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Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Open to Public

A I	For the	201	101 calendar year, or tax year period beginning JUL 1, 2001 and ending JUN	30,	200	2
_	Check if		C. Name of organization			identification number
	applicab		Please use IRS		,	
	Addre	953 178	pont or ROADRUNNER FOOD BANK, INC.	8	5-0	278525
	Name	•	type Number and street (or P.O. box if mail is not delivered to street address) Room/suit			
	Initial return	Ĭ.	Specific 2645 BAYLOR SE)247-2052
F	Final	1	Instruc-		cunting me	
늗	Amer	nded			Other (specify)	
F	Ireturr Appli	icatio				
ـــ	I pendi	ing	must attach a completed Schedule A (Form 990 or 990-EZ) H(a) Is this a group			
G I	Wah si	ta 🛊	►WWW.RRFB.ORG H(b) If "yes," enter			
<u> </u>	100 5	10 -	H(c) Are all atfiliate			N/A Yes No
1 (Organi	izatır	ion type (check only one) ► X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527 (if "No," attach		u.	A17 [] 100 []
			e In the organization's gross receipts are normally not more than \$25,000. The H(d) is this a separ	rate returi	n filed t	hv an or-
			on need not file a return with the IRS, but if the organization received a Form 990 Packageganization co			
			, it should file a return without financial data. Some states require a complete return I		<u> </u>	2101119 11111 11111
					roaniza	ation is not required to attach
L_(Gross r	rece	eipts Add lines 6b, 8b, 9b, and 10b to line 12 > 21, 379, 207. Sch B (Form			
	art I		Revenue, Expenses, and Changes in Net Assets or Fund Balances			
	1	•	Contributions, grits, grants, and similar amounts received		,	
			Direct public support 1a 20,482,			
				200.		
	1	e (Government contributions (grants)]
			Total (add lines 1a through 1c)			
45	1		(cash \$ 608, 265. noncash \$ 19,894,925.)	ļ	10	20,503,190.
NUV 1218	2	F	Program service revenue including government fees and contracts (from Part VII, line 93)		2	804,527.
7	3		Membership dues and assessments	}	3	
<u>≥</u>	4		interest on savings and temporary cash investments	1	4	3,241.
₹	5	C	Dividends and interest from securities	ļ	5	
	6 8	a e	Gross rents 6a			
\Box	1	b L	Less rental expenses 6b			
뿡		c N	Net rental income or (loss) (subtract line 6b from line 6a)		6c	<u></u>
REPLANTED	7	C	Other investment income (describe		7	
ц	8 8	a G	Gross amount from sale of assets other (A) Securities (B) Other		ţ	
ш	1	ti		610.		
	'	b L		740.	į	İ
	,			870.		
	1		Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT	. T	8d	7,870.
	9		Special events and activities (attach schedule)	•		
	1 1		Gross revenue (not including \$ of contributions	503		
	1		· · · · · · · · · · · · · · · · · · ·	503.		
	ì			212.	•	6 201
	Ι.		, , , , , , , , , , , , , , , , , , , ,	- 2	9c	6,291.
	10 8		Gross sales of inventory, less returns and allowances			
	1		Less cost of goods sold 10h Cross profit or (less) from 10h Additional Line 10h Less L			
	1,1	c G	Gross profit or (loss) from sales of inventory (http://echaptule) (subtract line 10b from line 10a) Other revenue (from Part VI), line 108		100	11,136.
	12	T	Total revenue (add lines 14.2.8.4.5.6c.7.8d.0c.10c.and 19)		11	21,336,255.
	13		Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 19)		13	20,837,769.
503	14		Program services (from line 45, column (6)) 0 5 2002		14	92,314.
Expenses	15				15	46,594.
Ēxp	16	F	Fundraising (from line 44, column (U) GDEN, UT Payments to affiliates (attach schedule) GDEN, UT	}	16	
_	17		Total expenses (add lines 16 and 44, column (A))	Ī	17	20,976,677.
	18		Excess or (deficit) for the year (subtract line 17 from line 12)		18	359,578.
Net Assets	19		Net assets or fund balances at beginning of year (from line 73, column (A))	ļ	19	2,239,539.
ŽŠ	20		Other changes in net assets or fund balances (attach explanation)	ļ	20	0.
	21	N	Net assets or fund balances at end of year (combine lines 18-19, and 20)		21	2,599,117.
1230	۵1		HA For Panerwork Peduation Art Notice, and the congress instructions			1.4 Form 000 (2004)

