</b> Supplies	147,217.	60,763.	19,920.	66,534.
<b>34</b> Telephone	48,567.	29,913.	15,229.	3,425.
<b>35</b> Postage and shipping	535,119.	450,996.	14,454.	69,669.
<b>36</b> Occupancy	737,487.	577,110.	153,071.	7,306.
<b>37</b> Equipment rental and maintenance	141,019.	101,536.	39,483.	
<b>38</b> Printing and publications	384,078.	108,019.	13,968.	262,091.
<b>39</b> Travel	16,482.	12,389.	1,886.	2,207.
<b>40</b> Conferences, conventions, and meetings	45,645.	21,259.	20,896.	3,490.
<b>41</b> Interest				
<b>42</b> Depreciation, depletion, etc. (attach schedule)	540,897.	394,974.	145,923.	
<b>43</b> Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g <b>SEE STATEMENT 5</b>	38,650,474.	38,200,842.	280,433.	169,199.
<b>44</b> Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	45,636,532.	43,092,748.	1,545,013.	998,771.

**Joint Costs.** Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_;  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► <b>SEE STATEMENT 11</b>	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
<b>a SEE STATEMENT 7</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>b SEE STATEMENT 8</b>	<b>41,148,144.</b>
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>c SEE STATEMENT 9</b>	<b>379,099.</b>
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>d SEE STATEMENT 10</b>	<b>696,130.</b>
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>e Other program services (attach schedule) SEE STATEMENT 12</b>	<b>532,132.</b>
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) ►	<b>43,092,748.</b>

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**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
<b>Assets</b>	45 Cash - non-interest-bearing .....		45
	46 Savings and temporary cash investments .....	2,487,630.	46 1,995,923.
	47 a Accounts receivable .....	47a 325,531.	
	b Less: allowance for doubtful accounts .....	47b	47c 325,531.
	48 a Pledges receivable .....	48a 670,723.	
	b Less: allowance for doubtful accounts .....	48b	48c 670,723.
	49 Grants receivable .....	575,011.	49 605,724.
	50 a Receivables from current and former officers, directors, trustees, and key employees .....		50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....		50b
	51 a Other notes and loans receivable .....	51a	51c
	b Less: allowance for doubtful accounts .....	51b	
	52 Inventories for sale or use .....	1,832,614.	52 3,081,023.
	53 Prepaid expenses and deferred charges .....	123,045.	53 62,503.
	54 a Investments - publicly-traded securities <b>STMT 15</b> <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV .....	1,362,710.	54a 1,812,966.
	b Investments - other securities .....		54b
	55 a Investments - land, buildings, and equipment: basis .....	55a	
b Less: accumulated depreciation .....	55b	55c	
56 Investments - other .....	SEE STATEMENT 13 90,000.	56 90,000.	
57 a Land, buildings, and equipment: basis .....	57a 12,963,924.		
b Less: accumulated depreciation <b>STMT 14</b> .....	57b 2,491,577.	57c 10,472,347.	
58 Other assets, including program-related investments (describe <input type="checkbox"/> ) .....		58	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58 .....	17,162,551.	59 19,116,740.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses .....	756,865.	60 902,970.
	61 Grants payable .....		61
	62 Deferred revenue .....		62
	63 Loans from officers, directors, trustees, and key employees .....		63
	64 a Tax-exempt bond liabilities .....		64a
	b Mortgages and other notes payable .....	1,114,415.	64b
	65 Other liabilities (describe <input type="checkbox"/> <b>CAPITAL LEASE OBLIGATION</b> ) .....	25,530.	65 57,420.
66 <b>Total liabilities.</b> Add lines 60 through 65 .....	1,896,810.	66 960,390.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted .....	14,355,631.	67 17,265,431.
	68 Temporarily restricted .....	820,110.	68 800,919.
	69 Permanently restricted .....	90,000.	69 90,000.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds .....		70
	71 Paid-in or capital surplus, or land, building, and equipment fund .....		71
	72 Retained earnings, endowment, accumulated income, or other funds .....		72
	73 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) .....	15,265,741.	73 18,156,350.
74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73 .....	17,162,551.	74 19,116,740.	

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

Table with 5 main rows (a-e) and sub-rows (b1-b4, c, d1-d2). Total revenue is 48,620,110.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Table with 5 main rows (a-e) and sub-rows (b1-b4, d1-d2). Total expenses are 45,636,532.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

Table with 5 columns: (A) Name and address, (B) Title and average hours per week, (C) Compensation, (D) Contributions to employee benefit plans, (E) Expense account and other allowances. One row is filled with 'SEE STATEMENT 18'.



Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? .....	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) .....	82b	185,054.
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications? .....	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? .....	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible? .....	84a	N/A
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .....	84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? .....	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	85b	N/A
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members .....	85c	N/A
d	Section 162(e) lobbying and political expenditures .....	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices .....	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) .....	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? .....	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? .....	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 .....	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities .....	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders .....	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) .....	87b	N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX .....	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI .....	88b	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0. ....		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction .....	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 .....		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization .....		0.
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? .....	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? .....	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? .....	89g	X
90 a	List the states with which a copy of this return is filed ▶ GA		
b	Number of employees employed in the pay period that includes March 12, 2006 .....	90b	80
91 a	The books are in care of ▶ NANCY FLIPPIN Telephone no. ▶ (404) 892-9822 Located at ▶ 732 JOSEPH E LOWERY BLVD NW, ATLANTA, GA ZIP + 4 ▶ 30318		
b	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)? .....	91b	X
	If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

**Part VI Other Information** (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c  Yes  No  
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here   
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

**Part VII Analysis of Income-Producing Activities** (See the instructions.)

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments .....					
g Fees and contracts from government agencies ...					
94 Membership dues and assessments .....					
95 Interest on savings and temporary cash investments ...			14	107,619.	
96 Dividends and interest from securities .....			14	61,823.	
97 Net rental income or (loss) from real estate:					
a debt-financed property .....					
b not debt-financed property .....					
98 Net rental income or (loss) from personal property					
99 Other investment income .....			18	16,281.	
100 Gain or (loss) from sales of assets other than inventory .....			18	202,279.	
101 Net income or (loss) from special events .....			01	5,783.	
102 Gross profit or (loss) from sales of inventory .....					
103 Other revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E)) .....		0.		393,785.	0.
105 Total (add line 104, columns (B), (D), and (E)) .....					393,785.

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
970 JEFFERSON LLC -	%			
970 JEFFERSON ST.,	%			
ATLANTA, GA 30318 -	%			
58-1376648	100% %	LESSOR	337.	1,484,276.

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	-----					
b	-----					
c	-----					
<b>Totals</b>						

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	Yes	No
a	-----					
b	-----					
c	-----					
<b>Totals</b>						

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

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.

Please Sign Here: *Nancy S. Flippin* Signature of Officer | 5-14-08 Date  
 NANCY FLIPPIN, CHIEF FINANCIAL OFFICER Type or print name and title

Paid Preparer's Use Only: Preparer's signature *Susan Kenney* | Date 5/13/08 | Check if self-employed  | Preparer's SSN or PTIN (See Gen. Inst. X) \_\_\_\_\_  
 Firm's name (or yours if self-employed), address, and ZIP + 4: SUSAN KENNEY, CPA | 5085 THORNBURY WAY | ALPHARETTA, GEORGIA 30005-8788 | EIN \_\_\_\_\_ | Phone no. (770) 751-6805

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

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**  
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

**2006**

Name of the organization <b>ATLANTA COMMUNITY FOOD BANK</b>	Employer identification number <b>58 1376648</b>
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**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
DAVID W. SMITH 829 TWIN OAKS DR. #3, DECATUR, GA 300	ASSOCIATE DIR 40.00	74,872.	9,369.	
CAROL RICHBURG 5136 ROCK GLEN DR., STONE MOUNTIAN, G	AGENCY SVC. DIRECTOR 40.00	63,534.	8,313.	
JANICE REECE 1676 TERRELL RIDGE DR., MARIETTA, GA	MKTG DIR. 40.00	76,514.	10,566.	
JIM CHEETHAM 5891 BROOKMERE PARK DR, MABLETON, GA	IT DIRECTOR 40.00	58,197.	10,934.	
BRUCE DONNELLY 6720 CASTLETON DR., ATLANTA, GA 30328	DIR.OF DEVEL. 40.00	73,692.	8,790.	
Total number of other employees paid over \$50,000 ▶	8			

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
LEDUC, PHILLIPS & ASSOCIATES 1132 FLOYD ST., COVINGTON, GA 30014	AUDIT SERVICES	57,518.
-----		
-----		
-----		
-----		
Total number of others receiving over \$50,000 for professional services ▶	0	

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
LW ROBBINS PO BOX 847024, BOSTON, MA 02284-7024	FUNDRAISING SVCS, POSTAGE, AND PRIN	322,466.
-----		
-----		
-----		
Total number of other contractors receiving over \$50,000 for other services ▶	0	

**Part III Statements About Activities** (See page 2 of the instructions.)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ <u>42,981.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) <u>VI-A, LINE 38B</u> Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	X	
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property? .....		X
b	Lending of money or other extension of credit? .....		X
c	Furnishing of goods, services, or facilities? .....		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V-A, FORM 990</b> .....	X	
e	Transfer of any part of its income or assets? .....		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) .....		X
b	Did the organization have a section 403(b) annuity plan for its employees? .....	X	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement .....		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .....		X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g .....		X
b	Did the organization make any taxable distributions under section 4966? .....		N/A
c	Did the organization make a distribution to a donor, donor advisor, or related person? .....		N/A
d	Enter the total number of donor advised funds owned at the end of the tax year .....		N/A
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year .....		N/A
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts .....		0.
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year .....		0.

