

Rushton & Company, LLC
P.O. Box 2917
Gainesville, GA 30503
770-287-7800

February 13, 2017

CONFIDENTIAL

FOOD BANK OF NORTHEAST GEORGIA
INC.
P.O. BOX 48857
ATHENS, GA 30604

Dear John:

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)
Exempt Organization Business Income Tax Return (Form 990-T)
600-T Unrelated Business Return

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Rushton & Company, LLC

Filing Instructions

FOOD BANK OF NORTHEAST GEORGIA INC.

Exempt Organization Tax Return

Taxable Year Ended June 30, 2016

Date Due: AS SOON AS POSSIBLE

Remittance: None is required. Your Form 990 for the tax year ended 6/30/16 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Sign the IRS e-file Authorization and mail it as soon as possible to:

Rushton & Company, LLC
P.O. Box 2917
Gainesville, GA 30503

Other: Initial and date the copies of the IRS e-file Signature Authorization and the Form 990. Retain them for your records. If previously signed and returned no further action is required for Form 8879-EO.

Your return is being filed electronically with the IRS and is not required to be mailed. Mailing a paper copy of your return to the IRS will delay the processing of your return.

Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2015, or fiscal year beginning 7/01, 2015, and ending 6/30, 20 16

2015

Department of the Treasury
Internal Revenue Service

u Do not send to the IRS. Keep for your records.
u Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

Name of exempt organization

**FOOD BANK OF NORTHEAST GEORGIA
INC.**

Employer identification number

58-1938066

Name and title of officer

**JOHN BECKER
PRESIDENT**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b	22,456,784
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2015 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **RUSHTON & COMPANY, LLC** to enter my PIN **30501** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature }

Date }

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

58896130501

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature }

J. CHRIS HOLLIFIELD

Date }

ERO Must Retain This Form—See Instructions

Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2015)

Form **990**
Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2015
Open to Public Inspection

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 2015 calendar year, or tax year beginning 07/01/15, and ending 06/30/16

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 NORTHEAST GEORGIA INC.		D Employer identification number 58-1938066
	Doing business as		E Telephone number 706-354-8191
	Number and street (or P.O. box if mail is not delivered to street address) P.O. BOX 48857		Room/suite
	City or town, state or province, country, and ZIP or foreign postal code ATHENS GA 30604		G Gross receipts \$ 22,741,012
F Name and address of principal officer: JOHN BECKER P.O. BOX 48857 ATHENS GA 30604			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)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () <input type="checkbox"/> t (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.FOODBANKNEGA.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other u			L Year of formation: 1992
			M State of legal domicile: GA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WE ARE A NETWORK OF FRIENDS WORKING TO FEED THE ILL, NEEDY, SENIORS, AND CHILDREN OF NORTHEAST GEORGIA. OUR MISSION IS TO WORK TOWARD ENDING HUNGER AS PART OF AN OVERALL COMMUNITY EFFORT TO ALLEVIATE POVERTY.	
	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 2015 (Part V, line 2a)	60
	6 Total number of volunteers (estimate if necessary)	2428
	7a Total unrelated business revenue from Part VIII, column (C), line 12	-3,678
7b Net unrelated business taxable income from Form 990-T, line 34	-470,834	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year: 21,834,460 Current Year: 21,155,206
	9 Program service revenue (Part VIII, line 2g)	1,299,593 1,364,757
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,672 1,881
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-13,013 -65,060
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	23,124,712 22,456,784
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,232,530 1,385,724
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0
	b Total fundraising expenses (Part IX, column (D), line 25) u 277,100	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	21,807,613 19,991,473	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	23,040,143 21,377,197	
19 Revenue less expenses. Subtract line 18 from line 12	84,569 1,079,587	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 5,964,521 End of Year: 8,648,690
	21 Total liabilities (Part X, line 26)	1,334,440 2,693,844
	22 Net assets or fund balances. Subtract line 21 from line 20	4,630,081 5,954,846

Part II Signature Block

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

Sign Here	Signature of officer	Date			
	JOHN BECKER Type or print name and title	PRESIDENT			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	J. CHRIS HOLLIFIELD	J. CHRIS HOLLIFIELD	02/13/17	<input type="checkbox"/>	P00939610
Firm's name } RUSHTON & COMPANY, LLC		Firm's EIN } 58-2282374			
Firm's address } P.O. BOX 2917 GAINESVILLE, GA 30503		Phone no. 770-287-7800			

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

For Paperwork Reduction Act Notice, see the separate instructions.

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:

WE ARE A NETWORK OF FRIENDS WORKING TO FEED THE ILL, NEEDY, SENIORS, AND CHILDREN OF NORTHEAST GEORGIA. OUR MISSION IS TO WORK TOWARD ENDING HUNGER AS PART OF AN OVERALL COMMUNITY EFFORT TO ALLEVIATE POVERTY.

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

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

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

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

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

4a (Code:) (Expenses \$ **20,741,108** including grants of \$) (Revenue \$ **1,364,757**)

THE FOOD BANK SIGNIFICANTLY INCREASED DISTRIBUTION THROUGH THREE MAJOR CHANNELS, EACH HAVING SIGNIFICANT INCREASES THIS YEAR OVER LAST. THESE ARE AGENCY DISTRIBUTION, MOBILE PANTRY DIRECT DISTRIBUTION AND TARGETED PROGRAMS DIRECT DISTRIBUTION. THE BULK OF OUR INCREASED DISTRIBUTION WAS IN FRESH VEGETABLES AND REFRIGERATED GOODS. WE INCREASED THE HEALTH AND SELECTION OF FOODS PROVIDED FREE OF CHARGE TO THE ILL, NEEDY, AND MINOR CHILDREN.

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 **u 20,741,108**

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: u See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

Section A. Governing Body and Management

			Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a	18		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	18		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X	
6	Did the organization have members or stockholders?	6		X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a	X		
b	Each committee with authority to act on behalf of the governing body?	8b	X		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X	

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u** **GA**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **u**

HORACE MOORE
ATHENS

861 NEWTON BRIDGE RD

GA 30607

706-354-8191

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN BECKER PRESIDENT	40.00 0.00	X		X				90,792	0	22,189
(2) RANDALL ABNEY DIRECTOR	1.00 0.00	X						0	0	0
(3) DAVID DARUGH DIRECTOR	1.00 0.00	X						0	0	0
(4) RICHARD BOONE DIRECTOR	1.00 0.00	X						0	0	0
(5) MYUNG COGAN SECRETARY	1.00 0.00	X		X				0	0	0
(6) JOHN GRAHAM DIRECTOR	1.00 0.00	X						0	0	0
(7) BOBBY ERWIN DIRECTOR	1.00 0.00	X						0	0	0
(8) EDD LOWE DIRECTOR	1.00 0.00	X						0	0	0
(9) CHARLIE MADDOX DIRECTOR	1.00 0.00	X						0	0	0
(10) ROBERT FINCH DIRECTOR	1.00 0.00	X						0	0	0
(11) ADAM LAND DIRECTOR	1.00 0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) BRANDON MARTIN	1.00									
DIRECTOR	0.00	X					0	0	0	
(13) WALTER WELLBORN	1.00									
DIRECTOR	0.00	X					0	0	0	
(14) APRIL ZIMMERMAN	1.00									
TREASURER	0.00	X		X			0	0	0	
(15) GA NASWORTHY	1.00									
DIRECTOR	0.00	X					0	0	0	
(16) BROCK TOOLE	1.00									
CHAIRMAN	0.00	X		X			0	0	0	
(17) DAVID H VENGHAUS	1.00									
DIRECTOR	0.00	X					0	0	0	
(18) STEVE PARKS	1.00									
DIRECTOR	0.00	X					0	0	0	
(19) ROBERT WALL	1.00									
DIRECTOR	0.00	X					0	0	0	
1b Sub-total							90,792		22,189	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							90,792		22,189	

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 52,800					
	b Membership dues	1b					
	c Fundraising events	1c 705,360					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 20,397,046					
	g Noncash contributions included in lines 1a-1f: \$	18,352,718					
	h Total. Add lines 1a-1f	u	21,155,206				
Program Service Revenue			Busn. Code				
	2a AGENCY SHARE		900099	734,354	734,354		
	b GNAP		900099	517,285	517,285		
	c USDA FEES		900099	113,118	113,118		
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f	u	1,364,757					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u	1,881	1,881			
	4 Income from investment of tax-exempt bond proceeds	u					
	5 Royalties	u					
	6a Gross rents	(i) Real	167,536				
		(ii) Personal					
	b Less: rental exps.	171,214					
	c Rental inc. or (loss)	-3,678					
	d Net rental income or (loss)	u	-3,678			-3,678	
	7a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
	b Less: cost or other basis & sales exps.						
	c Gain or (loss)						
	d Net gain or (loss)	u					
	8a Gross income from fundraising events (not including \$ 705,360 of contributions reported on line 1c). See Part IV, line 18	a	35,262				
		b Less: direct expenses	113,014				
c Net income or (loss) from fundraising events		u	-77,752			-77,752	
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities	u					
10a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory	u					
Miscellaneous Revenue			Busn. Code				
11a MISCELLANEOUS INCOME		900099	16,370	16,370			
b							
c							
d All other revenue							
e Total. Add lines 11a-11d	u	16,370					
12 Total revenue. See instructions.	u	22,456,784	1,383,008	-3,678	-77,752		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	86,252	18,158	22,698	45,396
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,100,205	884,570	174,368	41,267
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	17,577	13,213	3,096	1,268
9 Other employee benefits	88,466	66,502	15,580	6,384
10 Payroll taxes	93,224	70,031	16,470	6,723
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	74,896	57,608	17,288	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	33,342	11,170	835	21,337
12 Advertising and promotion	7,663	7,474	189	
13 Office expenses	88,740	56,757	31,983	
14 Information technology	26,934	6,734	20,200	
15 Royalties				
16 Occupancy	167,245	153,544	13,701	
17 Travel	34,264	25,756	6,034	2,474
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	15,981	15,981		
20 Interest	26,821	24,139	2,682	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	376,415	365,319	11,096	
23 Insurance	81,079	70,314	9,472	1,293
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DONATED FOOD DISTRIBUTED	17,985,154	17,985,154		
b PURCHASED FOOD DISTRIBUTE	659,106	659,106		
c CAPITAL CAMP	144,546			144,546
d SHIPPING COSTS	135,294	135,294		
e All other expenses	133,993	114,284	13,297	6,412
25 Total functional expenses. Add lines 1 through 24e	21,377,197	20,741,108	358,989	277,100
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	1,035,775	1	682,919
	2	Savings and temporary cash investments	53,795	2	
	3	Pledges and grants receivable, net	399,672	3	394,618
	4	Accounts receivable, net	121,061	4	58,450
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	1,306,930	8	1,668,248
	9	Prepaid expenses and deferred charges	39,129	9	34,695
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	6,830,784		
	10b	Less: accumulated depreciation	1,030,291	10c	5,800,493
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	33,828	15	9,267
16	Total assets. Add lines 1 through 15 (must equal line 34)	5,964,521	16	8,648,690	
Liabilities	17	Accounts payable and accrued expenses	136,455	17	162,993
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	1,197,985	23	2,530,851
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,334,440	26	2,693,844
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	3,350,363	27	5,928,446
	28	Temporarily restricted net assets	1,279,718	28	26,400
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	4,630,081	33	5,954,846	
34	Total liabilities and net assets/fund balances	5,964,521	34	8,648,690	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	22,456,784
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,377,197
3	Revenue less expenses. Subtract line 2 from line 1	3	1,079,587
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,630,081
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-29,636
9	Other changes in net assets or fund balances (explain in Schedule O)	9	274,814
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,954,846