RC	ADRI	INNER	FOOD	BANK.	INC

Part II Statement of All organizational Expenses (4) or	janiza ganiza	tions must complete column itions and section 4947(a)(1	1 (A) Columns (B), (C), and I) nonexempt chantable trus	(n) are required for section ts but optional for others	15U1(c)(3) and
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)				in Com	
cash \$noncash \$	22				
23 Specific assistance to individuals (attach schedule)	23			, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc	25	59,231.		4,821.	4,253.
26 Other salaries and wages	26	461,584.	390,871.	37,573.	33,140.
27 Pension plan contributions	27				
28 Other employee benefits	28	49,226.	41,842.	7,384.	
29 Payroll taxes	29	37,976.	37,976.		
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33				· · · · · · · · · · · · · · · · · · ·
34 Telephone	34	17,677.	16,867.	810.	
35 Postage and shipping	35	167,230.			
36 Occupancy	36	42,688.	40,480.	2,208.	
37 Equipment rental and maintenance	37	48,590.	47,706.	884.	
38 Printing and publications	38				
39 Travel	39	3,701 <u>.</u>	3,701.		
40 Conferences, conventions, and meetings	40	1,757.	1,757.		
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	80,777.	52,505.	28,272.	
43 Other expenses not covered above (itemize)					
8	43a				
b	43b				
C	43c	· <u> </u>			<u> </u>
d	43d				
e SEE STATEMENT 3	43e	20,006,240.	19,986,677.	10,362.	9,201.
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44		20,837,769.	92,314.	46,594.
Joint Costs Check ► if you are following SOP 9					<u>, ,</u>
Are any joint costs from a combined educational campa		id fundraising solicitation re	ported in (B) Program service	es? ▶[Yes X No
If "Yes," enter (I) the aggregate amount of these joint co	-				
(iii) the amount allocated to Management and general \$, and	(Iv) the amount allocated to	Fundraisino \$,
Part III Statement of Program Servi		Accomplishments			
What is the organization's primary exempt purpose?			·		0
PROVIDING FOOD FOR THE NI				stanta	Program Service Expenses
All organizations must describe their exempt purpose achievement achievements that are not measurable. (Section 501(c)(3) and (4) or					(Required for 501(c)(3) and (4) orgs and 4947(a)(1)
allocations to others)					trusts but optional for others)
a DONATED FOOD IS RECEIVE					
			ISCOUNT PRICE	L TO VARIOUS	
AGENCIES WHO DIRECTLY I	ŁE				20 027 760
		()	Grants and allocations \$		20,837,769.
b					
			<u> </u>		
 .					
			Grants and allocations \$)	
c					
			<u> </u>		
					
		(!	Grants and allocations \$		
d		<u> </u>			
				· 	
					
			Grants and allocations \$	<u> </u>	
e Other program services (attach schedule)			Grants and allocations \$		20 027 760
f Total of Program Service Expenses (should equal	line 4			<u> </u>	20,837,769.
123011			2		Form 990 (2001)