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8  A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12  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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:  
 Type I       Type II       Type III-Functionally Integrated       Type III-Other

**Provide the following information about the supported organizations.** (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
<b>Total</b> .....					▶

- 14  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	43,640,988.	38,023,033.	34,577,061.	31,501,722.	147,742,804.
<b>16</b> Membership fees received					
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	105,967.	65,964.	53,506.	34,835.	260,272.
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
<b>23</b> Total of lines 15 through 22	43,746,955.	38,088,997.	34,630,567.	31,536,557.	148,003,076.
<b>24</b> Line 23 minus line 17	43,746,955.	38,088,997.	34,630,567.	31,536,557.	148,003,076.
<b>25</b> Enter 1% of line 23	437,470.	380,890.	346,306.	315,366.	
<b>26 Organizations described on lines 10 or 11:</b> a Enter 2% of amount in column (e), line 24					<b>26a</b> 2,960,062.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					<b>26b</b> 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					<b>26c</b> 148,003,076.
d Add: Amounts from column (e) for lines: 18 260,272. 19 _____ 22 _____ 26b _____					<b>26d</b> 260,272.
e Public support (line 26c minus line 26d total)					<b>26e</b> 147,742,804.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 99.8241%
<b>27 Organizations described on line 12:</b> a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A (2005) _____ (2004) _____ (2003) _____ (2002) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A (2005) _____ (2004) _____ (2003) _____ (2002) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					<b>27c</b> N/A
d Add: Line 27a total and line 27b total					<b>27d</b> N/A
e Public support (line 27c total minus line 27d total)					<b>27e</b> N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					<b>27f</b> N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> N/A %

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

**Part V Private School Questionnaire** (See page 9 of the instructions.)

N/A

**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? .....		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
_____			
_____			
_____			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff? .....	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? .....	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
_____			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges? .....	33a	
b	Admissions policies? .....	33b	
c	Employment of faculty or administrative staff? .....	33c	
d	Scholarships or other financial assistance? .....	33d	
e	Educational policies? .....	33e	
f	Use of facilities? .....	33f	
g	Athletic programs? .....	33g	
h	Other extracurricular activities? .....	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
_____			
_____			
34 a	Does the organization receive any financial aid or assistance from a governmental agency? .....	34a	
b	Has the organization's right to such aid ever been revoked or suspended? .....	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation .....	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 10 of the instructions.)  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a**  if the organization belongs to an affiliated group. Check **b**  if you checked "a" and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
		<b>N/A</b>	
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....	<b>36</b>		0.
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....	<b>37</b>		42,981.
<b>38</b> Total lobbying expenditures (add lines 36 and 37) .....	<b>38</b>		42,981.
<b>39</b> Other exempt purpose expenditures .....	<b>39</b>		45,591,610.
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39) .....	<b>40</b>		45,634,591.
<b>41</b> Lobbying nontaxable amount. Enter the amount from the following table -			
<b>If the amount on line 40 is -</b>	<b>The lobbying nontaxable amount is -</b>		
Not over \$500,000 .....	20% of the amount on line 40 .....		
Over \$500,000 but not over \$1,000,000 .....	\$100,000 plus 15% of the excess over \$500,000 .....		
Over \$1,000,000 but not over \$1,500,000 .....	\$175,000 plus 10% of the excess over \$1,000,000 .....	<b>41</b>	1,000,000.
Over \$1,500,000 but not over \$17,000,000 .....	\$225,000 plus 5% of the excess over \$1,500,000 .....		
Over \$17,000,000 .....	\$1,000,000 .....		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41) .....	<b>42</b>		250,000.
<b>43</b> Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 .....	<b>43</b>		0.
<b>44</b> Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 .....	<b>44</b>		0.

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
<b>45</b> Lobbying nontaxable amount .....	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) .....					6,000,000.
<b>47</b> Total lobbying expenditures .....	42,981.	20,256.	23,611.	32,706.	119,554.
<b>48</b> Grassroots nontaxable amount .....	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) .....					1,500,000.
<b>50</b> Grassroots lobbying expenditures .....					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
<b>a</b> Volunteers .....			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.) .....			
<b>c</b> Media advertisements .....			
<b>d</b> Mailings to members, legislators, or the public .....			
<b>e</b> Publications, or published or broadcast statements .....			
<b>f</b> Grants to other organizations for lobbying purposes .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means .....			
<b>i</b> Total lobbying expenditures (Add lines c through h.) .....			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.



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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Supplementary Information for  
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

**2006**

Name of organization

Employer identification number

ATLANTA COMMUNITY FOOD BANK

58-1376648

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule-see instructions.)

**General Rule-**

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

**Special Rules-**

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

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

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

**Caution:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2006)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ <u>3,700,764.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ <u>126,074.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ <u>58,542.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ <u>85,921.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ <u>63,598.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ <u>66,032.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 68,614.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8		\$ 1,216,611.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9		\$ 167,613.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10		\$ 409,009.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11		\$ 87,780.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12		\$ 65,234.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13		\$ 71,369.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14		\$ 91,618.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15		\$ 190,896.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16		\$ 146,905.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17		\$ 237,938.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18		\$ 66,358.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19		\$ 57,114.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
20		\$ 109,850.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
21		\$ 500,799.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
22		\$ 95,941.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
23		\$ 229,345.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
24		\$ 130,733.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization  <b>ATLANTA COMMUNITY FOOD BANK</b>	Employer identification number  <b>58-1376648</b>
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25		\$ 631,132.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
26		\$ 101,525.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
27		\$ 827,716.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
28		\$ 150,107.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
29		\$ 68,141.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
30		\$ 121,629.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31		\$ <u>1,835,293.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
32		\$ <u>142,805.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
33		\$ <u>146,016.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
34		\$ <u>73,632.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
35		\$ <u>127,235.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
36		\$ <u>69,053.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
37		\$ <u>52,475.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
38		\$ <u>107,852.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
39		\$ <u>1,198,455.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
40		\$ <u>141,950.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
41		\$ <u>4,886,863.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
42		\$ <u>321,043.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
43		\$ 90,812.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
44		\$ 78,489.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
45		\$ 70,116.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
46		\$ 90,200.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
47		\$ 84,745.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
48		\$ 229,340.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

**ATLANTA COMMUNITY FOOD BANK**

**58-1376648**

**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
49		\$ 208,801.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
50		\$ 863,289.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
51		\$ 967,351.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
52		\$ 119,851.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
53		\$ 152,168.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
54		\$ 383,551.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
55		\$ 590,848.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
56		\$ 2,913,621.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
57		\$ 198,786.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
58		\$ 108,939.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
59		\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
60		\$ 134,520.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
61		\$ 85,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
62		\$ 57,437.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
63		\$ 350,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
64		\$ 17,356.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
65		\$ 17,306.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
66		\$ 65,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
67		\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
68		\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
69		\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
70		\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
71		\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
72		\$ 60,255.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
73		\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part II Noncash Property** (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	FOOD _____ _____ _____	\$ 3,700,764.	VARIOUS
2	FOOD _____ _____ _____	\$ 126,074.	VARIOUS
3	FOOD _____ _____ _____	\$ 58,542.	VARIOUS
4	FOOD _____ _____ _____	\$ 85,921.	VARIOUS
5	FOOD _____ _____ _____	\$ 63,658.	VARIOUS
6	FOOD _____ _____ _____	\$ 66,032.	VARIOUS

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part II Noncash Property** (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	FOOD _____ _____ _____	\$ 68,614.	VARIOUS
8	LAUNDRY PRODUCTS , MISCELLANEOUS SUNDRIES _____ _____	\$ 1,216,611.	VARIOUS
9	FOOD _____ _____ _____	\$ 167,613.	VARIOUS
10	FOOD _____ _____ _____	\$ 409,009.	VARIOUS
11	FOOD _____ _____ _____	\$ 87,780.	VARIOUS
12	FOOD _____ _____ _____	\$ 65,234.	VARIOUS

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part II Noncash Property** (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
13	SUNDRIES _____ _____ _____	\$ 71,369.	VARIOUS
14	FOOD _____ _____ _____	\$ _____	_____
15	SUNDRIES _____ _____ _____	\$ 190,896.	VARIOUS
16	FOOD _____ _____ _____	\$ 146,905.	VARIOUS
17	FOOD _____ _____ _____	\$ 237,938.	VARIOUS
18	FOOD _____ _____ _____	\$ 66,358.	VARIOUS

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part II Noncash Property** (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
19	FOOD _____ _____ _____	\$ _____	_____
20	SUNDRIES _____ _____ _____	\$ <u>109,850.</u>	<u>VARIOUS</u>
21	FOOD _____ _____ _____	\$ <u>500,799.</u>	<u>VARIOUS</u>
22	FOOD _____ _____ _____	\$ <u>95,941.</u>	<u>VARIOUS</u>
23	FOOD _____ _____ _____	\$ <u>229,345.</u>	<u>VARIOUS</u>
24	FOOD _____ _____ _____	\$ <u>130,733.</u>	<u>VARIOUS</u>