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	X	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
u Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

**FOOD BANK OF NORTHEAST GEORGIA
INC.**

Employer identification number

58-1938066

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) u	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,447,863	21,941,755	22,103,336	21,834,460	21,155,206	88,482,620
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,447,863	21,941,755	22,103,336	21,834,460	21,155,206	88,482,620
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						88,482,620

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	1,447,863	21,941,755	22,103,336	21,834,460	21,155,206	88,482,620
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	590	310	1,536	3,672	1,881	7,989
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						88,490,609

12 Gross receipts from related activities, etc. (see instructions) **12** 1,383,008

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	99.99 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	99.99 %

16a 33 1/3% support test—2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) u	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**):
- a** The organization satisfied the Activities Test. Complete **line 2** below.
 - b** The organization is the parent of each of its supported organizations. Complete **line 3** below.
 - c** The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (**see instructions**).

2 Activities Test. **Answer (a) and (b) below.**

	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

u Attach to Form 990, Form 990-EZ, or Form 990-PF.

u Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Name of the organization

**FOOD BANK OF NORTHEAST GEORGIA
INC.**

Employer identification number

58-1938066

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year ► \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization FOOD BANK OF NORTHEAST GEORGIA	Employer identification number 58-1938066
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ATLANTA COMMUNITY FOODEBANK 732 JOSEPH E LOWERY FOOD BANK ATLANTA GA 30318	\$ 1,018,233	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization FOOD BANK OF NORTHEAST GEORGIA	Employer identification number 58-1938066
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	FOOD	\$ 1,018,233
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

FOOD BANK OF NORTHEAST GEORGIA INC.

Employer identification number

58-1938066

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year (sub-rows a-d), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u, 4 Number of states where property subject to conservation easement is located u, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u \$, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 u \$, (ii) Assets included in Form 990, Part X u \$, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 u \$, b Assets included in Form 990, Part X u \$

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

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

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

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No

Part V Endowment Funds.

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

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

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

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

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

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

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

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		857,205		857,205
b Buildings		3,833,748	274,593	3,559,155
c Leasehold improvements		861,867	137,562	724,305
d Equipment		934,395	369,542	564,853
e Other		343,569	248,594	94,975
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) u				5,800,493

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) u		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	22,605,354
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a		
	b Donated services and use of facilities	2b		
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d	148,570	
	e Add lines 2a through 2d		2e	148,570
3	Subtract line 2e from line 1		3	22,456,784
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	22,456,784

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

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

1	Total expenses and losses per audited financial statements		1	21,250,953
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d	139,221	
	e Add lines 2a through 2d		2e	139,221
3	Subtract line 2e from line 1		3	21,111,732
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b	265,465	
	c Add lines 4a and 4b		4c	265,465
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	21,377,197

Part XIII Supplemental Information.

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

PART X - FIN 48 FOOTNOTE

NOTE 16 - UNCERTAIN TAX POSITIONS

EFFECTIVE JULY 1, 2009, THE FOOD BANK IMPLEMENTED THE NEW ACCOUNTING REQUIREMENTS ASSOCIATED WITH UNCERTAINTY IN INCOME TAXES USING THE PROVISIONS OF FASB ASC 740, INCOME TAXES. THE GUIDANCE PRESCRIBES A MINIMUM RECOGNITION THRESHOLD AND MEASUREMENT METHODOLOGY THAT A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN IS REQUIRED BEFORE BEING RECOGNIZED IN THE FINANCIAL STATEMENTS. IT ALSO PROVIDES GUIDANCE FOR DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE AND TRANSITION. AS OF JUNE 30, 2016, THE FOOD BANK HAS NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE

Part XIII Supplemental Information (continued)

IN THE FINANCIAL STATEMENTS.

WITH FEW EXCEPTIONS, THE FOOD BANK IS NO LONGER SUBJECT TO U.S. FEDERAL, STATE, AND LOCAL INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE FISCAL YEAR 2013.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

FEDERAL TAX EXPENSE	\$ -2,939
DIRECT COST OF EVENTS	\$ 113,014
INDIRECT RENTAL COST	\$ 29,146
BOOK TO TAX DIFFERENCE - RENTAL DEPRECIATION	\$ 9,349

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER

DIRECT COST OF EVENTS	\$ 113,014
INDIRECT RENTAL COST	\$ 29,146
FEDERAL TAX EXPENSE	\$ -2,939

PART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER

RENTAL - BOOK TO TAX DEPREC ADJ	\$ -9,349
BOOK / TAX DEPRECIATION DIFFERENCE	\$ 274,814

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

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2015

Department of the Treasury
Internal Revenue Service

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

U Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization

**FOOD BANK OF NORTHEAST GEORGIA
INC.**

Employer identification number

58-1938066

Part I

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

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

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

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

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

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		<u>FOOD2KIDS</u> (event type)	<u>CHRISTMAS APPEA</u> (event type)	<u>7</u> (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	323,287	125,618	291,122	740,027
	2	Less: Contributions	323,287	125,618	255,860	704,765
	3	Gross income (line 1 minus line 2)			35,262	35,262
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	3,573	58,124	51,317	113,014
	10	Direct expense summary. Add lines 4 through 9 in column (d)				
11	Net income summary. Subtract line 10 from line 3, column (d)					-77,752

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

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

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

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

b If "No," explain:

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

b If "Yes," explain:

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2015

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

U Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

U Attach to Form 990.

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

Name of the organization

**FOOD BANK OF NORTHEAST GEORGIA
INC.**

Employer identification number

58-1938066

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory	X	1615	18,330,588	WEIGHT
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other U ()				
26 Other U ()				
27 Other U ()				
28 Other U (GIFT CARDS)	X	101	22,130	FAIR MARKET VALUE

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

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

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2015

Department of the Treasury
Internal Revenue Service

u Attach to Form 990 or 990-EZ.

Open to Public Inspection

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

Name of the organization

**FOOD BANK OF NORTHEAST GEORGIA
INC.**

Employer identification number

58-1938066

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE ANNUAL 990 IS REVIEWED BY THE TREASURER AND FINANCE COMMITTEE AND
THEN BROUGHT BEFORE THE BOARD

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
COMPENSATION IS DETERMINED BY PERFORMANCE AND IS EVALUATED AGAINST
PREVAILING MARKET WAGES APPROPRIATE FOR THE POSITION

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
COMPENSATION IS DETERMINED BY PERFORMANCE AND IS EVALUATED AGAINST
PREVAILING MARKET WAGES APPROPRIATE FOR THE POSITION

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

FEDERAL TAX EXPENSE	\$	-2,939
DIRECT COST OF EVENTS	\$	113,014
INDIRECT RENTAL COST	\$	29,146
BOOK TO TAX DIFFERENCE - RENTAL DEPRECIATION	\$	9,349

Name of the organization

Employer identification number

FOOD BANK OF NORTHEAST GEORGIA

58-1938066

DIRECT COST OF EVENTS	\$ -113,014
INDIRECT RENTAL COST	\$ -29,146
FEDERAL TAX EXPENSE	\$ 2,939
RENTAL - BOOK TO TAX DEPREC ADJ	\$ -9,349
BOOK / TAX DEPRECIATION DIFFERENCE	\$ 274,814
TOTAL	\$ 274,814

Federal Statements**Indirect Depreciation****Statement 1 - Form 4562, Line 6 - Section 179 Expense**

<u>Description of Property</u>	<u>Cost</u>	<u>Expense</u>
WINDOWS 7 PRO DESKTOP COMPUTER (1)	\$ 1,666	\$ 1,666
WINDOWS 7 PRO DESKTOP COMPUTER (2)	1,666	1,666
WINDOWS 7 PRO DESKTOP COMPUTER (3)	1,666	1,666
WINDOWS 7 PRO DESKTOP COMPUTER (4)	1,666	1,666
WINDOWS 7 PRO DESKTOP COMPUTER (5)	1,666	1,666
WINDOWS 7 PRO DESKTOP COMPUTER (6)	1,666	1,666
TOTAL	<u>\$ 9,996</u>	<u>\$ 9,996</u>

Federal Statements

Statement 2 - Form 4562, Line 26 - Property Used More Than 50% in a Qualified Business