Page 3

Part IV Balance Sheets

	Where required, attached schedules and amounts should be for end-of-year amounts only	within the c	lescription column	(A) Beginning of year		(B) End of year
1	45 Cash - non-interest-bearing			5,495.	45	3,566
	46 Savings and temporary cash investments			81,683.	46	3,566. 251,810.
4	47 a Accounts receivable	47a	36,009.			
	b Less allowance for doubtful accounts	47b		37,967.	47c	36,009
4	48 a Pledges receivable	48a		•		
	b Less allowance for doubtful accounts	48b			48c 49	
- 1	49 Grants receivable 50 Receivables from officers, directors, trustees,		-		49	
ľ	and key employees				50	
5	51 a Other notes and loans receivable	51a	-			
5	b Less allowance for doubtful accounts	51b			516	
·	52 Inventories for sale or use			901,453.	52	1,163,259
5	53 Prepaid expenses and deferred charges				53	
5	54 Investments - securities STMT 4	•	Cost X FMV	27,225.	54	28,826
5	55 a Investments - land, buildings, and			<u></u>		
	equipment basis	55a				
1						
	b Less accumulated depreciation	55b			55c	
5	56 Investments - other	1 .			56	
5	57 a Land, buildings, and equipment basis	57a	1,545,024.			
- 1	b Less accumulated depreciation STMT 5		368,872.	1,255,727.		1,176,152 0
5	Other assets (describe ► MISCELLANE	COUS AS	SSETS	680.	58	
				2 210 220		2 (50 (22
	59 Total assets (add lines 45 through 58) (must equ	al line 74)		2,310,230. 70,691.		2,659,622 60,505
	Accounts payable and accrued expenses		<u> </u>	70,691.	60	00,505
	61 Grants payable		<u> </u>		61	_ _
	62 Deterred revenue		-		62	
٥	Loans from officers, directors, trustees, and key e	employees	-		63	
i P	64 a Tax-exempt bond liabilities		-		64a 64b	
	b Mortgages and other notes payable Other liabilities (describe		\ -		65	_
	Other hadintes (describe		' <u> </u>		00	
6	66 Total liabilities (add lines 60 through 65)		i	70,691.	66	60,505
_		X and con	nplete lines 67 through			
1	69 and lines 73 and 74					
6 6 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	67 Unrestricted			2,232,039.	67	2,546,395
6	68 Temporarily restricted		Γ	7,500.	68	52,722
6 6	69 Permanently restricted				69	
} a	Organizations that do not follow SFAS 117, check here	. ▶ 🔲 a	nd complete lines			
	70 through 74					
7	70 Capital stock, trust principal, or current funds				70	
7	71 Paid-in or capital surplus, or land, building, and e	quipment fun	d <u>L</u>		71	
7	72 Retained earnings, endowment, accumulated inco	ome, or other	funds		72	
7	73 Total net assets or fund balances (add lines 67 t	hrough 69 Ol	R lines 70 through 72,		}	
	column (A) must equal line 19 column (B) must	equal line 21)	L	2,239,539. 2,310,230.	73	2,599,117 2,659,622
7	74 Total liabilities and net assets / fund balances (add lines 66 a	and 73)	2,310,230.	74	<u>2,659,622</u>

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

Form 9	990 (2001) ROADRUNNI	ER FOOD BANK,	INC.			<u>35-02785</u> :	
Par	Reconciliation of Revenue Financial Statements wit Return	e per Audited h Revenue per	F	leconcil inancial letum	iation of Expe Statements	enses per Au With Expens	ıdited ses per
(1) A (2) C (3) F (4) C ST AC (1) I	Total revenue, gains, and other support per audited financial statements Amounts included on line a but not on ine 12, Form 990 Net unrealized gains on investments Sonated services and use of facilities Recoveries of pnor year grants Softher (specify) MT 6 \$ 34,212. Amounts included on line 12, Form 990 but not on line a investment expenses not included on line 6b, Form 990 Other (specify)	а 21,415,467. в 79,212. в 21,336,255.	a Total expens audited finar b Arnounts inc line 17, Form (1) Donated ser and use of fic (2) Prior year ac reported on Form 990 (3) Losses reported to line 20, Form (4) Other (species STMT 7 Add amount c Line a minute.	ses and loss notal statem cluded on in 1990 vices actities \$ djustments line 20, state on in 1990 \$ state on line state on line becluded on line a expenses 1 on m 1990 \$ \$ 10	nents ne a but not on	12.	79,212. 976,677.
	<u> </u>				\$,
	dd amounts on lines (1) and (2)	d 0.	1 /100 0/1100			▶ d	
	Total revenue per line 12, Form 990 (line c plus line d)	B _{21,336,255} .	e Total expeni		17, Form 990	▶ a 20,	976,677.
Par			Employees (Lis	st each one	even if not compen	sated)	
	(A) Name and address		(B) Title and avera per week devot position		(C) Compensation (If not paid, enter -0-)	(I) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
	ODY WATTENBARGER		EXECUTIVE	DIRE	ECTOR		
	BUQUERQUE, NM 87106		40 HRS/WF	,	59,231.	0.	0.
	E ATTACHED LIST-STATEM	ENT 10	10 may w	<u> </u>	00,12020		
						0	_
			VARIES		0.	0.	0.
			}	ł			}
							
			<u> </u>				
				ļ			
				ŀ	'		
							