Name of organization  <b>ATLANTA COMMUNITY FOOD BANK</b>	Employer identification number  <b>58-1376648</b>
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**Part II Noncash Property** (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
25	FOOD _____ _____ _____	\$ 631,132.	VARIOUS
26	FOOD _____ _____ _____	\$ 101,525.	VARIOUS
27	FOOD _____ _____ _____	\$ _____	_____
28	FOOD _____ _____ _____	\$ 150,107.	VARIOUS
29	FOOD _____ _____ _____	\$ 68,141.	VARIOUS
30	FOOD _____ _____ _____	\$ 121,629.	VARIOUS

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part II Noncash Property** (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
31	FOOD _____ _____ _____	\$ 1,835,293.	VARIOUS
32	FOOD _____ _____ _____	\$ 142,805.	VARIOUS
33	FOOD _____ _____ _____	\$ 146,016.	VARIOUS
34	FOOD _____ _____ _____	\$ 73,632.	VARIOUS
35	FOOD _____ _____ _____	\$ 127,235.	VARIOUS
36	SUNDRIES _____ _____ _____	\$ 69,053.	VARIOUS

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part II Noncash Property** (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
37	FOOD _____ _____ _____	\$ 52,475.	VARIOUS
38	FOOD _____ _____ _____	\$ 107,852.	VARIOUS
39	SUNDRIES _____ _____ _____	\$ 1,198,455.	VARIOUS
40	FOOD _____ _____ _____	\$ 141,950.	VARIOUS
41	FOOD _____ _____ _____	\$ 4,886,863.	VARIOUS
42	FOOD _____ _____ _____	\$ 321,043.	VARIOUS

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part II Noncash Property** (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
43	FOOD _____ _____ _____	\$ 90,812.	VARIOUS
44	FOOD _____ _____ _____	\$ 78,489.	VARIOUS
45	FOOD _____ _____ _____	\$ 70,116.	VARIOUS
46	FOOD _____ _____ _____	\$ _____	_____
47	FOOD _____ _____ _____	\$ _____	_____
48	FOOD _____ _____ _____	\$ 229,340.	VARIOUS

<b>Name of organization</b>  ATLANTA COMMUNITY FOOD BANK	<b>Employer identification number</b>  58-1376648
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**Part II Noncash Property** (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
49	SUNDRIES _____ _____ _____	\$ 208,801.	VARIOUS
50	SUNDRIES _____ _____ _____	\$ 863,289.	VARIOUS
51	FOOD _____ _____ _____	\$ 967,351.	VARIOUS
52	FOOD _____ _____ _____	\$ 119,851.	VARIOUS
53	FOOD _____ _____ _____	\$ 152,168.	VARIOUS
54	FOOD _____ _____ _____	\$ 383,551.	VARIOUS

Name of organization <b>ATLANTA COMMUNITY FOOD BANK</b>	Employer identification number <b>58-1376648</b>
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**Part II Noncash Property** (See Specific Instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
55	FOOD _____ _____ _____	\$ 590,848.	VARIOUS
56	SUNDRIES _____ _____ _____	\$ 2,913,621.	VARIOUS
57	FOODS _____ _____ _____	\$ 198,786.	VARIOUS
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

FORM 990	GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES			STATEMENT	1
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)	
35.297532 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	328.	328.	0.	0.	
30.88109 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	287.	286.	0.	1.	
33.164562 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	308.	307.	0.	1.	
35.47857 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	329.	329.	0.	0.	
39.435 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	366.	365.	0.	1.	
33.557 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	311.	311.	0.	0.	
36.554 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	339.	338.	0.	1.	
32.494 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	302.	301.	0.	1.	
34.954 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	324.	322.	0.	2.	
37.364 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	347.	345.	0.	2.	
36.144 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	335.	335.	0.	0.	
38.935 SHS OF EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	361.	361.	0.	0.	
13.35113 SHS HARBOR SMALL CAP VALUE FUND INS CL	273.	264.	0.	9.	
1.662616 SHS HARBOR SMALL CAP VALUE FUND INS CL	34.	33.	0.	1.	
66.274 SHS DELAWARE POOLED TRUST-THE INTL EQUITY PORTFOLIO	1,583.	1,359.	0.	224.	
0.91 SHS DELAWARE POOLED TRUST-THE INTL EQUITY PORTFOLIO	22.	19.	0.	3.	

2.282523 SHS DODGE & COX STOCK FD	339.	308.	0.	31.
12.961349 SHS DODGE & COX STOCK FD	1,927.	1,788.	0.	139.
0.494436 SHS DODGE & COX STOCK FD	74.	68.	0.	6.
2.186451 SHS DODGE & COX STOCK FD	325.	302.	0.	23.
1.316581 SHS DODGE & COX STOCK FD	196.	189.	0.	7.
2.142802 SHS DODGE & COX STOCK FD	319.	308.	0.	11.
2.501916 SHS DODGE & COX STOCK FD	372.	361.	0.	11.
669.568 SHS T ROWE PRICE FUNDS GROWTH STK FD INC	20,000.	18,607.	0.	1,393.
12.009 SHS ARTISAN SMALL CAP FD INV CL	215.	218.	0.	-3.
25.232 SHS ARTISAN SMALL CAP FD INV CL	451.	457.	0.	-6.
5198.181 SHS FPA PARAMOUNT FD INC	83,223.	80,000.	0.	3,223.
36.463 SHS HARBOR SMALL CAP VALUE FUND INS CL	761.	784.	0.	-23.
667.903092 SHS JULIUS BAER INTL EQUITY II-I	9,965.	8,249.	0.	1,716.
0.301391 SHS JULIUS BAER INTL EQUITY II-I	5.	5.	0.	0.
2.036517 SHS JULIUS BAER INTL EQUITY II-I	31.	31.	0.	0.
140.492288 SHS MORGAN STANLEY INSTITUTIONAL FUND INC	4,865.	4,105.	0.	760.
1.978334 SHS MORGAN STANLEY INSTITUTIONAL FUND INC	69.	67.	0.	2.
1.912378 SHS MORGAN STANLEY INSTITUTIONAL FUND INC	66.	65.	0.	1.
3996.448 SHS PIMCO EMERGING MARKETS BOND FD INS CL	44,121.	45,000.	0.	-879.
75.207 SHS PIMCO EMERGING MARKETS BOND FD INS CL	830.	833.	0.	-3.
117.984 SHS PIMCO EMERGING MARKETS BOND FD INS CL	1,303.	1,306.	0.	-3.
466.418 SHS EVERGREEN INTERNATIONAL BOND FD CL I (FD #460)	4,926.	5,000.	0.	-74.
5438.066 SHS TOUCHSTONE MID CAP FUND CL Y	98,429.	90,000.	0.	8,429.
4143.646 SHS AMERICAN CENTURY NEW OPPORTUNITY II-INV	34,641.	30,000.	0.	4,641.
1419.194 SHS COHEN & STEER INSTL RLTY SHS FD	76,296.	80,000.	0.	-3,704.

77.411 SHS COHEN & STEER INSTL RLTY SHS FD	4,162.	4,258.	0.	-96.
26.578 SHS COHEN & STEER INSTL RLTY SHS FD	1,429.	1,462.	0.	-33.
2.340084 SHS DODGE & COX STOCK FD	379.	338.	0.	41.
3.074479 SHS DODGE & COX STOCK FD	497.	464.	0.	33.
28.891283 SHS DODGE & COX STOCK FD	4,675.	4,451.	0.	224.
1.114169 SHS DODGE & COX STOCK FD	180.	172.	0.	8.
2.435776 SHS DODGE & COX STOCK FD	394.	375.	0.	19.
4.473711 SHS DODGE & COX STOCK FD	724.	692.	0.	32.
0.489232 SHS DODGE & COX STOCK FD	79.	76.	0.	3.
3.528164 SHS DODGE & COX STOCK FD	571.	546.	0.	25.
1142.355 SHS HARBOR INTERNATIONAL FUND INS CL	77,429.	65,000.	0.	12,429.
35.272 SHS HARBOR INTERNATIONAL FUND INS CL	2,391.	2,153.	0.	238.
5727.377 SHS JP MORGAN TR I EMERG MARK DEBT-SEL	50,573.	50,000.	0.	573.
4594.254908 SHS JULIUS BAER INTL EQUITY II-I	75,178.	56,751.	0.	18,427.
2.073609 SHS JULIUS BAER INTL EQUITY II-I	34.	31.	0.	3.
14.011483 SHS JULIUS BAER INTL EQUITY II-I	229.	211.	0.	18.
1219.548712 SHS MELLOM INSTITUTIONAL FUNDS	32,061.	30,000.	0.	2,061.
1399.548712 SHS MORGAN STANLEY INSTITUTIONAL FUND INC	47,389.	40,895.	0.	6,494.
19.707666 SHS MORGAN STANLEY INSTITUTIONAL FUND INC	667.	667.	0.	0.
19.050622 SHS MORGAN STANLEY INSTITUTIONAL FUND INC	645.	645.	0.	0.
515.996 SHS PIMCO HIGH YIELD FD INSTL CL	5,098.	5,000.	0.	98.
4.242915 SHS PIMCO HIGH YIELD FD INSTL CL	42.	42.	0.	0.
1006.036 SHS PIMCO HIGH YIELD FD INSTL CL	9,940.	10,000.	0.	-60.
108.172 SHS OPPENHEIMER DEVELOPING MARKETS FD CL A	4,993.	4,337.	0.	656.
3468.611 SHS T ROWE PRICE FUNDS GROWTH STOCK FD INC	117,829.	96,393.	0.	21,436.
52.571 SHS T ROWE PRICE FUNDS GROWTH STOCK FD INC	1,786.	1,665.	0.	121.