	Property	Date	Business %	Cost	Depr Basis	Period	Method	Deduction	Section 179
	Type								
CROWN LIFT TRUCK		4/03/00	100.00	\$ 19,544	\$ 19,544	5.0	200DBHY	\$	\$
AKINS FORD 2002		5/02/02	100.00	46,503	32,552	5.0	200DBHY		
AKINS FORD 2003		3/14/03	100.00	48,428	33,900	5.0	200DBHY		
TRUCK		2/29/08	100.00	43,000	21,500	5.0	200DBHY		
SUPRA 650 A/C FOR TRUCK		6/30/09	100.00	16,500	8,250	5.0	200DBHY		
LIFT GATE		8/06/09	100.00	5,571	2,785	5.0	200DBHY		
2004 IH BOX TRUCK		8/21/09	100.00	41,770	20,885	5.0	200DBHY		
MAXON LIFT GATE		3/23/10	100.00	5,500	2,750	5.0	200DBHY		
MOTOR		7/21/10	100.00	3,330	1,665	5.0	200DBHY		56
TRUCK		1/31/12	100.00	97,249	48,624	5.0	200DBHY		8,403
2007 INTERNATIONAL 4300		8/08/13	100.00	24,989	20,199	5.0	200DBHY		5,997
2006 INTERNATILONAL 4300		8/08/13	100.00	24,989	20,199	5.0	200DBHY		5,997
NEW TRANSMISSION FOR ASSET #40, 2003 FORD		2/11/14	100.00	4,880	3,497	5.0	200DBHY		1,171
REFER UNIT		4/07/14	100.00	9,454	8,272	5.0	200DBHY		2,269
REFER UNIT		4/07/14	100.00	8,684	7,598	5.0	200DBHY		2,084
LIFT GATE		7/09/14	100.00	4,475	3,580	5.0	200DBHY		1,432

Federal Statements**Statement 2 - Form 4562, Line 26 - Property Used More Than 50% in a Qualified Business**
(continued)

	Property	Date	Business %	Cost	Depr Basis	Period	Method	Deduction	Section 179
	Type								
TOTAL				\$ 404,866	\$ 255,800			\$ 27,409	\$ 0

Filing Instructions

FOOD BANK OF NORTHEAST GEORGIA INC.

Exempt Organization Business Tax Return

Taxable Year Ended June 30, 2016

Date Due: AS SOON AS POSSIBLE

Remittance: None is required. Your Form 990-T for the tax year ended 6/30/16 shows no balance due.

Mail To: Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027

If a private delivery service is used, mail to:
OSPC
1973 Rulon White Blvd.
Ogden, UT 84201-1000

Signature: The return should be signed and dated on Page 2 by an officer representing the organization.

Other: Initial and date the copy of the return, and retain it for your records.

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0687

2015

For calendar year 2015 or other tax year beginning **07/01/15**, and ending **06/30/16**

Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

A Check box if address changed

B Exempt under section

501(c) (**3**)

408(e) 220(e)

408A 530(a)

529(a)

Name of organization (Check box if name changed and see instructions.)

**FOOD BANK OF NORTHEAST GEORGIA
INC.**

Number, street, and room or suite no. If a P.O. box, see instructions.

P.O. BOX 48857

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

ATHENS GA 30604

D Employer identification number
(Employees' trust, see instructions.)

58-1938066

E Unrelated business activity codes
(See instructions.)

531120 | 900099

C Book value of all assets at end of year

8,648,690

F Group exemption number (See instructions.) **u**

G Check organization type **u** 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity.

u SEE STATEMENT 1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? **u** Yes No
If "Yes," enter the name and identifying number of the parent corporation.

u

J The books are in care of **u HORACE MOORE** Telephone number **u 706-354-8191**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales				
b Less returns and allowances				
c Balance	u			
2 Cost of goods sold (Schedule A, line 7)				
3 Gross profit. Subtract line 2 from line 1c				
4a Capital gain net income (attach Schedule D)				
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)				
c Capital loss deduction for trusts				
5 Income (loss) from partnerships and S corporations (attach statement)				
6 Rent income (Schedule C)				
7 Unrelated debt-financed income (Schedule E)		167,536	171,214	-3,678
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)				
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)				
10 Exploited exempt activity income (Schedule I)				
11 Advertising income (Schedule J)				
12 Other income (See instructions; attach schedule)				
13 Total. Combine lines 3 through 12		167,536	171,214	-3,678

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)				
14 Compensation of officers, directors, and trustees (Schedule K)				
15 Salaries and wages				106,537
16 Repairs and maintenance				1,753
17 Bad debts				
18 Interest (attach schedule)	SEE STATEMENT 2			10,460
19 Taxes and licenses				8,265
20 Charitable contributions (See instructions for limitation rules)				
21 Depreciation (attach Form 4562)		21	307,642	
22 Less depreciation claimed on Schedule A and elsewhere on return		22a	15,101	22b 292,541
23 Depletion				
24 Contributions to deferred compensation plans				1,559
25 Employee benefit programs				7,848
26 Excess exempt expenses (Schedule I)				
27 Excess readership costs (Schedule J)				
28 Other deductions (attach schedule)	SEE STATEMENT 3			38,193
29 Total deductions. Add lines 14 through 28				467,156
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13				-470,834
31 Net operating loss deduction (limited to the amount on line 30)				
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30				-470,834
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)				1,000
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32				-470,834

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and:	
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____	
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ (2) Additional 3% tax (not more than \$100,000) \$	
c Income tax on the amount on line 34	35c
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	36
37 Proxy tax. See instructions	37
38 Alternative minimum tax	38
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies	39

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	40a	
b Other credits (see instructions)	40b	
c General business credit. Attach Form 3800 (see instructions)	40c	
d Credit for prior year minimum tax (attach Form 8801 or 8827)	40d	
e Total credits. Add lines 40a through 40d	40e	
41 Subtract line 40e from line 39	41	
42 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (alt. sch.)	42	
43 Total tax. Add lines 41 and 42	43	0
44a Payments: A 2014 overpayment credited to 2015	44a	
b 2015 estimated tax payments	44b	
c Tax deposited with Form 8868	44c	
d Foreign organizations: Tax paid or withheld at source (see instructions)	44d	
e Backup withholding (see instructions)	44e	
f Credit for small employer health insurance premiums (Attach Form 8941)	44f	
g Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total u	44g	
45 Total payments. Add lines 44a through 44g	45	
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached u <input type="checkbox"/>	46	
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed u	47	
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid u	48	
49 Enter the amount of line 48 you want: Credited to 2016 estimated tax u Refunded u	49	

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2015 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here u	Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year u \$		

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **u**

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a Additional sec. 263A costs (attach schedule)	4a				
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5				

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here **u** _____ **u** **PRESIDENT**
 Signature of officer Date Title

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

Paid Preparer Use Only

Print/Type preparer's name J. CHRIS HOLLIFIELD	Preparer's signature J. CHRIS HOLLIFIELD	Date 02/13/17	Check <input type="checkbox"/> if self-employed	PTIN P00939610
Firm's name } RUSHTON & COMPANY, LLC			Firm's EIN } 58-2282374	
Firm's address } P.O. BOX 2917 GAINESVILLE, GA 30503			Phone no. 770-287-7800	

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1) N/A
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **u**

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) **u**

Schedule E – Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		STMT 4 (a) Straight line depreciation (attach schedule)	STMT 5 (b) Other deductions (attach schedule)	
(1) RENTAL INCOME	167,536	15,101	156,113	
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1) 2,381,680	660,675	100.00 %	167,536	171,214
(2)		%		
(3)		%		
(4)		%		
SEE STATEMENT 6		SEE STATEMENT 7		
Totals		u	167,536	171,214
Total dividends-received deductions included in column 8				u

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross inc.	6. Deductions directly connected with income in column 5
(1) N/A					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals			u	
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col.4)
(1) N/A				
(2)				
(3)				
(4)				
Totals	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B).

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.

Schedule J – Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals from Part I						
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	

Total. Enter here and on page 1, Part II, line 14

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

u Attach to your tax return.

u Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

2015

Attachment
Sequence No. **179**

Name(s) shown on return **FOOD BANK OF NORTHEAST GEORGIA
INC.**

Identifying number
58-1938066

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	533,572
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	500,000
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
	SEE STATEMENT 1	9,996	9,996
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	9,996
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	9,996
10	Carryover of disallowed deduction from line 13 of your 2014 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	0
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	0
13	Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12	13	9,996

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	31,353

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2015	17	15,116
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/> u <input type="checkbox"/>		

Section B—Assets Placed in Service During 2015 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	27,409
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	73,878
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No
(a) Type of property (list vehicles first) (b) Date placed in service (c) Business/investment use percentage (d) Cost or other basis (e) Basis for depreciation (business/investment use only) (f) Recovery period (g) Method/Convention (h) Depreciation deduction (i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25
26 Property used more than 50% in a qualified business use: SEE STATEMENT 2 % 404,866 255,800 27,409
27 Property used 50% or less in a qualified business use: % S/L- S/L-
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 27,409
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)
31 Total commuting miles driven during the year
32 Total other personal (noncommuting) miles driven
33 Total miles driven during the year. Add lines 30 through 32
34 Was the vehicle available for personal use during off-duty hours? Yes No Yes No Yes No Yes No Yes No Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?
36 Is another vehicle available for personal use?

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? Yes No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners
39 Do you treat all use of vehicles by employees as personal use?
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs (b) Date amortization begins (c) Amortizable amount (d) Code section (e) Amortization period or percentage (f) Amortization for this year
42 Amortization of costs that begins during your 2015 tax year (see instructions):
43 Amortization of costs that began before your 2015 tax year 43
44 Total. Add amounts in column (f). See the instructions for where to report 44

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

u Attach to your tax return.