		 					
]			
	- -						
75 "	Did any officer, director, trustee or key employee	rocania agementa composito	tion of mom than £1	00 000 from	TI VOILS ASSESSMENTS TO SE	and all related	<u> </u>
0	organizations, of which more than \$10 000 was p	rovided by the related organi	zations? If "Yes," atta	ach schedu	le Yes	X No	Form 990 (2001)

	990 (2001) ROADRUNNER FOOD BANK, INC. 85-0278			Page 5
Par	t VI Other Information		Yes	+
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes			
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		<u> </u>
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	78 <u>b</u>		 _
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79		<u>X</u>
	if "Yes," attach a statement			
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership,			ĺ
	governing bodies, trustees officers, etc., to any other exempt or nonexempt organization?	80a	X	├ ─-
þ	If Yes, enter the name of the organization NEW MEXICO ASSOCIATION OF FOOD BANKS			
	and check whether it is X exempt OR nonexempt			
81 a	Enter direct or indirect political expenditures See line 81 instructions 81a 0.			J
b	Did the organization file Form 1120-POL for this year?	81b_	· · ·-	<u> </u>
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than	99-	Х	
	fair rental value?	82a		├
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.) 45,000.			
02 -	expense in Part II (See instructions in Part III) Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Х	Í
83 a	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? N/A	84a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not	~ ***		†
•	tax deductible?	84b		Ì
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a		
ь	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		\Box
	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			
8	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) 851 N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A	85g		<u> </u>
h	• • • • • • • • • • • • • • • • • • • •			
	allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12			
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	1		
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	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,	İ		
	or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-32	88		X
90 -	If "Yes," complete Part IX 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under	- 00		1
UJ d	section 4911 O • , section 4912 O • , section 4955 O • .			
h	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?	ŀ		
	If "Yes " attach a statement explaining each transaction	89b		Х
C	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958		_	0.
d				0.
90 a	List the states with which a copy of this return is filed NEW MEXICO			
b	Number of employees employed in the pay period that includes March 12, 2001			18
91	The books are in care of ► ROADRUNNER FOOD BANK Telephone no ► (505)	<u> 247</u>	<u>-20</u>	152
			<u>,</u>	
	Located at ► 2645 BAYLOR SE, ALBUQUERQUE, NM ZIP+4 ► 8	710	6~3	323 <u>2</u>
			. .	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here	27 /	ן ▶∣	
12304	and enter the amount of tax-exempt interest received or accrued during the tax year	_ N/	A	

Page 6

ROADRUNNER FOOD BANK, INC.