9.857 SHS T ROWE PRICE FUNDS GROWTH STOCK FD INC	335.	312.	0.	23.
3209.7 SHS PIMCO COMMODITY REALRETURN STRATEGY FD INSTL	45,321.	45,000.	0.	321.
346.981 SHS PIMCO COMMODITY REALRETURN STRATEGY FD INSTL	4,899.	5,000.	0.	-101.
3746.878 SHS VANGUARD INFLATION-PROTECTED SECURITIES FD IV CL	43,801.	45,000.	0.	-1,199.
11940.299 SHS WESTERN ASSET CORE PLUS BOND PORTFOLIO CL I	121,075.	120,000.	0.	1,075.
9.228 SHS WESTERN ASSET CORE PLUS BOND PORTFOLIO CL I	94.	98.	0.	-4.
1885.014 SHS WESTERN ASSET CORE PLUS BOND PORTFOLIO CL I	19,114.	20,000.	0.	-886.
49.154 SHS WESTERN ASSET CORE PLUS BOND PORTFOLIO CL I	499.	510.	0.	-11.
152.936 SHS WESTERN ASSET CORE PLUS BOND PORTFOLIO CL I	1,551.	1,586.	0.	-35.
2417.14011 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	22,431.	22,866.	0.	-435.
0.908549 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	8.	9.	0.	-1.
6049.244825 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	56,137.	57,165.	0.	-1,028.
24.351683 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	226.	230.	0.	-4.
22.966375 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	213.	217.	0.	-4.
22.481232 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	209.	212.	0.	-3.
24.608164 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	228.	232.	0.	-4.
24.47859 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	227.	230.	0.	-3.
27.93557 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	259.	263.	0.	-4.
1014.649761 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	9,416.	9,528.	0.	-112.

27.343718 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	254.	257.	0.	-3.
27.36506 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	254.	257.	0.	-3.
30.722191 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	285.	287.	0.	-2.
31.841488 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	295.	298.	0.	-3.
31.462673 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	292.	294.	0.	-2.
38.587507 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	358.	360.	0.	-2.
34.347566 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	319.	319.	0.	0.
34.293159 SHS EVERGREEN ADJUSTABLE RATE FD CLI (FD #056)	318.	319.	0.	-1.
964.418254 SHS HARBOR SMALL CAP VALUE FUND INS CL	19,693.	17,080.	0.	2,613.
2665.245 SHS DELAWARE POOLED TRUST-THE INTERNATIONAL EQUITY PORTFOLIO	63,646.	50,000.	0.	13,646.
1127.396 SHS ARTISAN SMALL CAP FD INV CL	20,000.	18,749.	0.	1,251.
654.264384 SHS DODGE & COX STOCK FD	97,289.	56,836.	0.	40,453.
2.979908 SHS DODGE & COX STOCK FD	443.	255.	0.	188.
3.013158 SHS DODGE & COX STOCK FD	448.	263.	0.	185.
2.711928 SHS DODGE & COX STOCK FD	403.	237.	0.	166.
2.902043 SHS DODGE & COX STOCK FD	432.	245.	0.	187.
3.500242 SHS DODGE & COX STOCK FD	520.	340.	0.	180.
2.395066 SHS DODGE & COX STOCK FD	356.	241.	0.	115.
2.223991 SHS DODGE & COX STOCK FD	331.	252.	0.	79.
2.668732 SHS DODGE & COX STOCK FD	397.	302.	0.	95.
2.312939 SHS DODGE & COX STOCK FD	344.	262.	0.	82.
2.071386 SHS DODGE & COX STOCK FD	308.	244.	0.	64.

1.956293 SHS DODGE & COX STOCK FD	291.	231.	0.	60.
2.124244 SHS DODGE & COX STOCK FD	316.	253.	0.	63.
2.144136 SHS DODGE & COX STOCK FD	319.	254.	0.	65.
2.268323 SHS DODGE & COX STOCK FD	337.	296.	0.	41.
11.077326 SHS DODGE & COX STOCK FD	1,647.	1,443.	0.	204.
6.382676 SHS DODGE & COX STOCK FD	949.	832.	0.	117.
2.335528 SHS DODGE & COX STOCK FD	347.	297.	0.	50.
0.812051 SHS DODGE & COX STOCK FD	121.	103.	0.	18.
3.35877 SHS DODGE & COX STOCK FD	499.	427.	0.	72.
2.355818 SHS DODGE & COX STOCK FD	350.	307.	0.	43.
1590.748746 SHS HARBOR SMALL CAP VALUE FUND INS CL	33,183.	28,172.	0.	5,011.
22.02187 SHS HARBOR SMALL CAP VALUE FUND INS CL	459.	436.	0.	23.
2.742384 SHS HARBOR SMALL CAP VALUE FUND INS CL	57.	54.	0.	3.
4464.286 SHS EVERGREEN INTERNATIONAL BOND FD CL I (FD #460)	47,143.	48,077.	0.	-934.
6.72 SHS EVERGREEN INTERNATIONAL BOND FD CL I (FD #460)	71.	71.	0.	0.
611.944339 SHS DODGE & COX STOCK FD	99,019.	53,160.	0.	45,859.
2.787159 SHS DODGE & COX STOCK FD	451.	239.	0.	212.
2.818256 SHS DODGE & COX STOCK FD	456.	246.	0.	210.
2.536511 SHS DODGE & COX STOCK FD	410.	221.	0.	189.
2.714329 SHS DODGE & COX STOCK FD	439.	229.	0.	210.
3.273834 SHS DODGE & COX STOCK FD	530.	318.	0.	212.
2.240146 SHS DODGE & COX STOCK FD	362.	225.	0.	137.
2.080135 SHS DODGE & COX STOCK FD	337.	236.	0.	101.
2.496109 SHS DODGE & COX STOCK FD	404.	283.	0.	121.
2.163331 SHS DODGE & COX STOCK FD	350.	245.	0.	105.
1.937401 SHS DODGE & COX STOCK FD	313.	229.	0.	84.

1.829754 SHS DODGE & COX STOCK FD	296.	216.	0.	80.
1.98684 SHS DODGE & COX STOCK FD	321.	236.	0.	85.
2.005446 SHS DODGE & COX STOCK FD	325.	237.	0.	88.
2.1216 SHS DODGE & COX STOCK FD	343.	276.	0.	67.
10.360807 SHS DODGE & COX STOCK FD	1,676.	1,350.	0.	326.
5.969824 SHS DODGE & COX STOCK FD	966.	778.	0.	188.
2.184457 SHS DODGE & COX STOCK FD	353.	278.	0.	75.
0.759526 SHS DODGE & COX STOCK FD	123.	97.	0.	26.
3.141513 SHS DODGE & COX STOCK FD	508.	399.	0.	109.
2.203436 SHS DODGE & COX STOCK FD	357.	287.	0.	70.
2.134881 SHS DODGE & COX STOCK FD	345.	288.	0.	57.
12.122965 SHS DODGE & COX STOCK FD	1,962.	1,673.	0.	289.
0.462455 SHS DODGE & COX STOCK FD	75.	64.	0.	11.
2.045024 SHS DODGE & COX STOCK FD	331.	282.	0.	49.
1.231419 SHS DODGE & COX STOCK FD	199.	177.	0.	22.
2.004198 SHS DODGE & COX STOCK FD	324.	288.	0.	36.
6116.209 SHS PIMCO HIGH YIELD FD INSTL CL	60,428.	60,000.	0.	428.
1547.189 SHS OPPENHEIMER DEVELOPING MARKETS FD CL A	71,418.	60,000.	0.	11,418.
11961.722 SHS WESTERN ASSET CORE PLUS BOND PORTFOLIO CL I	121,292.	125,000.	0.	-3,708.
1879.219 UNITS ARTISAN SMALL CAP FD INV CL	33,563.	31,251.	0.	2,312.
TO FORM 990, PART I, LINE 8	<u>1,846,365.</u>	<u>1,646,494.</u>	<u>0.</u>	<u>199,871.</u>

FORM 990                      GAIN (LOSS) FROM SALE OF OTHER ASSETS                      STATEMENT    2

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
COPIER	12/01/04	06/30/07	PURCHASED

NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
REPLACED	0.	12,583.	0.	6,991.	-5,592.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
1996 ISUZU	05/17/96	03/05/07	PURCHASED

NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
NEW LIFE PRAISE CENTER	2,500.	37,700.	0.	37,700.	2,500.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
1993 ISUZU	08/30/93	03/14/07	PURCHASED

NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
COMMUNITY OUTREACH	2,000.	27,174.	0.	27,174.	2,000.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
OLD MITSUBISHI TRUCK NO LONGER ON BOOKS	/ /90	03/16/07	PURCHASED

NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
NO LONGER BOUND, INC	3,500.	0.	0.	0.	3,500.
TO FM 990, PART I, LN 8	8,000.	77,457.	0.	71,865.	2,408.