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OMB No. 1545-0172

2015

Attachment
Sequence No. **179**

Name(s) shown on return **FOOD BANK OF NORTHEAST GEORGIA
INC.**

Identifying number
58-1938066

Business or activity to which this form relates

FOOD HUB

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2014 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	247,539
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	215

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2015	17	15,797
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/> u		

Section B—Assets Placed in Service During 2015 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		247,538	5.0	MQ	200DB	23,973
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property	06/30/16	56,094	39 yrs.	MM	S/L	60
	VARIOUS	413,739	39.0	MM	S/L	4,957

Section C—Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	292,541
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2015)

Form **4562**
 Department of the Treasury
 Internal Revenue Service (99)

Depreciation and Amortization
 (Including Information on Listed Property)

OMB No. 1545-0172
2015
 Attachment Sequence No. **179**

u **Attach to your tax return.**
 u **Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.**

Name(s) shown on return **FOOD BANK OF NORTHEAST GEORGIA INC.** Identifying number **58-1938066**

Business or activity to which this form relates
RENTAL INCOME

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2014 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2015	17	15,019
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/>		

Section B—Assets Placed in Service During 2015 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property	03/21/16	10,975	39 yrs.	MM	S/L	82

Section C—Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	15,101
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Federal Statements**Statement 1 - Form 990-T - Primary Unrelated Business Activity**Description

FOOD PROCESSING AND STORAGE, AND RENTAL OF DEBT FINANCED
COMMERCIAL REAL ESTATE

Statement 2 - Form 990-T, Part II, Line 18 - InterestDescriptionAmount

FOOD HUB	\$ 10,460
TOTAL	\$ 10,460

Statement 3 - Form 990-T, Part II, Line 28 - Other DeductionsDescriptionAmount

ADVERTISING	\$ 95
OCCUPANCY	18,423
TRAVEL	3,040
DUES AND SUB	566
INFORMATION TECHNOLOGY	1,347
INSURANCE	4,748
OTHER PROFESSIONAL FEES	990
PRINTING AND PUBLICATIONS	1,212
CONFERENCES/MEETINGS	7,772
TOTAL	\$ 38,193

Statement 4 - Form 990-T, Schedule E, Column 3a - Straight Line DepreciationDescriptionDeduction

RENTAL INCOME	
CBSC - RABUN FACILITY RENTAL SPACE	12,615
CARRIER 7.5 TON HEAT PUMP	321
OUTSIDE HVAC SYSTEM - BELLA'S RESTAURANT	82
IMPROVEMENTS TO CBSC-RENTAL	2,083
TOTAL	15,101

Federal Statements**Statement 5 - Form 990-T, Schedule E, Column 3b - Other Deductions**

<u>Description</u>	<u>Deduction</u>
RENTAL INCOME	
MANAGEMENT FEES	42,006
INTEREST	11,669
INSURANCE	34,989
CLEANING & MAINTENANCE	36,446
TAXES	13,413
UTILITIES	17,240
MISC EXPENSE	350
TOTAL	<u>156,113</u>

Statement 6 - Form 990-T, Schedule E, Column 4 - Average Acquisition Debt

<u>Description</u>	<u>Deduction</u>
RENTAL INCOME	
SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH	28,580,160
DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD	<u>12</u>
AVERAGE ACQUISITION DEBT	<u>2,381,680</u>

Statement 7 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis

<u>Description</u>	<u>Deduction</u>
RENTAL INCOME	
ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD	669,618
ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	<u>651,732</u>
	1,321,350
DIVIDED BY 2	<u>2</u>
AVERAGE ADJUSTED BASIS	<u>660,675</u>

Year Ending: June 30, 2016

58-1938066

FOOD BANK OF NORTHEAST GEORGIA
INC.
P.O. BOX 48857
ATHENS, GA 30604

NOL Carryback Election

Under IRC Section 172(b)(3), the taxpayer elects to relinquish the entire carryback period with respect to any regular tax and AMT net operating loss incurred during the current tax year.

58-1938066

Federal Asset Report

FYE: 6/30/2016

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Section 179 Expense:											
194	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666		X	X	N/A	5	MQ200DB	0	1,666
195	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666		X	X	N/A	5	MQ200DB	0	1,666
196	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666		X	X	N/A	5	MQ200DB	0	1,666
197	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666		X	X	N/A	5	MQ200DB	0	1,666
198	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666		X	X	N/A	5	MQ200DB	0	1,666
199	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666		X	X	N/A	5	MQ200DB	0	1,666
			<u>9,996</u>				<u>N/A</u>			<u>0</u>	<u>9,996</u>
5-year GDS Property:											
194	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*		X	X	0	5	MQ200DB	0	0
195	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*		X	X	0	5	MQ200DB	0	0
196	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*		X	X	0	5	MQ200DB	0	0
197	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*		X	X	0	5	MQ200DB	0	0
198	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*		X	X	0	5	MQ200DB	0	0
199	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*		X	X	0	5	MQ200DB	0	0
			<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
Prior MACRS:											
7	Loading Dock	3/13/98	12,000				12,000	39	MMS/L	12,000	0
8	Concrete Platform	5/28/98	1,240				1,240	15	HY 150DB	1,240	0
22	Reznor F-200 Gas Heater	3/28/00	1,970				1,970	5	HY 200DB	1,970	0
23	DEKA Battery	4/03/00	2,397				2,397	5	HY 200DB	2,397	0
24	Hobart Battery Charger	4/03/00	1,203				1,203	5	HY 200DB	1,203	0
39	New Heater	12/03/02	1,271			X	890	5	HY 200DB	1,271	0
45	3 Work Tables w/ backsplash	7/29/03	1,302			X	651	5	HY 200DB	1,302	0
54	Freezer - Cornelia	6/23/05	13,462				13,462	5	HY 200DB	13,462	0
56	Cooler	6/23/05	163,326				163,326	5	HY 200DB	163,326	0
57	4'x4' Floor Scale	4/07/06	1,500				1,500	5	HY 200DB	1,500	0
58	Vacuum Machine	5/01/06	4,160				4,160	5	HY 200DB	4,160	0
65	Racking for Warehouses	2/01/07	2,325				2,325	5	HY 200DB	2,325	0
78	A/C Unit	6/30/08	3,100			X	1,550	5	HY 200DB	3,100	0
80	Floor Scale	6/10/08	1,500			X	750	5	HY 200DB	1,500	0
86	Heavy Duty Hopper	8/13/08	1,276			X	638	5	HY 200DB	1,276	0
92	Scales	2/23/10	6,834			X	3,417	5	HY 200DB	6,834	0
93	Scales	6/23/10	1,950			X	975	5	HY 200DB	1,950	0
94	Nissan Forklift	6/24/10	9,630			X	4,815	5	HY 200DB	9,630	0
95	Forklift	6/30/10	4,500			X	2,250	5	HY 200DB	4,500	0
96	Forklift	6/30/10	5,000			X	2,500	5	HY 200DB	5,000	0
97	New Cooler	6/16/10	50,986			X	25,493	5	HY 200DB	25,493	0
113	Compressor for Cooler	10/15/10	1,200			X	60	5	HY 200DB	1,140	60
114	Warranty on cooler	6/30/11	1,055			X	211	5	HY 200DB	844	211
121	Fence	10/13/11	1,945			X	1,216	15	HY 150DB	729	122
123	Warehouse offices	3/07/12	3,963				3,963	39	MMS/L	1,321	102
124	Forklift	7/19/11	7,490			X	0	5	HY 200DB	7,490	0
125	Bread Slicer	3/27/12	2,479			X	1,673	5	HY 200DB	806	1,115
126	Freezer and Coolers	9/02/11	3,143			X	0	5	HY 200DB	3,143	0
135	42"Riding Mower	5/21/13	3,170			X	2,509	5	HY 200DB	661	1,003
137	New Telephone System	12/31/12	3,144			X	1,572	5	HY 200DB	1,572	629
139	Computer-Tina	4/04/13	1,382			X	760	5	HY 200DB	622	304
141	Kitchen Equipment	8/21/13	14,500			X	11,842	5	HY 200DB	2,658	4,737
142	Compressor for Cooler	8/19/13	2,450			X	1,552	5	HY 200DB	898	621
156	Floor cleaner/sweeper	7/01/14	4,708			X	3,766	5	HY 200DB	942	1,506
157	Pallet Jack	7/01/14	2,390				2,390	5	HY 200DB	478	765
158	SFSP Carts	6/01/15	4,535			X	4,459	5	HY 200DB	76	1,783
159	2 Windows 7 Computers	4/01/15	2,330			X	2,213	5	HY 200DB	117	885
162	Floor Scrubber	9/30/14	3,745			X	3,183	5	HY 200DB	562	1,273
			<u>354,561</u>				<u>288,881</u>			<u>289,498</u>	<u>15,116</u>
Other Depreciation:											
4	Building for Freezer	10/31/97	32,633				32,633	39	MO S/L	14,413	826
5	Freezer Installation	11/21/97	1,107				1,107	5	MO S/L	1,107	0
	Sold/Scrapped: 6/30/16										
6	Freezer	11/05/97	41,888				41,888	5	MO S/L	41,888	0

*Because this asset has 179 expense, its cost has been included in the Section 179 Property cost total

