

Form **990**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2014 calendar year, or tax year beginning **JUL 1, 2014** and ending **JUN 30, 2015**


B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization FOOD BANK OF NORTHERN NEVADA, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 550 ITALY DR. City or town, state or province, country, and ZIP or foreign postal code SPARKS, NV 89434		D Employer identification number 94-2924979
	F Name and address of principal officer: BRIAN EDWARDS SAME AS C ABOVE		E Telephone number (775) 331-3663
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 30,367,905.
	J Website: WWW.FBNN.ORG		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
	K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		H(c) Group exemption number ▶ L Year of formation: 1981 M State of legal domicile: NV

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: FEEDING THE HUNGRY TODAY AND SOLVING HUNGER FOR TOMORROW THROUGH COMMUNITY PARTNERSHIP.			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a) 18		
	4	Number of independent voting members of the governing body (Part VI, line 1b) 18		
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a) 118		
	6	Total number of volunteers (estimate if necessary) 2500		
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 0.		
7b	Net unrelated business taxable income from Form 990-T, line 34 0.			
Revenue	8	Contributions and grants (Part VIII, line 1h) 26,848,757.	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g) 446,071.	26,848,757.	29,721,909.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 81,023.	446,071.	386,512.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 155,554.	81,023.	90,237.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 27,531,405.	155,554.	155,540.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0.	27,531,405.	30,354,198.
	14	Benefits paid to or for members (Part IX, column (A), line 4) 0.	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,892,476.	2,892,476.	3,024,501.
	16a	Professional fundraising fees (Part IX, column (A), line 11e) 399,817.	399,817.	462,745.
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,037,976.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 24,780,036.	24,780,036.	27,924,058.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 28,072,329.	28,072,329.	31,411,304.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12 -540,924.	-540,924.	-1,057,106.
	20	Total assets (Part X, line 16) 15,347,173.	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26) 840,580.	15,347,173.	14,536,055.
	22	Net assets or fund balances. Subtract line 21 from line 20 14,506,593.	840,580.	1,120,200.

Part II Signature Block

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

Sign Here	Signature of officer 	Date
	BRIAN EDWARDS, CHIEF FINANCIAL OFFICER Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name CONNIE CHRISTIANSEN	Preparer's signature CONNIE CHRISTIANSEN	Date 05/06/16	Check <input type="checkbox"/> if self-employed	PTIN P00398106
	Firm's name ▶ KOHN & COMPANY LLP	Firm's EIN ▶ 46-3281627			
	Firm's address ▶ 5310 KIETZKE LANE, SUITE 101 RENO, NV 89511	Phone no. 775-828-7300			

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: OUR MISSION IS FEEDING THE HUNGRY TODAY AND SOLVING HUNGER FOR TOMORROW THROUGH COMMUNITY PARTNERSHIP.

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

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

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

4a (Code:) (Expenses \$ 28,956,879. including grants of \$) (Revenue \$ 517,060.) THE FOOD BANK OF NORTHERN NEVADA IS THE PRIMARY REGIONAL FOOD DISTRIBUTION SYSTEM THROUGH WHICH FOOD-INSECURE PEOPLE ACCESS FOOD, MEALS, AND OTHER SUPPORT SERVICES. SERVING 20 REGIONAL COUNTIES, THE FOOD BANK COLLECTS, SORTS, AND DELIVERS DONATED AND PURCHASED FOOD THROUGH A NETWORK OF 140 PARTNER AGENCIES. THE FOOD BANK'S DIRECT SERVICE PROGRAMS PROVIDE MEALS, FOOD, PRODUCE, AND SNAP APPLICATION ASSISTANCE, WITH PRIORITY ON ADDRESSING CHILD AND SENIOR HUNGER. WITH ITS PARTNERS AND ITS OWN PROGRAMS, THE FOOD BANK DELIVERED 15.1 MILLION MEALS IN FY 15. THE FOOD BANK IS ALSO INVOLVED IN COMMUNITY INITIATIVES WHICH ADDRESS POVERTY, THE ROOT CAUSE OF HUNGER. THESE LONGER-TERM SOLUTIONS HELP BUILD INDIVIDUAL SELF-SUFFICIENCY AND COMMUNITY SUSTAINABILITY.

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

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

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

4e Total program service expenses 28,956,879.