FORM 990	SPECIAL EVENTS AND ACTIVITIES				STATEMENT	3
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME	
GOLF CLASSIC	151,394.	78,159.	73,235.	66,876.	6,359.	
SIMPLE ABUNDANCE	49,832.	49,832.		380.	-380.	
SUPPER CLUB	11,694.	11,694.		196.	-196.	
<b>TOTAL TO FM 990, PART I, LINE 9</b>	<b>212,920.</b>	<b>139,685.</b>	<b>73,235.</b>	<b>67,452.</b>	<b>5,783.</b>	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES		STATEMENT	4
DESCRIPTION				AMOUNT
UNREALIZED LOSS ON INVESTMENTS				-94,910.
PERSONAL USE OF VEHICLE ON FORM 990 NOT ON FINANCIAL STATEMENTS				1,941.
<b>TOTAL TO FORM 990, PART I, LINE 20</b>				<b>-92,969.</b>

FORM 990	OTHER EXPENSES				STATEMENT	5
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING		
INSURANCE	165,120.	122,921.	38,813.	3,386.		
FOOD COSTS	1,716,646.	1,716,646.				
DUES/MEMBERSHIPS	38,469.	30,379.	7,795.	295.		
PROMOTIONAL EXPENSES	69,024.	18,072.	692.	50,260.		
MISCELLANEOUS	87,986.	1,493.	86,217.	276.		
AGENCY EXPENSE	3,297,507.	3,297,507.				
FOOD DISTRIBUTED	32,439,054.	32,439,054.				
OTHER PROFESSIONAL SERVICES	202,860.	67,415.	132,445.	3,000.		
EMPLOYEE RECOGNITION	15,323.	10,828.	4,465.	30.		
PROJECT EXPENSES	230,479.	124,347.	5,754.	100,378.		
WRITEOFF OF PLEDGES RECEIVABLE	30,368.	14,542.	4,252.	11,574.		
SCHOOL SUPPLIES DISTRIBUTED	357,638.	357,638.				
<b>TOTAL TO FM 990, LN 43</b>	<b>38,650,474.</b>	<b>38,200,842.</b>	<b>280,433.</b>	<b>169,199.</b>		

FORM 990 OFFICER COMPENSATION ALLOCATION STATEMENT 6  
PART II, LINE 25A

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
WILLIAM BOLLING	137,218.	14,348.	1,941.	153,507.
A. PROGRAM SERVICES	41,165.	4,304.	582.	46,051.
B. MANAGEMENT AND GENERAL	27,444.	2,870.	388.	30,702.
C. FUNDRAISING	68,609.	7,174.	971.	76,754.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
ROBERT JOHNSON	104,574.	11,172.		115,746.
A. PROGRAM SERVICES	52,287.	5,586.		57,873.
B. MANAGEMENT AND GENERAL	52,287.	5,586.		57,873.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
NANCY FLIPPIN	84,358.	7,774.		92,132.
A. PROGRAM SERVICES				
B. MANAGEMENT AND GENERAL	84,358.	7,774.		92,132.
C. FUNDRAISING				

TOTAL PROGRAM SERVICES				103,924.
TOTAL MANAGEMENT AND GENERAL				180,707.
TOTAL FUNDRAISING				76,754.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PART II, LINE 25A				361,385.

## DESCRIPTION OF PROGRAM SERVICE ONE

## OVERALL PRODUCT DISTRIBUTION

THE ATLANTA COMMUNITY FOOD BANK COMPLETED ITS 28TH YEAR OF OPERATION BY COLLECTING OVER 20.7 MILLION POUNDS OF GROCERY & HOUSEHOLD PRODUCTS FROM 148 LOCAL DONORS, NATIONAL SOURCES COORDINATED BY AMERICA'S SECOND HARVEST (THE NATION'S FOOD BANK NETWORK), USDA COMMODITIES, AND PURCHASES. DISTRIBUTIONS OF THIS PRODUCT INCLUDED 14.5 MILLION POUNDS TO APPROXIMATELY 800 PARTNER AGENCIES THROUGHOUT THE 38 NORTHWESTERN COUNTIES OF GEORGIA AND 6.2 MILLION POUNDS SHARED WITH OTHER FOOD BANKS IN GEORGIA AND THE SOUTHEAST.

## SNAP

WHILE MOST OF THE FOOD BANK'S PRODUCTS ARE DONATED FROM WHOLESALERS, RETAILERS, AND THE GENERAL PUBLIC, 2.38 MILLION POUNDS (OR 11%) OF THIS YEAR'S DISTRIBUTION WAS PRODUCT PURCHASED WITH FUNDS FROM GEORGIA'S STATE NUTRITION ASSISTANCE PROGRAM. THESE AS WELL AS OTHER GRANTS ENABLE THE FOOD BANK TO SECURE HIGHLY NUTRITIOUS PRODUCTS THAT ARE MORE RARELY DONATED. THESE PRODUCTS, HOWEVER, ARE RESTRICTED FOR USE ONLY BY PARTNER AGENCIES THAT SERVE CHILDREN AND/OR FAMILIES WITH CHILDREN.

## PRODUCT RESCUE CENTER (SALVAGE)

AT THE PRODUCT RESCUE CENTER (PRC), NONPERISHABLE FOODS DONATED FROM FOOD DRIVES AND SALVAGE CENTERS ARE INSPECTED, SORTED AND PACKAGED FOR DISTRIBUTION TO OUR PARTNER AGENCIES. THIS PROJECT IS OFTEN CONSIDERED THE HEART OF THE FOOD BANK AND IS THE MOST POPULAR VOLUNTEER EFFORT (SEE SECTION BELOW). A TOTAL OF 5.5 MILLION POUNDS WERE PROCESSED AT THE PRC DURING THIS FISCAL YEAR.

## THE ATLANTA COLLABORATIVE KITCHEN (TACK)

THE ATLANTA COLLABORATIVE KITCHEN (TACK), A COLLABORATION OF PROJECT OPEN HAND/ATLANTA AND THE ATLANTA COMMUNITY FOOD BANK IS AN INNOVATIVE PROGRAM THAT FIGHTS HUNGER AND UNEMPLOYMENT BY TRAINING 8 TO 15 INDIVIDUALS PER EACH 16-WEEK CULINARY ARTS CLASS. IN THE 2006-07 YEAR, 4 CLASSES GRADUATED (#17, #18 #19 & #20)

VOLUNTEERISM AT THE ATLANTA COMMUNITY FOOD BANK

VOLUNTEERS FROM ALL SEGMENTS OF OUR COMMUNITY (CORPORATE, INDIVIDUALS, FAITH-BASED, SCHOOLS, CIVIC GROUPS, GOVERNMENT AND COURT-APPOINTED COMMUNITY SERVICE VOLUNTEERS) MAKE A HUGE CONTRIBUTION TO THE WORK OF THE FOOD BANK. IN 2006-07, APPROXIMATELY 15,615 (12,389 -DISTRIBUTION; 2,352 - HUNGER 101 & ADVOCACY/ED; 430 - HUNGER WALK; 444 - EVENTS & PROMOTIONS ) VISITS BY VOLUNTEERS CONTRIBUTED OVER 57,108 HOURS OF LABOR TO THE VARIOUS PROGRAMS RELATED TO OUR CORE BUSINESS WITH THE BULK OF THOSE HOURS UTILIZED IN OUR PRODUCT RESCUE CENTER. AN ADDITIONAL 15,764 HOURS OF VOLUNTEER SERVICES WERE CONTRIBUTED THROUGHOUT THE REST OF THE ORGANIZATION FROM OFFICE ASSISTANCE TO HELPING IN THE COMMUNITY GARDENING PROGRAM. COLLECTIVELY, THE FINANCIAL IMPACT OF THESE VOLUNTEER EFFORTS WAS \$655,851 WHEN CALCULATED AT \$9.00 PER HOUR.

OUR PARTNER AGENCIES

OVER HALF OF THE RECIPIENT PARTNER AGENCIES ARE FAITH-BASED ORGANIZATIONS REPRESENTING ALL MAJOR FAITH TRADITIONS. MANY OF THESE ORGANIZATIONS OPERATE FOOD PANTRIES WHICH SERVE THE WORKING POOR. APPROXIMATELY HALF OF THE AGENCIES HAVE ON SITE FEEDING PROGRAMS INCLUDING SHELTERS FOR THE HOMELESS, DAY CARE CENTERS, SENIOR CITIZEN CENTERS, AND ADDICTION TREATMENT FACILITIES FOR LOW INCOME. ON A MONTHLY BASIS 71,350 PEOPLE WERE SERVED THROUGH THESE ON-SITE PROGRAMS AND APPROXIMATELY 25,651 HOUSEHOLDS RECEIVE FOOD ASSISTANCE IN ANY GIVEN MONTH.

	GRANTS	EXPENSES
	<hr/>	<hr/>
TO FORM 990, PART III, LINE A		41,148,144.
	<hr/>	<hr/>

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT 8

## DESCRIPTION OF PROGRAM SERVICE TWO

## ATLANTA'S TABLE PROJECT

LAUNCHED IN 1987, ATLANTA'S TABLE ADDRESSES PROBLEMS OF LOCAL HUNGER AND UNUSED PREPARED FOOD IN THE ATLANTA AREA FOOD-SERVICE INDUSTRY. ATLANTA'S TABLE SEEKS DONATIONS OF EXCESS FOOD FROM THE HOSPITALITY INDUSTRY AND DELIVERS IT DAILY TO APPROXIMATELY 30 OF METRO ATLANTA'S NONPROFIT, HUNGER-RELIEF AGENCIES. IN THIS FISCAL YEAR, THE PROJECT COLLECTED 482,475 POUNDS (A 5% DECREASE OVER THE PRIOR YEAR).