58-1938066

Federal Asset Report

FYE: 6/30/2016

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
15	Freezer Repairs	11/19/98	1,627			1,627	5 MO S/L	1,627	0
	Sold/Scrapped: 6/30/16								
17	Building	5/15/99	212,257			212,257	39 MO S/L	87,987	5,442
18	Land	5/15/99	149,205			149,205	0 -- Land	0	0
38	Building-Capital Campaign	11/02/02	466,029			466,029	39 MO S/L	142,422	11,950
53	Vodavi Starplus STS Tel	4/25/05	3,095			3,095	7 MO S/L	3,095	0
60	Richard Boone Concrete Pad	7/28/06	1,550			1,550	39 MO S/L	921	40
62	Construction and New Conference	9/01/06	11,322			11,322	39 MO S/L	2,564	287
66	Network Server	2/01/07	2,416			2,416	5 MO S/L	2,416	0
68	Pimarius	4/01/07	11,500			11,500	3 MO S/L	11,500	0
70	Security Surveillance System	6/22/07	2,129			2,129	7 MO S/L	2,129	0
73	Warehouse Improvements	5/31/08	6,900			6,900	39 MO S/L	6,900	0
75	New Door - improvements	6/13/08	5,000			5,000	39 MO S/L	5,000	0
77	Warehouse Improvements	6/19/08	4,265			4,265	39 MO S/L	4,265	0
79	Security System	7/12/07	2,498			2,498	5 MO S/L	2,498	0
81	Computer	4/13/08	1,188			1,188	5 MO S/L	1,188	0
82	Phone System	6/12/08	1,900			1,900	5 MO S/L	1,900	0
84	Parking Lot Improvements	6/30/09	2,850			2,850	15 MO S/L	1,140	190
88	Building Improvements	12/31/08	4,615			4,615	5 MO S/L	4,615	0
89	Racking	4/20/10	61,000			61,000	5 MO S/L	61,000	0
90	Warehouse Offices	5/17/10	25,008			25,008	15 MO S/L	8,475	1,667
99	CRS Hardware	9/30/09	10,011			10,011	5 MO S/L	10,011	0
102	Swipe Card System	12/17/09	3,360			3,360	5 MO S/L	3,360	0
	Sold/Scrapped: 6/30/16								
116	Metasoft Software	8/31/10	6,995			6,995	5 MO S/L	6,762	233
118	Loan costs	4/20/11	4,517			4,517	7 MO S/L	2,614	627
120	Building addition	9/14/11	1,200			1,200	39 MO S/L	118	31
130	Website	8/23/11	1,750			1,750	3 MO S/L	1,750	0
131	Website	10/25/11	2,599			2,599	3 MO S/L	2,599	0
132	Website	5/11/12	1,499			1,499	3 MO S/L	1,499	0
134	Garden Project	7/30/12	1,220			1,220	5 MO S/L	711	244
138	QuickBooks 2013	3/12/13	1,027			1,027	3 MO S/L	799	228
143	Server Software	3/04/14	1,386			1,386	3 MO S/L	616	462
152	Raybun - CBSC - LAND	11/15/13	708,000			708,000	0 -- Land	0	0
155	LOAN ORIGATION COSTS	11/15/13	10,390			10,390	1 MO S/L	10,390	0
187	Building Improvements - Rabun County	7/01/15	2,662,262			2,662,262	39 -- Memo	0	0
188	Updated Website	4/13/16	11,700			11,700	3 MO S/L	0	975
190	QuickBooks 2016	4/28/16	1,444			1,444	3 MO S/L	0	80
204	Loan Cost - Rabun	7/21/15	13,208			13,208	1 MO S/L	0	8,071
	Total Other Depreciation		<u>4,494,550</u>			<u>4,494,550</u>		<u>450,279</u>	<u>31,353</u>
	Total ACRS and Other Depreciation		<u>4,494,550</u>			<u>4,494,550</u>		<u>450,279</u>	<u>31,353</u>

Listed Property:

25	Crown Lift Truck	4/03/00	19,544			19,544	5 HY 200DB	19,544	0
34	Akins Ford 2002	5/02/02	46,503		X	32,552	5 HY 200DB	46,503	0
	Sold/Scrapped: 6/30/16								
40	Akins Ford 2003	3/14/03	48,428		X	33,900	5 HY 200DB	48,428	0
83	Truck	2/29/08	43,000		X	21,500	5 HY 200DB	43,000	0
87	Supra 650 A/C for Truck	6/30/09	16,500		X	8,250	5 HY 200DB	16,500	0
110	Lift Gate	8/06/09	5,571		X	2,785	5 HY 200DB	5,571	0
111	2004 IH Box Truck	8/21/09	41,770		X	20,885	5 HY 200DB	41,770	0
	Sold/Scrapped: 6/30/16								
112	Maxon Lift Gate	3/23/10	5,500		X	2,750	5 HY 200DB	5,500	0
117	Motor	7/21/10	3,330		X	1,665	5 HY 200DB	3,274	56
133	Truck	1/31/12	97,249		X	48,624	5 HY 200DB	66,453	8,403
144	2007 International 4300	8/08/13	24,989		X	20,199	5 HY 200DB	4,790	5,997
145	2006 Internatlonal 4300	8/08/13	24,989		X	20,199	5 HY 200DB	4,790	5,997
146	NEW TRANSMISSION FOR ASSET #40,	2/11/14	4,880		X	3,497	5 HY 200DB	1,383	1,171
147	REFER UNIT	4/07/14	9,454		X	8,272	5 HY 200DB	1,182	2,269
148	REFER UNIT	4/07/14	8,684		X	7,598	5 HY 200DB	1,086	2,084
160	Lift Gate	7/09/14	4,475		X	3,580	5 HY 200DB	895	1,432
			<u>404,866</u>			<u>255,800</u>		<u>310,669</u>	<u>27,409</u>

Federal Asset Report

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
	Grand Totals		5,263,973			5,039,231		1,050,446	83,874
	Less: Dispositions and Transfers		136,255			101,419		136,255	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>5,127,718</u>			<u>4,937,812</u>		<u>914,191</u>	<u>83,874</u>

58-1938066

Federal Asset Report

FYE: 6/30/2016

FOOD HUB

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
<u>5-year GDS Property:</u>										
163	Bin Dumper	6/30/16	13,000		X	6,500	5	MQ200DB	0	6,825
164	Hopper Receiver	6/30/16	17,000		X	8,500	5	MQ200DB	0	8,925
166	Inspection/trim belt conveyor	6/30/16	10,500		X	5,250	5	MQ200DB	0	5,513
167	Hopper Receiver w/ elevating conveyor	6/30/16	6,800		X	3,400	5	MQ200DB	0	3,570
168	Urschel Model G Dicer	6/30/16	23,500		X	11,750	5	MQ200DB	0	12,338
169	Urschel Model OV slicer	6/30/16	21,500		X	10,750	5	MQ200DB	0	11,288
170	Hopper Receiver w/ elevating conveyor	6/30/16	6,800		X	3,400	5	MQ200DB	0	3,570
171	Vibrating fines remover	6/30/16	7,500		X	3,750	5	MQ200DB	0	3,938
172	Air Knife	6/30/16	4,000		X	2,000	5	MQ200DB	0	2,100
173	Hopper Receiver w/ elevating conveyor	6/30/16	6,800		X	3,400	5	MQ200DB	0	3,570
174	Lycy blancher/cooler combo	6/30/16	48,000		X	24,000	5	MQ200DB	0	25,200
175	Vibrating Dewatering Shaker	6/30/16	7,500		X	3,750	5	MQ200DB	0	3,938
176	Hopper Receiver w/ elevating conveyor	6/30/16	6,800		X	3,400	5	MQ200DB	0	3,570
177	Hopper Receiver w/ elevating conveyor	6/30/16	6,800		X	3,400	5	MQ200DB	0	3,570
178	Bagging Table	6/30/16	10,000		X	5,000	5	MQ200DB	0	5,250
179	Jaw Sealer	6/30/16	12,500		X	6,250	5	MQ200DB	0	6,563
180	Metal Detector	6/30/16	14,800		X	7,400	5	MQ200DB	0	7,770
181	Accumulation Disk/Table	6/30/16	4,500		X	2,250	5	MQ200DB	0	2,363
182	Hopper Receiver w/ elevating conveyor	6/30/16	7,000		X	3,500	5	MQ200DB	0	3,675
183	Dip Immersion Washer	6/30/16	11,000		X	5,500	5	MQ200DB	0	5,775
184	Spray Tank System	6/30/16	2,500		X	1,250	5	MQ200DB	0	1,313
185	Inspection Table	6/30/16	10,500		X	5,250	5	MQ200DB	0	5,513
186	Teaching Kitchen - Rabun County	2/22/16	97,007		X	48,504	5	MQ200DB	0	55,779
189	Insulation Van	2/10/16	26,976		X	13,488	5	MQ200DB	0	15,511
191	Dell PowerEdge Server	12/20/15	4,997		X	2,498	5	MQ200DB	0	3,123
193	HVAC IN OFFICE SPACE - RABUN	8/18/15	1,028		X	514	5	MQ200DB	0	694
200	PIPE & EQUIPMENT FOR IQF	1/13/16	70,000		X	35,000	5	MQ200DB	0	40,250
201	FABRICATION, MATERIALS, WELDING	2/05/16	18,918		X	9,459	5	MQ200DB	0	10,878
202	ENGINEERING COST FOR ASSEMBLY	4/13/16	11,003		X	5,501	5	MQ200DB	0	5,777
203	CONSTRUCTION MONITORING - ASSE	2/18/16	5,848		X	2,924	5	MQ200DB	0	3,363
			<u>495,077</u>			<u>247,538</u>			<u>0</u>	<u>271,512</u>
<u>Non-Residential Real Property:</u>										
119	Master Plan	6/30/16	56,094			56,094	39	MM S/L	0	60
140	Master Plan	6/30/16	4,339			4,339	39	MM S/L	0	5
154	IMPROVEMENTS TO CBSC	6/30/16	57,264			57,264	39	MM S/L	0	61
161	CBSC - RABUN FACILITY FOODBANK	12/12/15	352,136			352,136	39	MM S/L	0	4,891
			<u>469,833</u>			<u>469,833</u>			<u>0</u>	<u>5,017</u>
<u>Prior MACRS:</u>										
136	Rabun Walk-in Freezer	12/18/12	43,102		X	32,326	5	HY 200DB	10,776	12,930
150	CARRIER 7.5 TON HEAT PUMP	4/25/14	12,500			12,500	39	MM S/L	1,458	321
153	IMPROVEMENTS TO CBSC	6/30/14	99,301			99,301	39	MM S/L	2,483	2,546
			<u>154,903</u>			<u>144,127</u>			<u>14,717</u>	<u>15,797</u>
<u>Other Depreciation:</u>										
165	4-Roll Peeler/Washer	6/30/16	12,500			12,500	5	-- Memo	0	0
205	2 Computers - Rabun Co	1/06/16	2,147			2,147	5	MO S/L	0	215
	Total Other Depreciation		<u>14,647</u>			<u>14,647</u>			<u>0</u>	<u>215</u>
	Total ACRS and Other Depreciation		<u>14,647</u>			<u>14,647</u>			<u>0</u>	<u>215</u>
	Grand Totals		<u>1,134,460</u>			<u>876,145</u>			<u>14,717</u>	<u>292,541</u>
	Less: Dispositions and Transfers		<u>0</u>			<u>0</u>			<u>0</u>	<u>0</u>
	Less: Start-up/Org Expense		<u>0</u>			<u>0</u>			<u>0</u>	<u>0</u>
	Net Grand Totals		<u>1,134,460</u>			<u>876,145</u>			<u>14,717</u>	<u>292,541</u>