Part VI	Analysis of Income-						
Note Ente	er gross amounts unless othen	wise 📙		ed business income		by section 512 513, or 514	(E)
indicated			(A) Business	(B)	(C) Exclu-	(D)	Related or exempt
93 Progra	am service revenue		CODE	Amount	sion code	Amount	function income
	ARED MAINTENANC	E 🗀	-				579,256.
	ENCY FEES						
		MMC		- -			8,690. 216,581.
t NM	AFB REIMBURSEME	NTS _			- -		210,301.
d							
e					_		
f Medic	are/Medicaid payments	L.					
n Fees a	and contracts from government age	encies					
-	pership dues and assessments						
-	•						
	st on savings and temporary				14	3,241.	
	nvestments	<u> </u>			1 2	3,241.	
96 Divide	ends and interest from securities	ļ					
97 Net re	ntal income or (loss) from real est	ate					<u> </u>
a debt-f	financed property	L					
b not de	ebt-financed property						
	ental income or (loss) from persona	al property				·	
	investment income						
		 			+-+		<u> </u>
	or (loss) from sales of assets				18	7 070	
other	than inventory	⊢			10	7,870.	
101 Net in	come or (loss) from special events	s <u> </u> _					6,291.
102 Gross	profit or (loss) from sales of inver	ntory					
103 Other	revenue						
a MI	SCELLANEOUS INC	OME					11,136.
	 	i			+++	-	
		1			+		
d					_		
e	·						
104 Subto	otal (add columns (B) (D), and (E)))	. 4	1 0) .	11,111.	821,954.
			·	<u> </u>			
105 Total	(add line 104, columns (B), (D), ar		<u> </u>	<u> </u>			833,065.
Note Line	105 plus line 1d, Part I, should	nd (E)) d equal the amoun	nt on line 1	2, Part I		▶.	833,065.
Note Line	105 plus line 1d, Part I, should	nd (E)) d equal the amoun	nt on line 1	2, Part I		▶.	833,065.
Note Line Part VI	105 plus line 1d, Part I, should Relationship of Acti	nd (E)) d equal the amoun vitues to the A	nt on line 1	2, Part I lishment of Exen	npt Purpe	oses (See Specific Instru	833,065.
Part VI	105 plus line 1d, Part I, should Relationship of Acti Explain how each activity for wh	nd (E)) d equal the amount vitles to the A lich income is report	nt on line 1 Accomp	2, Part I lishment of Exen n (E) of Part VII contribut	npt Purpe	oses (See Specific Instru	833,065.
Note Line Part VI	# 105 plus line 1d, Part I, should	nd (E)) d equal the amount vittes to the A uch income is report providing funds for	nt on line 1 Accomp	2, Part I lishment of Exen n (E) of Part VII contribut	npt Purpe	oses (See Specific Instru	833,065.
Part VI	105 plus line 1d, Part I, should Relationship of Acti Explain how each activity for wh	nd (E)) d equal the amount vittes to the A uch income is report providing funds for	nt on line 1 Accomp	2, Part I lishment of Exen n (E) of Part VII contribut	npt Purpe	oses (See Specific Instru	833,065.
Part VI	# 105 plus line 1d, Part I, should ## Relationship of Acti Explain how each activity for wheexempt purposes (other than by	nd (E)) d equal the amount vittes to the A uch income is report providing funds for	nt on line 1 Accomp	2, Part I lishment of Exen n (E) of Part VII contribut	npt Purpe	oses (See Specific Instru	833,065.
Part VI	# 105 plus line 1d, Part I, should ## Relationship of Acti Explain how each activity for wheexempt purposes (other than by	nd (E)) d equal the amount vittes to the A uch income is report providing funds for	nt on line 1 Accomp	2, Part I lishment of Exen n (E) of Part VII contribut	npt Purpe	oses (See Specific Instru	833,065.
Part VI	Relationship of Acti Explain how each activity for whe exempt purposes (other than by SEE STATEMENT	nd (E)) d equal the amount vittes to the A lich income is report y providing funds for	nt on line 1 Accomp ed in colum such purpo	2, Part I lishment of Exen In (E) of Part VII contribut oses)	npt Purpe ted importani	oses (See Specific Instructly to the accomplishment o	etions on page 32) If the organization's
Part VI	Relationship of Acti Explain how each activity for whe exempt purposes (other than by SEE STATEMENT	nd (E)) d equal the amount vittes to the A lich income is report y providing funds for	nt on line 1 Accomp ed in colum such purpo	2, Part I lishment of Exen In (E) of Part VII contribut oses)	npt Purpe ted importani	oses (See Specific Instructly to the accomplishment of	etions on page 32) If the organization's
Part IX	Relationship of Acti Explain how each activity for wh exempt purposes (other than by SEE STATEMENT Information Regard (A)	nd (E)) d equal the amount vittes to the A lich income is report y providing funds for 8 Ing Taxable S	nt on line 1 Accomp ed in colum such purpo	2, Part I lishment of Exen In (E) of Part VII contribut Dises) ries and Disregal (C)	npt Purpe ted importani	oses (See Specific Instructive to the accomplishment of the second secon	tions on page 33) tions on page 33)
Part X Part X Name, a	Relationship of Acti Explain how each activity for whe exempt purposes (other than by SEE STATEMENT Information Regard (A) ddress, and EIN of corporation,	Ing Taxable S (B) Percentage of	nt on line 1 Accomp ed in colum such purpo	2, Part I lishment of Exen In (E) of Part VII contribut Dises)	npt Purpe ted importani	oses (See Specific Instructly to the accomplishment of	tions on page 33) (E) End-of-year
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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 Section 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

2001

OMB No 1545-0047

Employer Identification number Name of the organization 85 0278525 ROADRUNNER FOOD BANK, INC. Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None") (d) Contributions to employee benefit plans & deferred compensation (e) Expense account and other (b) Title and average hours (a) Name and address of each employee paid (c) Compensation per week devoted to more than \$50,000 position allowances NONE Total number of other employees paid 0 over \$50,000 Part # 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") (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service NONE Total number of others receiving over \$50,000 for professional services

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

Schedule A (Form 990 or 990-EZ) 2001

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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 NONE Schedule A (Form 990 or 990-EZ) 2001

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return. Do not include these grants in line 15