GRANTS

EXPENSES

TO FORM 990, PART III, LINE B

379,099.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT 9

DESCRIPTION OF PROGRAM SERVICE THREE

## RECLAMATION CENTER

THROUGH A CONTRACT WITH PUBLIX SUPERMARKETS, OUR RECLAMATION CENTER RECEIVES, SCANS, AND PROCESSES UNSALEABLE GROCERY PRODUCTS FROM PUBLIX RETAIL OUTLETS PRIMARILY IN THE GEORGIA MARKET AREA. AFTER INDIVIDUAL ITEMS ARE SORTED INTO VARIOUS CATEGORIES (UNSAFE PRODUCT TO BE DUMPED, ITEMS EARMARKED FOR SALE TO OTHER SALVAGE PROCESSORS, OR PRODUCT TO BE RETURNED TO THE MANUFACTURER), 2.3 MILLION POUNDS OF QUALITY PRODUCT WERE DONATED BACK TO THE FOOD BANK FOR ADDITIONAL QUALITY CHECK AND EVENTUAL DISTRIBUTION THROUGH OUR PRODUCT RESCUE CENTER.

GRANTS

EXPENSES

TO FORM 990, PART III, LINE C

696,130.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 10

DESCRIPTION OF PROGRAM SERVICE FOUR

KIDS IN NEED PROJECT

WHEN CHILDREN COME TO SCHOOL WITH A FULL STOMACH AND THE RIGHT SCHOOL SUPPLIES, THERE'S NO LIMIT TO WHAT THEY CAN LEARN. THIS REALIZATION INSPIRES THE MISSION OF KIDS IN NEED: TO PROVIDE LEARNING SUPPLIES TO STUDENTS WHOSE ACADEMIC SUCCESS IS THREATENED BY POVERTY. IN OUR 4,200 SQ. FT. "RETAIL STORE" TEACHERS SHOP FOR FREE SCHOOL SUPPLIES. A TOTAL OF 3,282 TEACHER VISITS FROM 191 SCHOOLS (AN INCREASE OF 9 NEW SCHOOLS) RESULTED IN 310,900 POUNDS OF SUPPLIES BEING DISTRIBUTED. MORE IMPORTANTLY, 193,663 CHILDREN BENEFITED FROM PRODUCTS LIKE BINDERS, NOTEBOOKS, PENS & PENCILS, BACKPACKS AND EVEN ART & CRAFT SUPPLIES. IN ADDITION, 29 FOOD BANK PARTNER AGENCIES RECEIVED 20,143 POUNDS OF SUPPLIES FOR THEIR AFTER-SCHOOL PROGRAMS FOR KIDS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE D	_____	_____
	_____	532,132.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 11  
PART III

EXPLANATION

TO FIGHT HUNGER BY ENGAGING, EDUCATING, AND EMPOWERING OUR COMMUNITY.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 12

DESCRIPTION OF OTHER PROGRAM SERVICES	GRANTS AND ALLOCATIONS	EXPENSES
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PUBLIC EDUCATION  
HUNGER 101

THROUGH THIS INTERACTIVE EDUCATION PROGRAM, THE ISSUES OF HUNGER, FOOD SECURITY AND POVERTY ARE ADDRESSED ON THE NATIONAL, STATE AND LOCAL LEVELS. THE PURPOSE OF HUNGER 101 IS TO FIGHT HUNGER BY BUILDING COMMUNITY AWARENESS ON THESE DIFFICULT ISSUES WHILE CREATING A

VEHICLE TO FURTHER THE FOOD BANK'S MISSION DIRECTLY: TO FIGHT HUNGER BY ENGAGING, EDUCATING, AND EMPOWERING OUR COMMUNITY. IN THE 2006-07 YEAR, 100 CLASSES WERE CONDUCTED AT A VARIETY OF LOCATIONS - SOME AT THE FOOD BANK BUT MORE AT THE SITE OF SCHOOLS, BUSINESSES, CLUBS, AND CONGREGATIONS. THROUGH THESE CLASSES, 2809 DIFFERENT INDIVIDUALS WERE REACHED.

#### FOODSHARING

FOODSHARING IS OUR ORGANIZATION'S QUARTERLY PRINT NEWSLETTER WITH A CIRCULATION TO APPROXIMATELY 28,000 INDIVIDUALS. KEY FEATURES OF EACH ISSUE INCLUDE A COVER STORY ON A SELECTED TOPIC RELATED TO OUR CORE MISSION AND A COMMENTARY ON A SELECTED SOCIAL ISSUE RELATED TO HUNGER AND/OR POVERTY FROM OUR EXECUTIVE DIRECTOR, BILL BOLLING. EACH ISSUE ALSO INCLUDES A TRIBUTE TO THE AGENCY OF THE QUARTER AND THE VOLUNTEER OF THE QUARTER, AS WELL AS TRIBUTES TO OTHER KEY EVENTS AND SUPPORTERS. ADDITIONALLY, FOODSHARING ALWAYS INCLUDES UPCOMING OPPORTUNITIES TO VOLUNTEER FOR BOTH ONGOING AND SPECIAL EVENT ACTIVITIES. RESULTS FROM RECENT SPECIAL EVENTS OR PROJECTS ARE ALSO REPORTED. WE INCLUDE IN EVERY ISSUE A SECTION ENTITLED "CHEERS" THAT GIVES ACKNOWLEDGEMENT IN LIST FORM TO GIFTS FROM INDIVIDUALS, HONOR-MEMORIAL GIFTS, ONGOING MONTHLY "PARTNERS IN SHARING" DONORS, GIFTS FROM ORGANIZATIONS, INDIVIDUAL VOLUNTEERS, GROUP VOLUNTEERS, FOOD DONORS, AND KIDS IN NEED DONORS.

#### COMMUNITY GARDENING INITIATIVE

THIS INITIATIVE HELPS NEIGHBORHOOD GROUPS FIND LOCATIONS FOR GARDENS, AS WELL AS PLAN AND ORGANIZE GARDENS TO HELP BUILD STRONGER COMMUNITIES ONE GARDEN AT A TIME. WITH MORE THAN 150 COMMUNITY, THERAPY, EDUCATION AND DONATION GARDENS IN THE ATLANTA AREA, THE EFFORT IS AN ONGOING, YEAR-ROUND PROJECT THAT EMPOWERS PEOPLE TO SUPPLEMENT THEIR FOOD SUPPLY BY GROWING IT THEMSELVES AND/OR SHARING SOME OF THEIR ABUNDANCE WITH OTHERS. SIX NEW COMMUNITY GARDENS AND SIX NEW EDUCATIONAL GARDENS WERE ADDED IN THIS FISCAL YEAR. A SPECIAL SUMMER PROJECT, PLANT-A-ROW FOR THE HUNGRY CO-SPONSORED BY THE ATLANTA JOURNAL AND CONSTITUTION, USED TWENTY DROP-OFF SITES THROUGHOUT 17 COUNTIES TO COLLECT MORE THAN 18,000 POUNDS OF FRESH PRODUCE. FROM OUR OWN GARDEN WE GREW OVER 1,300 POUNDS OF ORGANIC VEGETABLES WHICH WERE DISTRIBUTED TO THE ATLANTA COMMUNITY FOOD BANK'S NETWORK OF COMMUNITY PARTNERS.

#### PUBLIC POLICY

UNDERSTANDING THAT HUNGER AND POVERTY ARE PROFOUNDLY IMPACTED BY PUBLIC POLICY, THE FOOD BANK WORKS TO PROVIDE THE COMMUNITY AND OUR DECISION-MAKERS WITH RELEVANT INFORMATION AND A POINT-OF-VIEW. OUR ADVOCACY EFFORTS HAVE CREATED AND MAINTAINED STATE FUNDING FOR SNAP, COUNTY FUNDING FOR HUMAN SERVICES,

ORGANIZED A SOUTHEASTERN ANTI-HUNGER COALITION, OFFERED TESTIMONY AT FARM BILL HEARINGS, WORKED TO MAINTAIN NATIONAL FUNDING LEVELS FOR THE FOOD STAMP PROGRAM, PROVIDED A LINKAGE BETWEEN THE REGIONAL OFFICE OF USDA AND OUR PARTNER AGENCIES, AND PROMOTED THE GEORGIA FOOD BANK ASSOCIATION.

0. 337,243.

TOTAL TO FORM 990, PART III, LINE E

337,243.

FORM 990	OTHER INVESTMENTS	STATEMENT	13
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DESCRIPTION	VALUATION METHOD	AMOUNT
ENDOWMENT FUND	MARKET VALUE	90,000.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		90,000.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	14
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LASER PRINTER	1,463.	1,463.	0.
ACCTS PAY SQLA 2-4USERS	1,000.	1,000.	0.
LASER PRINTERS	2,010.	2,010.	0.
NOVELL UPGRADE	1,573.	1,573.	0.
NOVELL 4.1	2,115.	2,115.	0.
LASER JET PRINTER	1,119.	1,119.	0.
ACEROPEN FULL TOWER	3,775.	3,775.	0.
SERVER SOFTWARE	2,444.	2,444.	0.
E-MAIL, WIN NT, SOFTWARE	6,402.	6,402.	0.
HP LASERJET PRINTER	859.	859.	0.
ACER TOWER	925.	925.	0.
CITRIX SERVER & WINDOWS 2000 CD	7,403.	7,403.	0.
HP NET SERVER	5,279.	5,279.	0.
ACER MID-TOWER AND ACERVIEW MONITOR	1,693.	1,693.	0.
1COMPUTER, 2 TOWERS, 3 MONITORS	4,584.	4,584.	0.
DIGITAL CAMERA	1,081.	1,081.	0.
CYSTAT V6 UPGRADE TO MACOLA PRINT SERVER, 2 MONITORS & MEMORY CHIPS	999.	999.	0.
COMPUTER, 4 APC BACK UPS, 2 MONITORS	2,635.	2,635.	0.
	2,135.	2,135.	0.