58-1938066

Federal Asset Report

FYE: 6/30/2016

RENTAL INCOME

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Non-Residential Real Property:									
192	Outside HVAC System - Bella's Restaurant	3/21/16	10,975			10,975	39 MMS/L	0	82
			<u>10,975</u>			<u>10,975</u>		<u>0</u>	<u>82</u>
Prior MACRS:									
149	CBSC - RABUN FACILITY RENTAL SPA	11/15/13	492,000			492,000	39 MMS/L	20,500	12,615
151	CARRIER 7.5 TON HEAT PUMP	4/25/14	12,500			12,500	39 MMS/L	1,458	321
193	IMPROVEMENTS TO CBSC-Rental	6/30/14	81,247			81,247	39 MMS/L	2,031	2,083
			<u>585,747</u>			<u>585,747</u>		<u>23,989</u>	<u>15,019</u>
Grand Totals			596,722			596,722		23,989	15,101
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>596,722</u>			<u>596,722</u>		<u>23,989</u>	<u>15,101</u>

58-1938066

GA Asset Report

FYE: 6/30/2016

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Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
Section 179 Expense:								
194	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666	N/A	0	0	1,666	1,666
195	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666	N/A	0	0	1,666	1,666
196	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666	N/A	0	0	1,666	1,666
197	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666	N/A	0	0	1,666	1,666
198	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666	N/A	0	0	1,666	1,666
199	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	1,666	N/A	0	0	1,666	1,666
			<u>9,996</u>	<u>N/A</u>	<u>0</u>	<u>0</u>	<u>9,996</u>	<u>9,996</u>
5-year GDS Property:								
194	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*	1,666	0	250	0	-250
195	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*	1,666	0	250	0	-250
196	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*	1,666	0	250	0	-250
197	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*	1,666	0	250	0	-250
198	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*	1,666	0	250	0	-250
199	WINDOWS 7 PRO DESKTOP COMPUTE	3/05/16	N/A*	1,666	0	250	0	-250
			<u>0</u>	<u>9,996</u>	<u>0</u>	<u>1,500</u>	<u>0</u>	<u>-1,500</u>
Prior MACRS:								
7	Loading Dock	3/13/98	12,000	12,000	5,320	308	0	-308
8	Concrete Platform	5/28/98	1,240	1,240	1,240	0	0	0
22	Reznor F-200 Gas Heater	3/28/00	1,970	1,970	1,970	0	0	0
23	DEKA Battery	4/03/00	2,397	2,397	2,397	0	0	0
24	Hobart Battery Charger	4/03/00	1,203	1,203	1,203	0	0	0
39	New Heater	12/03/02	1,271	1,271	1,271	0	0	0
45	3 Work Tables w/ backsplash	7/29/03	1,302	1,302	1,302	0	0	0
54	Freezer - Cornelia	6/23/05	13,462	13,462	13,462	0	0	0
56	Cooler	6/23/05	163,326	163,326	163,326	0	0	0
57	4'x4' Floor Scale	4/07/06	1,500	1,500	1,500	0	0	0
58	Vacuum Machine	5/01/06	4,160	4,160	4,160	0	0	0
65	Racking for Warehouses	2/01/07	2,325	2,325	2,325	0	0	0
78	A/C Unit	6/30/08	3,100	3,100	3,100	0	0	0
80	Floor Scale	6/10/08	1,500	1,500	1,500	0	0	0
86	Heavy Duty Hopper	8/13/08	1,276	1,276	1,276	0	0	0
92	Scales	2/23/10	6,834	6,834	6,834	0	0	0
93	Scales	6/23/10	1,950	1,950	1,950	0	0	0
94	Nissan Forklift	6/24/10	9,630	9,630	9,630	0	0	0
95	Forklift	6/30/10	4,500	4,500	4,500	0	0	0
96	Forklift	6/30/10	5,000	5,000	5,000	0	0	0
97	New Cooler	6/16/10	50,986	50,986	50,986	0	0	0
113	Compressor for Cooler	10/15/10	1,200	1,200	1,131	69	60	-9
114	Warranty on cooler	6/30/11	1,055	1,055	994	61	211	150
121	Fence	10/13/11	1,945	1,945	598	135	122	-13
123	Warehouse offices	3/07/12	3,963	3,963	335	101	102	1
124	Forklift	7/19/11	7,490	7,490	6,196	863	0	-863
125	Bread Slicer	3/27/12	2,479	2,479	2,051	285	1,115	830
126	Freezer and Coolers	9/02/11	3,143	3,143	2,600	362	0	-362
135	42"Riding Mower	5/21/13	3,170	3,170	2,257	366	1,003	637
137	New Telephone System	12/31/12	3,144	3,144	2,239	362	629	267
139	Computer-Tina	4/04/13	1,382	1,382	984	159	304	145
141	Kitchen Equipment	8/21/13	14,500	14,500	7,540	2,784	4,737	1,953
142	Compressor for Cooler	8/19/13	2,450	2,450	1,274	470	621	151
156	Floor cleaner/sweeper	7/01/14	4,708	4,708	942	1,506	1,506	0
157	Pallet Jack	7/01/14	2,390	2,390	478	765	765	0
158	SFSP Carts	6/01/15	4,535	4,535	907	1,451	1,783	332
159	2 Windows 7 Computers	4/01/15	2,330	2,330	466	746	885	139
162	Floor Scrubber	9/30/14	3,745	3,745	749	1,198	1,273	75
			<u>354,561</u>	<u>354,561</u>	<u>315,993</u>	<u>11,991</u>	<u>15,116</u>	<u>3,125</u>
Other Depreciation:								
4	Building for Freezer	10/31/97	32,633	32,633	14,595	826	826	0
5	Freezer Installation	11/21/97	1,107	1,107	1,107	0	0	0
	Sold/Scrapped: 6/30/16							
6	Freezer	11/05/97	41,888	41,888	41,888	0	0	0

*Because this asset has 179 expense, its cost has been included in the Section 179 Property cost total

58-1938066

GA Asset Report

FYE: 6/30/2016

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
15	Freezer Repairs	11/19/98	1,627	1,627	1,627	0	0	0
	Sold/Scrapped: 6/30/16							
17	Building	5/15/99	212,257	212,257	87,987	5,442	5,442	0
18	Land	5/15/99	149,205	149,205	0	0	0	0
38	Building-Capital Campaign	11/02/02	466,029	466,029	151,360	11,949	11,950	1
53	Vodavi Starplus STS Tel	4/25/05	3,095	3,095	3,095	0	0	0
60	Richard Boone Concrete Pad	7/28/06	1,550	1,550	350	39	40	1
62	Construction and New Conference	9/01/06	11,322	11,322	2,532	287	287	0
66	Network Server	2/01/07	2,416	2,416	2,416	0	0	0
68	Pimarius	4/01/07	11,500	11,500	11,500	0	0	0
70	Security Surveillance System	6/22/07	2,129	2,129	2,129	0	0	0
73	Warehouse Improvements	5/31/08	6,900	6,900	1,237	175	0	-175
75	New Door - improvements	6/13/08	5,000	5,000	897	126	0	-126
77	Warehouse Improvements	6/19/08	4,265	4,265	756	108	0	-108
79	Security System	7/12/07	2,498	2,498	2,498	0	0	0
81	Computer	4/13/08	1,188	1,188	1,188	0	0	0
82	Phone System	6/12/08	1,900	1,900	1,900	0	0	0
84	Parking Lot Improvements	6/30/09	2,850	2,850	1,140	190	190	0
88	Building Improvements	12/31/08	4,615	4,615	4,615	0	0	0
89	Racking	4/20/10	61,000	61,000	61,000	0	0	0
90	Warehouse Offices	5/17/10	25,008	25,008	8,475	1,667	1,667	0
99	CRS Hardware	9/30/09	10,011	10,011	10,011	0	0	0
102	Swipe Card System	12/17/09	3,360	3,360	3,360	0	0	0
	Sold/Scrapped: 6/30/16							
116	Metasoft Software	8/31/10	6,995	6,995	6,762	233	233	0
118	Loan costs	4/20/11	4,517	4,517	2,614	627	627	0
120	Building addition	9/14/11	1,200	1,200	118	31	31	0
130	Website	8/23/11	1,750	1,750	1,750	0	0	0
131	Website	10/25/11	2,599	2,599	2,599	0	0	0
132	Website	5/11/12	1,499	1,499	1,499	0	0	0
134	Garden Project	7/30/12	1,220	1,220	711	244	244	0
138	QuickBooks 2013	3/12/13	1,027	1,027	799	228	228	0
143	Server Software	3/04/14	1,386	1,386	616	462	462	0
152	Raybun - CBSC - LAND	11/15/13	708,000	708,000	0	0	0	0
155	LOAN ORIGATION COSTS	11/15/13	10,390	10,390	10,390	0	0	0
187	Building Improvements - Rabun County	7/01/15	2,662,262	2,662,262	0	0	0	0
188	Updated Website	4/13/16	11,700	11,700	0	975	975	0
190	QuickBooks 2016	4/28/16	1,444	1,444	0	80	80	0
204	Loan Cost - Rabun	7/21/15	13,208	13,208	0	8,071	8,071	0
	Total Other Depreciation		<u>4,494,550</u>	<u>4,494,550</u>	<u>445,521</u>	<u>31,760</u>	<u>31,353</u>	<u>-407</u>
	Total ACRS and Other Depreciation		<u>4,494,550</u>	<u>4,494,550</u>	<u>445,521</u>	<u>31,760</u>	<u>31,353</u>	<u>-407</u>
Listed Property:								
25	Crown Lift Truck	4/03/00	19,544	19,544	19,544	0	0	0
34	Akins Ford 2002	5/02/02	46,503	46,503	46,503	0	0	0
	Sold/Scrapped: 6/30/16							
40	Akins Ford 2003	3/14/03	48,428	48,428	48,428	0	0	0
83	Truck	2/29/08	43,000	43,000	43,000	0	0	0
87	Supra 650 A/C for Truck	6/30/09	16,500	16,500	16,500	0	0	0
110	Lift Gate	8/06/09	5,571	5,571	5,571	0	0	0
111	2004 IH Box Truck	8/21/09	41,770	41,770	41,770	0	0	0
	Sold/Scrapped: 6/30/16							
112	Maxon Lift Gate	3/23/10	5,500	5,500	5,500	0	0	0
117	Motor	7/21/10	3,330	3,330	3,138	192	56	-136
133	Truck	1/31/12	97,249	97,249	80,444	11,203	8,403	-2,800
144	2007 International 4300	8/08/13	24,989	24,989	12,994	4,798	5,997	1,199
145	2006 Internatlonal 4300	8/08/13	24,989	24,989	12,994	4,798	5,997	1,199
146	NEW TRANSMISSION FOR ASSET #40,	2/11/14	4,880	4,880	2,538	936	1,171	235
147	REFER UNIT	4/07/14	9,454	9,454	4,916	1,816	2,269	453
148	REFER UNIT	4/07/14	8,684	8,684	4,516	1,667	2,084	417
160	Lift Gate	7/09/14	4,475	4,475	895	1,432	1,432	0
			<u>404,866</u>	<u>404,866</u>	<u>349,251</u>	<u>26,842</u>	<u>27,409</u>	<u>567</u>