Private School Questionnaire (See page 7 of the instructions)

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

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	instrument, or in a resolution of its governing body?	29		
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?	30		
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?	31		
	If "Yes," please describe if "No," please explain (If you need more space, attach a separate statement.)			
		_		
		_		
20	Does the conservation maintain the following	-		
32	Does the organization maintain the following Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	1	<u> </u>
a	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32a 32b	 	
D D	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student	320	 	
	admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	<u> </u>	 -
u	If you answered "No" to any of the above, please explain (if you need more space, attach a separate statement)	324	 	
		—		
33	Does the organization discriminate by race in any way with respect to	_		
a	Students' rights or privileges?	33a	<u> </u>	
p	Admissions policies?	33b	<u> </u>	<u> </u>
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d	ļ	<u> </u>
е	Educational policies?	33e	↓	<u> </u>
1	Use of facilities?	331	<u> </u>	<u> </u>
9	Athletic programs?	33g	 	<u> </u>
þ		33h	ļ	ļ
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
		— [
		— I		
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		

Schedule A (Form 990 or 990-EZ) 2001

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Mailings to members, legislators, or the public

e Publications, or published or broadcast statements

f Grants to other organizations for lobbying purposes

Direct contact with legislators, their staffs, government officials, or a legislative body

h Railies, demonstrations, seminars, conventions, speeches lectures, or any other means

t Total lobbying expenditures (Add lines c through h)

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

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	- "	
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Schedule A (Form 990 or 990-EZ) 2001

	Exempt Organia	Zations (See page 12 of the instru	uctions)	 _			
1	Did the reporting organization d	directly or indirectly engage in any of t	the following with any other	organization described in section			
	501(c) of the Code (other than	section 501(c)(3) organizations) or in	section 527, relating to po	litical organizations?	ı		
а		ganization to a noncharitable exempt	organization of		(-	Yes	No
	(ı) Cash				51a(i)		X
	(ii) Other assets				<u>a(II)</u>		X
b	Other transactions						
	,,	ets with a noncharitable exempt organ	nization		b(1)		X
	• •	a noncharitable exempt organization			b(11)		_X
	(III) Rental of facilities, equipme				b(iii)		X
	(iv) Reimbursement arrangeme	ents			p(ja)		X
	(v) Loans or loan guarantees				b(v)		X
	(vi) Performance of services of	r membership or fundraising solicitati	ions		b(v1)		<u>X</u>
C	Sharing of facilities, equipment,	, mailing lists, other assets or paid en	nployees		E		<u> </u>
đ	-			lways show the fair market value of the			
	•	s given by the reporting organization				. _	
	transaction or sharing arranger	nent, show in column (d) the value of	the goods, other assets, or	services received		N/A	
(a) Line r	1) (6)		empt organization	(d) Description of transfers, transactions, and	d sharing ar	rangen	nents
		<u></u>					
		<u></u>					
		<u></u>					
		<u> </u>					
					_		
	Is the organization directly or in Code (other than section 501(c If "Yes," complete the following	c)(3)) or in section 527?	ne or more tax-exempt org	anizations described in section 501(c) of th	θ Yes	X	No
	(a Name of or	1)	(b) Type of organization	(c) Description of relation	ıship		
							
							
							
	·						
							
						_	
			 	*-			
							

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Schedule A (Form 990 or 990-EZ) 2001

FORM 990 GAI	N (L	oss)	FROM	SALE	OF	ОТНІ	ER A	ASSETS		STA	TEME	NT	1
DESCRIPTION						ATE UIRI	ED	DATE SOLD		METH ACQUI			
PURCHASE & SALE OF LEATRUCK	SED				08/	23/0	01	08/23/	01	PURCH	ASED	•	
NAME OF BUYER		GROS:		COS!				PENSE SALE	DEP	REC		GAI (LOS	
		12,	110.		8,74	0.		0.	_	0.		3,37	70.
DESCRIPTION						ATE UIRI	ED	DATE SOLD		METH ACQUI			
1991 GMC TRUCK					07/	15/9	91	09/04/	01	PURCH	ASED	•	
NAME OF BUYER		GROS:		COS' OTHER				PENSE SALE	DEP	REC		GA]	
		4,	500.	21	8,89	6.		0.	28	,896.		4,50	00.
TO FM 990, PART I, LN	88	16,	610.	3′	7,63	6.		0.	28	,896.		7,87	70.
FORM 990	s	PECI	AL EV	ENTS I	AND	ACT:	IVI'	TIES	· <u>-</u>	STA	теме	NT -	2
DESCRIPTION OF EVENT			OSS EIPTS	CON'S	TRIB CLUD			GROSS EVENUE		RECT ENSES		ET COME	Ξ
HUNGER WALK AND VARIOUSPECIAL EVENTS	IS	4	0,503					40,503.	34	,212.		6,29	-
TO FM 990, PART I, LIN	E 9	4	0,503	. —			_	40,503.	34	,212.		6,29	<u> </u>