LASER JET PRINTER	1,230.	1,230.	0.
BILL'S LAPTOP COMPUTER (DELL)	2,877.	2,877.	0.
NT SERVER, EXCHANGE CAL, 25			
USER LICENSE	2,292.	2,292.	0.
HP NETSERVER	5,366.	5,366.	0.
LASER PRINTER, SCANNER	3,156.	3,156.	0.
MONITOR	743.	743.	0.
4 ACER CPU'S, 3 ACERVIEW 15'			
MONITORS	5,088.	5,088.	0.
MONITOR	169.	169.	0.
ACEROPEN COMPUTER	1,087.	1,087.	0.
ACEROPEN COMPUTER	1,087.	1,087.	0.
ACEROPEN COMPUTER	1,087.	1,087.	0.
LASER PRINTER	1,441.	1,441.	0.
Y2K SOFTWARE SERVER DISK	1,289.	1,289.	0.
BAYSTACK 350-24T SWITCH	1,936.	1,936.	0.
4 COMPUTERS, 2 15" MONITORS, 2			
19" MONITORS	4,976.	4,976.	0.
HP & MICROSOFT NET SERVERS	8,730.	8,730.	0.
BLACKBAUD FIXED ASSET	2,000.	2,000.	0.
MACOLA SOFTWARE	47,995.	47,995.	0.
3 TOWERS	2,903.	2,903.	0.
BLACKBAUD CASH RECEIPTS	1,000.	1,000.	0.
BACKUP MODULES & ANTIVIRUS			
SOFTWARE	1,058.	1,058.	0.
BLACKBAUD G/L PDG	11,015.	11,015.	0.
ACEROPEN WINDOWS SERVER	2,341.	2,341.	0.
MS OFFICE PRO LIC (30)	1,980.	1,980.	0.
SOFTWARE UPGRADE	1,005.	1,005.	0.
10K DRIVE/MONITOR	1,654.	1,654.	0.
LAPTOP COMPUTER	2,012.	2,012.	0.
WEBSITE	161,200.	161,200.	0.
10 NETVISTA A20 COMPUTERS W/			
MONITORS, ETAL	14,040.	14,040.	0.
BACKUP UNITS	4,395.	4,395.	0.
NETWORK SWITCH/FIBER OPTIC			
CABLE ST SC	1,633.	1,633.	0.
NETWORK SWITCH	1,878.	1,878.	0.
EXTERNAL TAPE DRIVE/SCSI CARD	1,528.	1,528.	0.
PROFESSIONAL /SERVER LICENSES	2,253.	2,253.	0.
PAYROLL TIME CLOCK	3,615.	3,615.	0.
ACER OPEN MIDTOWER, MONITOR,			
EPSON PRINTER	3,016.	3,016.	0.
MICROSOFT SOFTWARE	32,946.	30,750.	2,196.
DESIGN, MECHANICALS, PRINT			
SUPERVISION	37,313.	37,313.	0.
ASSORTED OFC FURNITURE	3,528.	3,528.	0.
ASSORTED OFC FURNITURE	16,485.	0.	16,485.
4 IBM SERVERS	28,268.	28,268.	0.
BORDER MANAGER UPGRADE	4,829.	4,829.	0.
SQL UPGRADE	5,911.	5,911.	0.
5 IBM DESKTOPS & 5 IBM			
THINKPADS	20,005.	20,005.	0.

VISIO SOFTWARE	438.	438.	0.
IBM RACKING & SERVER	10,303.	5,495.	4,808.
CISCO CATALYST SWITCH			
EQUIPMENT	33,360.	17,236.	16,124.
SPECTRA LINK	9,698.	7,543.	2,155.
RICOH PRINTER	5,395.	4,346.	1,049.
UNIVERSAL TRACKING SYSTEM	6,134.	2,045.	4,089.
SPECTRALINK	15,207.	5,069.	10,138.
SURVEILLANCE CAMERAS	29,100.	22,633.	6,467.
SMART TECHNOLOGIES 3000I	15,735.	4,496.	11,239.
COLOR PRINTER	1,403.	1,286.	117.
5 STAND ALONE PRINTERS	4,861.	4,186.	675.
MISC OFC FURNITURE	78,103.	40,353.	37,750.
IT SERVICES FOR CC	10,927.	5,646.	5,281.
NOURISH SCULPTURE	41,857.	7,209.	34,648.
DOUCULEX ARCHIEVE SYSTEM	45,068.	12,348.	32,720.
PROJECTOR, DVD/VCR, OTHER			
MISC. MULTI-MEDIA ITEMS	8,182.	2,591.	5,591.
POWERWARE 9170	8,816.	2,498.	6,318.
3000 LUMEN XGA PROJECTOR	3,720.	1,550.	2,170.
RE ENTERPRISE EDITION W/ 10			
USERS	29,767.	7,651.	22,116.
NAS BACKUP DEVICES	7,909.	3,515.	4,394.
1992 ISUZU	45,060.	45,060.	0.
VEHICLE 112 TRACTOR REPAINT	1,715.	1,715.	0.
REFRIG UNIT FOR ISUZU	1,469.	1,469.	0.
2001 FREIGHTLINER	52,870.	42,170.	10,700.
2000 INTERNATIONAL	68,651.	68,651.	0.
'95 INTERNATIONAL	38,732.	38,732.	0.
96 DODGE VAN	18,917.	18,917.	0.
85 GREAT DANE	3,543.	3,543.	0.
DECALS	2,950.	2,950.	0.
'93 VOLVO GMC	62,225.	62,225.	0.
2000 CHEVY VAN	23,550.	23,550.	0.
REFER UNIT	12,974.	12,974.	0.
AEROMAX FORD TRACTOR	35,000.	28,750.	6,250.
NISSAN	17,598.	17,598.	0.
1995 WABASH	14,695.	10,147.	4,548.
1999 STERLING CARGO TRUCK	40,000.	35,333.	4,667.
1988 INTERNATIONAL	24,772.	24,772.	0.
2 TRAILER	2,400.	1,342.	1,058.
1 TRAILER	1,200.	671.	529.
48' REFER TRAILER	7,700.	2,017.	5,683.
LIFT GATE FOR ASSET #325	6,270.	1,418.	4,852.
INSTALLATION OF LIFTGATE ASSET			
#327	1,521.	344.	1,177.
LIFTGATE FOR ASSET #	6,708.	1,837.	4,871.
LIFTGATE FOR ASSET #	6,134.	1,534.	4,600.
SCALES	1,330.	1,330.	0.
COIL FOR FREEZER	3,120.	3,120.	0.
FREEZER COMPRESSOR	9,868.	6,268.	3,600.
SEALANT FOR FREEZER	2,950.	2,950.	0.
SCRUBBER	5,886.	5,886.	0.

SCALES	2,557.	2,557.	0.
SCALES	3,223.	3,223.	0.
CROWN FORKLIFT	24,000.	24,000.	0.
COOLER	1,115.	1,115.	0.
COOLER	1,070.	1,070.	0.
FREEZER	3,616.	3,616.	0.
SORTING TABLES	1,038.	1,038.	0.
FORKLIFT	21,397.	21,397.	0.
FREEZER	53,425.	53,425.	0.
RACKING	8,733.	8,733.	0.
FREEZER #2	25,325.	25,325.	0.
RACKING	3,569.	3,569.	0.
CROWN FORKLIFT	21,145.	21,145.	0.
SHELVING & RACKS	9,189.	9,189.	0.
COOLER #2	2,098.	2,098.	0.
BATTERIES	2,677.	2,677.	0.
SCRUBBER	5,698.	5,698.	0.
CROWN FORKLIFT	21,145.	21,145.	0.
TOYOTA WALKIE RIDER PALLET TRUCK	9,386.	9,386.	0.
PALLET MULE	1,284.	1,269.	15.
FREEZER #2	2,250.	2,250.	0.
SCALES	1,887.	1,887.	0.
PALLET MULES	979.	979.	0.
FANS & CIRCULATOR	1,799.	1,799.	0.
FORKLIFTS	8,009.	6,388.	1,621.
COOLER #2 REFRIGERATOR	20,014.	20,014.	0.
FREEZER #2	22,900.	22,900.	0.
SINK & WATER LINE	3,970.	3,970.	0.
PLATFORM CARTS	1,002.	1,002.	0.
FREEZER #3	77,400.	77,400.	0.
FREEZER #3 RACKS	5,344.	5,344.	0.
WAREHOUSE RACKS	1,176.	1,176.	0.
WAREHOUSE RACKS	1,212.	1,212.	0.
CROWN FORKLIFT	20,122.	20,122.	0.
RACKS FOR SALVAGE ROOM	3,000.	3,000.	0.
RACKS	3,041.	3,041.	0.
AERO FLAT TOP TABLE 130 X 96	2,893.	2,893.	0.
3 CONVEYORS	10,670.	8,714.	1,956.
REFUSE CONTAINERS	6,560.	6,560.	0.
CATERPILLAR FORKLIFT	3,500.	0.	3,500.
YALE LIFT TRUCK	23,710.	17,783.	5,927.
REFUSE CONTAINERS	6,475.	6,475.	0.
MOBILE DUMPER	3,846.	2,986.	860.
LIFT TRUCK SCALE AND PRINTER	6,719.	3,499.	3,220.
TOYOTA FORKLIFT	30,736.	20,491.	10,245.
20 SHOPPING CARTS	3,000.	3,000.	0.
CROWN REACH TRUCK	3,000.	3,000.	0.
FORKLIFT	25,573.	11,934.	13,639.
THREE FORKLIFTS	27,417.	14,165.	13,252.
EQUIPMENT-RACKING	186,140.	32,058.	154,082.
STRETCH WRAP MACHINE	10,550.	3,893.	6,657.
RIDING POWER SCRUBBER	14,083.	5,197.	8,886.