GA Asset Report**Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Basis for Depr</u>	<u>GA Prior</u>	<u>GA Current</u>	<u>Federal Current</u>	<u>Difference Fed - GA</u>
	Grand Totals		5,263,973	5,263,973	1,110,765	72,093	83,874	11,781
	Less: Dispositions		136,255	136,255	136,255	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>5,127,718</u>	<u>5,127,718</u>	<u>974,510</u>	<u>72,093</u>	<u>83,874</u>	<u>11,781</u>

58-1938066

GA Asset Report

FYE: 6/30/2016

FOOD HUB

Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
<u>5-year GDS Property:</u>								
163	Bin Dumper	6/30/16	13,000	13,000	0	650	6,825	6,175
164	Hopper Receiver	6/30/16	17,000	17,000	0	850	8,925	8,075
166	Inspection/trim belt conveyer	6/30/16	10,500	10,500	0	525	5,513	4,988
167	Hopper Receiver w/ elevating conveyer	6/30/16	6,800	6,800	0	340	3,570	3,230
168	Urschel Model G Dicer	6/30/16	23,500	23,500	0	1,175	12,338	11,163
169	Urschel Model OV slicer	6/30/16	21,500	21,500	0	1,075	11,288	10,213
170	Hopper Receiver w/ elevating conveyer	6/30/16	6,800	6,800	0	340	3,570	3,230
171	Vibrating fines remover	6/30/16	7,500	7,500	0	375	3,938	3,563
172	Air Knife	6/30/16	4,000	4,000	0	200	2,100	1,900
173	Hopper Receiver w/ elevating conveyer	6/30/16	6,800	6,800	0	340	3,570	3,230
174	Lycy blancher/cooler combo	6/30/16	48,000	48,000	0	2,400	25,200	22,800
175	Vibrating Dewatering Shaker	6/30/16	7,500	7,500	0	375	3,938	3,563
176	Hopper Receiver w/ elevating conveyer	6/30/16	6,800	6,800	0	340	3,570	3,230
177	Hopper Receiver w/ elevating conveyer	6/30/16	6,800	6,800	0	340	3,570	3,230
178	Bagging Table	6/30/16	10,000	10,000	0	500	5,250	4,750
179	Jaw Sealer	6/30/16	12,500	12,500	0	625	6,563	5,938
180	Metal Detector	6/30/16	14,800	14,800	0	740	7,770	7,030
181	Accumulation Disk/Table	6/30/16	4,500	4,500	0	225	2,363	2,138
182	Hopper Receiver w/ elevating conveyer	6/30/16	7,000	7,000	0	350	3,675	3,325
183	Dip Immersion Washer	6/30/16	11,000	11,000	0	550	5,775	5,225
184	Spray Tank System	6/30/16	2,500	2,500	0	125	1,313	1,188
185	Inspection Table	6/30/16	10,500	10,500	0	525	5,513	4,988
186	Teaching Kitchen - Rabun County	2/22/16	97,007	97,007	0	14,551	55,779	41,228
189	Insulation Van	2/10/16	26,976	26,976	0	4,046	15,511	11,465
191	Dell PowerEdge Server	12/20/15	4,997	4,997	0	1,249	3,123	1,874
193	HVAC IN OFFICE SPACE - RABUN	8/18/15	1,028	1,028	0	360	694	334
200	PIPE & EQUIPMENT FOR IQF	1/13/16	70,000	70,000	0	10,500	40,250	29,750
201	FABRICATION, MATERIALS, WELDING	2/05/16	18,918	18,918	0	2,838	10,878	8,040
202	ENGINEERING COST FOR ASSEMBLY	4/13/16	11,003	11,003	0	550	5,777	5,227
203	CONSTRUCTION MONITORING - ASSE	2/18/16	5,848	5,848	0	877	3,363	2,486
			<u>495,077</u>	<u>495,077</u>	<u>0</u>	<u>47,936</u>	<u>271,512</u>	<u>223,576</u>
<u>Non-Residential Real Property:</u>								
119	Master Plan	6/30/16	56,094	56,094	0	60	60	0
140	Master Plan	6/30/16	4,339	4,339	0	5	5	0
154	IMPROVEMENTS TO CBSC	6/30/16	57,264	57,264	0	61	61	0
161	CBSC - RABUN FACILITY FOODBANK	12/12/15	352,136	352,136	0	4,891	4,891	0
			<u>469,833</u>	<u>469,833</u>	<u>0</u>	<u>5,017</u>	<u>5,017</u>	<u>0</u>
<u>Prior MACRS:</u>								
136	Rabun Walk-in Freezer	12/18/12	43,102	43,102	30,689	4,965	12,930	7,965
150	CARRIER 7.5 TON HEAT PUMP	4/25/14	12,500	12,500	387	321	321	0
153	IMPROVEMENTS TO CBSC	6/30/14	99,301	99,301	2,652	2,546	2,546	0
			<u>154,903</u>	<u>154,903</u>	<u>33,728</u>	<u>7,832</u>	<u>15,797</u>	<u>7,965</u>
<u>Other Depreciation:</u>								
165	4-Roll Peeler/Washer	6/30/16	12,500	12,500	0	0	0	0
205	2 Computers - Rabun Co	1/06/16	2,147	2,147	0	215	215	0
	Total Other Depreciation		<u>14,647</u>	<u>14,647</u>	<u>0</u>	<u>215</u>	<u>215</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>14,647</u>	<u>14,647</u>	<u>0</u>	<u>215</u>	<u>215</u>	<u>0</u>
	Grand Totals		<u>1,134,460</u>	<u>1,134,460</u>	<u>33,728</u>	<u>61,000</u>	<u>292,541</u>	<u>231,541</u>
	Less: Dispositions		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	Less: Start-up/Org Expense		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	Net Grand Totals		<u>1,134,460</u>	<u>1,134,460</u>	<u>33,728</u>	<u>61,000</u>	<u>292,541</u>	<u>231,541</u>

58-1938066

GA Asset Report

FYE: 6/30/2016

RENTAL INCOME

Asset	Description	Date In Service	Cost	Basis for Depr	GA Prior	GA Current	Federal Current	Difference Fed - GA
<u>Non-Residential Real Property:</u>								
192	Outside HVAC System - Bella's Restaurant	3/21/16	10,975	10,975	0	82	82	0
			<u>10,975</u>	<u>10,975</u>	<u>0</u>	<u>82</u>	<u>82</u>	<u>0</u>
<u>Prior MACRS:</u>								
149	CBSC - RABUN FACILITY RENTAL SPA	11/15/13	492,000	492,000	20,500	12,615	12,615	0
151	CARRIER 7.5 TON HEAT PUMP	4/25/14	12,500	12,500	387	321	321	0
193	IMPROVEMENTS TO CBSC-Rental	6/30/14	81,247	81,247	2,170	2,083	2,083	0
			<u>585,747</u>	<u>585,747</u>	<u>23,057</u>	<u>15,019</u>	<u>15,019</u>	<u>0</u>
Grand Totals			596,722	596,722	23,057	15,101	15,101	0
Less: Dispositions			0	0	0	0	0	0
Less: Start-up/Org Expense			0	0	0	0	0	0
Net Grand Totals			<u>596,722</u>	<u>596,722</u>	<u>23,057</u>	<u>15,101</u>	<u>15,101</u>	<u>0</u>