FORM 990	O'.	THER EXPENSES	<u></u>	STATEMENT	3
	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)	
DESCRIPTION	TOTAL	SERVICES	AND GENERAL	FUNDRAISIN	G
FOOD	19,883,17				
INSURANCE	18,49	5. 18,430	. 65.		
PROFESSIONAL SERVICES	18,97	3. 9,772	_	9,20	1
OFFICE	46,64			3,20	_
VEHICLES	25,18				
MISCELLANEOUS	12,45				
ADVERTISING	1,32	2. 1,322	•		
TOTAL TO FM 990, LN 43	20,006,24	0. 19,986,677	10,362.	9,20	1
FORM 990	NON-GOVER		S HER LICLY	STATEMENT	
SECURITY DESCRIPTION	ORPORATE STOCKS	CORPORATE TR	ADED OTHER RITIES SECURITI	NON-GOV'	
STOCK	28,826.			28,82	6
TO 990, LN 54 COL B	28,826.			28,82	6
FORM 990 DEPRECIAT	ION OF ASSE	TS NOT HELD FOR	INVESTMENT	STATEMENT	<u> </u>
DESCRIPTION		COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	
		 			_
BUILDING AND IMPROVEMEN	TS	958,688.	196,939.	761,74	
LAND		232,000.	101 202	232,00	
OFFICE EQUIPMENT		168,046.	101,293.		
VEHICLES WAREHOUSE EQUIPMENT		138,388. 44,612 47,902. 26,028		•	

ROADRUNNER FOOD BANK, INC.						85-02785 	25
FORM 9	90	OTHER REVEN	UE NOT INCLUD	ED ON FORM 9	90 S	TATEMENT	6
DESCRI	PTION					AMOUNT	
SPECIAL EVENT EXPENSES						34,212.	
TOTAL '	ro FORM 990,	PART IV-A			=	34,21	12.
FORM 9	90	OTHER EXPEN	SES NOT INCLU	DED ON FORM	990 S	TATEMENT	
DESCRI	PTION					TMUOMA	
SPECIAL EVENT EXPENSES						34,212.	
TOTAL TO FORM 990, PART IV-B					34,2	12.	
LINE	EXPLANATION		MENT OF EXEMP SHIP OF ACTIV				
93A 93B	THE AGENCY SELLS DONATED AND PURCHASED FOOD AT DISCOUNTED PRICES TO AGENCIES WHO PROVIDE THE FOOD TO THE NEEDY. THE AGENCY CHARGES A HANDLING FEE ON THE DISTRIBUTION OF FOOD TO THE						
93C	NEEDY. REIMBURSEMEI BANKS.	NTS AND PAYM	ENTS FROM AFF	ILIATE - NM	ASSOCIATION	OF FOOD	
101	SPECIAL EVENTS HELD BY THE ORGANIZATION TO ENCOURAGE COMMUNITY INVOLVEMENT.						
103A	MISCELLANEO	US INCOME EA	RNED TO MEET	THE EXEMPT F	URPOSE OF 1	HE AGENCY	•
SCHEDULE A		OTHER INCOME		5	TATEMENT	9	
DESCRI	PTION		2000 AMOUNT	1999 AMOUNT	1998 AMOUNT	1997 AM OUNT	
MISCELLANEOUS INCOME		10,882.	32,234.	10,379.	9,1	86.	
						- 	

10,882.

10,379.

9,186.

32,234.

TOTAL TO SCHEDULE A, LINE 22

Roadrunner Food Bank Board of Directors 2001

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ANNE McBRAYER NM1-101-05-18 Bank of America 303 Roma NW 87102 anne mcbrayer@bankofamerica com	282-1224 (work) 282-1223 (fax)
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**Member of Executive Committee