KITCHEN EQUIPMENT	99,812.	36,836.	62,976.
3 TOYOTA FORKLIFTS	27,417.	10,118.	17,299.
MISC EQUIPEMENT	848.	438.	410.
ELECTRIC LOW LIFT WALKIE PALLET TRUCK	3,744.	981.	2,763.
CONVERSION OF FREEZER #3 (ASSET #232) TO COOLER	21,500.	2,269.	19,231.
METTLER TOLEDO SCALE	3,461.	1,154.	2,307.
9 PUBLIX WORKSTATIONS	4,799.	1,200.	3,599.
970 JEFFERSON	1,020,000.	87,333.	932,667.
SPECTRA LINK	2,220.	295.	1,925.
SUB PANEL WITH THREE CIRCUITS	2,050.	165.	1,885.
CIRCUIT BREAKER PANELS & MDP	26,200.	3,784.	22,416.
ADDITIONAL ELECTRICAL WIRING	4,805.	374.	4,431.
PAINTING	9,090.	7,070.	2,020.
LIGHTING	4,076.	306.	3,770.
CONSTRUCTION OF 732 JEL SMOKERS' SHELTER	7,035,990.	606,077.	6,429,913.
ELECTRICAL PANEL FOR REFER TRUCKS	3,532.	157.	3,375.
6,164.	394.	5,770.	
2 NEW SECURITY ACCESS DOOR UNITS	9,682.	1,130.	8,552.
.96 ACRES JOS E LOWRY	450,000.	0.	450,000.
704 JOSEPH E. LOWERY	60,000.	0.	60,000.
732 ASHBY	595,000.	0.	595,000.
970 JEFFERSON	180,000.	0.	180,000.
RICOH AFICIO 3045 SPF	16,213.	5,404.	10,809.
OFFICE CUBICLE FILE CABINETS & OVERHEAD BINS	3,853.	1,070.	2,783.
SECURITY SYSTEM UPGRADE	12,747.	2,833.	9,914.
2 IBM THINKPADS	3,458.	346.	3,112.
17 IBM THINKCENTRES W/ MONITORS	19,516.	2,277.	17,239.
INTER-TEL V9.1 & 4 IP PHONES	5,546.	462.	5,084.
IBM BLADE SERVERS & EXCHANGE TECHNOLOGY UPGRADES	67,005.	6,381.	60,624.
24,363.	1,450.	22,913.	
5 LENOVO PCS & MONITORS	5,756.	480.	5,276.
KIN E-SYNERGY SOFTWARE CUSTOMIZATION	50,087.	5,844.	44,243.
CCTV & SECURITY SYSTEM UPGRADE	8,404.	233.	8,171.
RICOH AFICIO MP6500SP & MP C3000EFI	46,000.	1,278.	44,722.
2007 FREIGHTLINER	71,540.	5,962.	65,578.
2007 FREIGHTLINER	71,540.	5,962.	65,578.
2007 FREIGHTLINER	71,540.	5,962.	65,578.
2007 FREIGHTLINER	71,540.	5,962.	65,578.
SHOPPERS COOLER & FREEZER	234,030.	17,552.	216,478.
TURNTABLE CONVEYOR	15,438.	1,286.	14,152.
(5) SELF-DUMPING HOPPERS	4,510.	626.	3,884.
NEW RACKING @ 970 JEFF	11,279.	313.	10,966.
TRACTOR	9,358.	624.	8,734.
PALLET JACK	3,250.	90.	3,160.
FORKLIFT	25,900.	432.	25,468.
EMERGENCY POWER SYSTEM	228,306.	7,610.	220,696.

GENERATOR FENCING	8,018.	267.	7,751.
BUILDING IMPROVEMENTS @ 970			
JEFF	140,019.	1,945.	138,074.
PRC SMOKING SHELTER	3,999.	44.	3,955.
FENCE	4,957.	275.	4,682.
ELEVATOR UPGRADE	42,367.	939.	41,428.
SPRINKLER SYSTEM	29,086.	162.	28,924.
ADJUSTMENT MADE FOR DISPOSAL OF PRIOR YEAR ASSET'S SALVAGE VALUE F	-863.	0.	-863.
<b>TOTAL TO FORM 990, PART IV, LN 57</b>	<b>12,963,924.</b>	<b>2,491,577.</b>	<b>10,472,347.</b>

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 15

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
INVESTMENTS	FMV			1,812,966.	1,812,966.
TO FORM 990, LINE 54A, COL B					1,812,966.

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 16

DESCRIPTION	AMOUNT
DIRECT BENEFIT EXPENSES INCLUDED IN FUNCTIONAL EXPENSES ON AUDIT REPORT	67,452.
<b>TOTAL TO FORM 990, PART IV-A</b>	<b>67,452.</b>

FORM 990 OTHER EXPENSES NOT INCLUDED ON FORM 990 STATEMENT 17

DESCRIPTION	AMOUNT
DIRECT BENEFIT EXPENSES INCLUDED IN FUNCTIONAL EXPENSES ON AUDIT REPORT	67,452.
<b>TOTAL TO FORM 990, PART IV-B</b>	<b>67,452.</b>

FORM 990      PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS,      STATEMENT 18  
 TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
WILLIAM BOLLING 220 KING'S HIGHWAY DECATUR, GA 30030	EX. DIRECTOR 40.00	137,218.	14,348.	1,941.
ROBERT JOHNSON 1105 CLAIRMONT AVE., UNIT P, DECATUR, GA 30030	CHIEF OPERATING OFFICER 40.00	104,574.	11,172.	0.
NANCY FLIPPIN 621 ROBINSON AVENUE, SE ATLANTA, GA 30312	CFO 40.00	84,358.	7,774.	0.
BOB FREEMAN LEADER OF NON PROFIT ORGANIZATIONS 5485 POWERS OVERLOOK CT. ATLANTA, GA 30318	DIRECTOR 0.15	0.	0.	0.
RUTH ISAAC KUTAK ROCK, 225 PEACHTREE ST, SUITE 2100 ATLANTA, GA 30303	DIRECTOR 0.17	0.	0.	0.
RICHARD LEBER FORGE CAPITAL LLC, 1037 SWATHMORE DRIVE ATLANTA, GA 30327	VICE CHAIR 0.32	0.	0.	0.
ELISABETH MARCHANT 3050 MARGARET MITCHELL DR., NW #47 ATLANTA, GA 30327	DIRECTOR 0.25	0.	0.	0.
ROSE PERRY 736 PRINCETON MILL RUN MARIETTA, GA 30068	SECRETARY 0.30	0.	0.	0.
MARJY STAGMEIER TRANSINVEST GROUP 550 PHARR RD, STE 550 ATLANTA, GA 30305	CHAIRMAN OF THE BOARD 0.52	0.	0.	0.
PHILIP NEIL TAGUE AMLI RESIDENTIAL PROPERTIES, 1945 VAUGHN RD. KENNESAW, GA 30144	DIRECTOR 0.25	0.	0.	0.

JOEL WELKER ATLANTA BUSINESS CHRONICLE 3423 PIEDMONT RD.SUITE 400 ATLANTA, GA 30305	DIRECTOR 0.11	0.	0.	0.
GARY WHEELER PARTNER CONSULTANT, LLC 1000 ABERNATHY RD NORTHPARK 400, STE 100 ATLANTA, GA 30328	VICE CHAIR 0.37	0.	0.	0.
KATHLEEN BENNETT 308 ROCKY TOP DRIVE GREENVILLE, SC 29615	DIRECTOR 0.04	0.	0.	0.
TONY CONWAY A LEGENDARY EVENT, 1119 LOGAN CIRCLE, NW ATLANTA, GA 30318	DIRECTOR 0.13	0.	0.	0.
DON HEROMAN 3490 STRATFIELD DRIVE ATLANTA, GA 30319	TREASURER 0.42	0.	0.	0.
CHIP PRESTEN 600 PEACHTREE ST., NE, STE 5200 ATLANTA, GA 30308	DIRECTOR 0.18	0.	0.	0.
BUTCH SMITH 1850 PKWY PLACE, STE 500 MARIETTA, GA 30067	DIRECTOR 0.21	0.	0.	0.
PRECIOUS ANDERSON THE GRANT BLDG, STE 800 44 BROAD ST, NW ATLANTA, GA 30303	DIRECTOR 0.34	0.	0.	0.
GARY BURLEY 1358 MILLSTREAM TRAIL LAWRENCEVILLE, GA 30044	DIRECTOR 0.31	0.	0.	0.
MIKE KANE NEW ENGLAND FINANCIAL 2400 LAKEVIEW PKWY, STE 450 ALPHARETTA, GA 30004	DIRECTOR 0.29	0.	0.	0.
JOSEPH SISTO 1000 WINDWARD PKWY, SUITE 310 ALPHARETTA, GA 30005	DIRECTOR 0.80	0.	0.	0.

ATLANTA COMMUNITY FOOD BANK

58-1376648

HILARY WILSON  
3781 RIVER MANSION DRIVE  
DULUTH, GA 30096

DIRECTOR  
0.45

0.            0.            0.

TOTALS INCLUDED ON FORM 990, PART V-A

326,150.	33,294.	1,941.
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