58-1938066

Bonus Depreciation Report

FYE: 6/30/2016

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: Form 990, Page 1								
34	Akins Ford 2002	5/02/02	46,503	100	0	0	13,951	32,552
39	New Heater	12/03/02	1,271		0	0	381	890
40	Akins Ford 2003	3/14/03	48,428	100	0	0	14,528	33,900
45	3 Work Tables w/ backsplash	7/29/03	1,302		0	0	651	651
78	A/C Unit	6/30/08	3,100		0	0	1,550	1,550
80	Floor Scale	6/10/08	1,500		0	0	750	750
83	Truck	2/29/08	43,000	100	0	0	21,500	21,500
86	Heavy Duty Hopper	8/13/08	1,276		0	0	638	638
87	Supra 650 A/C for Truck	6/30/09	16,500	100	0	0	8,250	8,250
92	Scales	2/23/10	6,834		0	0	3,417	3,417
93	Scales	6/23/10	1,950		0	0	975	975
94	Nissan Forklift	6/24/10	9,630		0	0	4,815	4,815
95	Forklift	6/30/10	4,500		0	0	2,250	2,250
96	Forklift	6/30/10	5,000		0	0	2,500	2,500
97	New Cooler	6/16/10	50,986		0	0	25,493	25,493
110	Lift Gate	8/06/09	5,571	100	0	0	2,786	2,785
111	2004 IH Box Truck	8/21/09	41,770	100	0	0	20,885	20,885
112	Maxon Lift Gate	3/23/10	5,500	100	0	0	2,750	2,750
113	Compressor for Cooler	10/15/10	1,200		0	0	1,140	60
114	Warranty on cooler	6/30/11	1,055		0	0	844	211
117	Motor	7/21/10	3,330	100	0	0	1,665	1,665
121	Fence	10/13/11	1,945		0	0	729	1,216
124	Forklift	7/19/11	7,490		0	0	7,490	0
125	Bread Slicer	3/27/12	2,479		0	0	806	1,673
126	Freezer and Coolers	9/02/11	3,143		0	0	3,143	0
133	Truck	1/31/12	97,249	100	0	0	48,625	48,624
135	42"Riding Mower	5/21/13	3,170		0	0	661	2,509
137	New Telephone System	12/31/12	3,144		0	0	1,572	1,572
139	Computer-Tina	4/04/13	1,382		0	0	622	760
141	Kitchen Equipment	8/21/13	14,500		0	0	2,658	11,842
142	Compressor for Cooler	8/19/13	2,450		0	0	898	1,552
144	2007 International 4300	8/08/13	24,989	100	0	0	4,790	20,199
145	2006 Internatilonal 4300	8/08/13	24,989	100	0	0	4,790	20,199
146	NEW TRANSMISSION FOR ASSET #40, 20	2/11/14	4,880	100	0	0	1,383	3,497
147	REFER UNIT	4/07/14	9,454	100	0	0	1,182	8,272
148	REFER UNIT	4/07/14	8,684	100	0	0	1,086	7,598
156	Floor cleaner/sweeper	7/01/14	4,708		0	0	942	3,766
158	SFSP Carts	6/01/15	4,535		0	0	76	4,459
159	2 Windows 7 Computers	4/01/15	2,330		0	0	117	2,213
160	Lift Gate	7/09/14	4,475	100	0	0	895	3,580
162	Floor Scrubber	9/30/14	3,745		0	0	562	3,183
194	WINDOWS 7 PRO DESKTOP COMPUTER	3/05/16	1,666		1,666	0	0	0
195	WINDOWS 7 PRO DESKTOP COMPUTER	3/05/16	1,666		1,666	0	0	0
196	WINDOWS 7 PRO DESKTOP COMPUTER	3/05/16	1,666		1,666	0	0	0
197	WINDOWS 7 PRO DESKTOP COMPUTER	3/05/16	1,666		1,666	0	0	0
198	WINDOWS 7 PRO DESKTOP COMPUTER	3/05/16	1,666		1,666	0	0	0
199	WINDOWS 7 PRO DESKTOP COMPUTER	3/05/16	1,666		1,666	0	0	0
Form 990, Page 1			539,943		9,996	0	214,746	315,201
*Less: Dispositions and Transfers			88,273		0	0	34,836	53,437
Net Form 990, Page 1			451,670		9,996	0	179,910	261,764

58-1938066

Bonus Depreciation Report

FYE: 6/30/2016

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: FOOD HUB								
164	Hopper Receiver	6/30/16	17,000		0	8,500	0	8,500
136	Rabun Walk-in Freezer	12/18/12	43,102		0	0	10,776	32,326
163	Bin Dumper	6/30/16	13,000		0	6,500	0	6,500
166	Inspection/trim belt conveyor	6/30/16	10,500		0	5,250	0	5,250
167	Hopper Receiver w/ elevating conveyor	6/30/16	6,800		0	3,400	0	3,400
168	Urschel Model G Dicer	6/30/16	23,500		0	11,750	0	11,750
169	Urschel Model OV slicer	6/30/16	21,500		0	10,750	0	10,750
170	Hopper Receiver w/ elevating conveyor	6/30/16	6,800		0	3,400	0	3,400
171	Vibrating fines remover	6/30/16	7,500		0	3,750	0	3,750
172	Air Knife	6/30/16	4,000		0	2,000	0	2,000
173	Hopper Receiver w/ elevating conveyor	6/30/16	6,800		0	3,400	0	3,400
174	Lycy blancher/cooler combo	6/30/16	48,000		0	24,000	0	24,000
175	Vibrating Dewatering Shaker	6/30/16	7,500		0	3,750	0	3,750
176	Hopper Receiver w/ elevating conveyor	6/30/16	6,800		0	3,400	0	3,400
177	Hopper Receiver w/ elevating conveyor	6/30/16	6,800		0	3,400	0	3,400
178	Bagging Table	6/30/16	10,000		0	5,000	0	5,000
179	Jaw Sealer	6/30/16	12,500		0	6,250	0	6,250
180	Metal Detector	6/30/16	14,800		0	7,400	0	7,400
181	Accumulation Disk/Table	6/30/16	4,500		0	2,250	0	2,250
182	Hopper Receiver w/ elevating conveyor	6/30/16	7,000		0	3,500	0	3,500
183	Dip Immersion Washer	6/30/16	11,000		0	5,500	0	5,500
184	Spray Tank System	6/30/16	2,500		0	1,250	0	1,250
185	Inspection Table	6/30/16	10,500		0	5,250	0	5,250
186	Teaching Kitchen - Rabun County	2/22/16	97,007		0	48,503	0	48,504
189	Insulation Van	2/10/16	26,976	100	0	13,488	0	13,488
191	Dell PowerEdge Server	12/20/15	4,997		0	2,499	0	2,498
193	HVAC IN OFFICE SPACE - RABUN	8/18/15	1,028		0	514	0	514
200	PIPE & EQUIPMENT FOR IQF	1/13/16	70,000		0	35,000	0	35,000
201	FABRICATION, MATERIALS, WELDING ,	2/05/16	18,918		0	9,459	0	9,459
202	ENGINEERING COST FOR ASSEMBLY L	4/13/16	11,003		0	5,502	0	5,501
203	CONSTRUCTION MONITORING - ASSEM	2/18/16	5,848		0	2,924	0	2,924
	FOOD HUB		<u>538,179</u>		<u>0</u>	<u>247,539</u>	<u>10,776</u>	<u>279,864</u>
	Grand Total		<u>1,078,122</u>		<u>9,996</u>	<u>247,539</u>	<u>225,522</u>	<u>595,065</u>
	Less: Dispositions and Transfers		<u>88,273</u>		<u>0</u>	<u>0</u>	<u>34,836</u>	<u>53,437</u>
	Net Grand Total		<u>989,849</u>		<u>9,996</u>	<u>247,539</u>	<u>190,686</u>	<u>541,628</u>

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
There are no assets that meet the criteria of this report						

58-1938066

Future Depreciation Report**FYE: 6/30/17**

FYE: 6/30/2016

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<u>Prior MACRS:</u>					
7	Loading Dock	3/13/98	12,000	0	0
8	Concrete Platform	5/28/98	1,240	0	0
22	Reznor F-200 Gas Heater	3/28/00	1,970	0	0
23	DEKA Battery	4/03/00	2,397	0	0
24	Hobart Battery Charger	4/03/00	1,203	0	0
39	New Heater	12/03/02	1,271	0	0
45	3 Work Tables w/ backsplash	7/29/03	1,302	0	0
54	Freezer - Cornelia	6/23/05	13,462	0	0
56	Cooler	6/23/05	163,326	0	0
57	4'x4' Floor Scale	4/07/06	1,500	0	0
58	Vacuum Machine	5/01/06	4,160	0	0
65	Racking for Warehouses	2/01/07	2,325	0	0
78	A/C Unit	6/30/08	3,100	0	0
80	Floor Scale	6/10/08	1,500	0	0
86	Heavy Duty Hopper	8/13/08	1,276	0	0
92	Scales	2/23/10	6,834	0	0
93	Scales	6/23/10	1,950	0	0
94	Nissan Forklift	6/24/10	9,630	0	0
95	Forklift	6/30/10	4,500	0	0
96	Forklift	6/30/10	5,000	0	0
97	New Cooler	6/16/10	50,986	0	0
113	Compressor for Cooler	10/15/10	1,200	0	0
114	Warranty on cooler	6/30/11	1,055	0	0
121	Fence	10/13/11	1,945	109	0
123	Warehouse offices	3/07/12	3,963	101	0
124	Forklift	7/19/11	7,490	0	0
125	Bread Slicer	3/27/12	2,479	558	0
126	Freezer and Coolers	9/02/11	3,143	0	0
135	42"Riding Mower	5/21/13	3,170	1,004	0
137	New Telephone System	12/31/12	3,144	629	0
139	Computer-Tina	4/04/13	1,382	304	0
141	Kitchen Equipment	8/21/13	14,500	2,842	0
142	Compressor for Cooler	8/19/13	2,450	372	0
156	Floor cleaner/sweeper	7/01/14	4,708	904	0
157	Pallet Jack	7/01/14	2,390	459	0
158	SFSP Carts	6/01/15	4,535	1,070	0
159	2 Windows 7 Computers	4/01/15	2,330	531	0
162	Floor Scrubber	9/30/14	3,745	764	0
194	WINDOWS 7 PRO DESKTOP COMPUTER (1)	3/05/16	1,666	0	0
195	WINDOWS 7 PRO DESKTOP COMPUTER (2)	3/05/16	1,666	0	0
196	WINDOWS 7 PRO DESKTOP COMPUTER (3)	3/05/16	1,666	0	0
197	WINDOWS 7 PRO DESKTOP COMPUTER (4)	3/05/16	1,666	0	0
198	WINDOWS 7 PRO DESKTOP COMPUTER (5)	3/05/16	1,666	0	0
199	WINDOWS 7 PRO DESKTOP COMPUTER (6)	3/05/16	1,666	0	0
			<u>364,557</u>	<u>9,647</u>	<u>0</u>

Other Depreciation:

4	Building for Freezer	10/31/97	32,633	826	0
17	Building	5/15/99	212,257	5,443	0
18	Land	5/15/99	149,205	0	0
38	Building-Capital Campaign	11/02/02	466,029	11,949	0
53	Vodavi Starplus STS Tel	4/25/05	3,095	0	0
60	Richard Boone Concrete Pad	7/28/06	1,550	39	0
62	Construction and New Conference	9/01/06	11,322	287	0
66	Network Server	2/01/07	2,416	0	0
68	Pimarius	4/01/07	11,500	0	0
70	Security Surveillance System	6/22/07	2,129	0	0
73	Warehouse Improvements	5/31/08	6,900	0	0
75	New Door - improvements	6/13/08	5,000	0	0
77	Warehouse Improvements	6/19/08	4,265	0	0
79	Security System	7/12/07	2,498	0	0
81	Computer	4/13/08	1,188	0	0
82	Phone System	6/12/08	1,900	0	0
84	Parking Lot Improvements	6/30/09	2,850	190	0

58-1938066

Future Depreciation Report**FYE: 6/30/17**

FYE: 6/30/2016

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
88	Building Improvements	12/31/08	4,615	0	0
89	Racking	4/20/10	61,000	0	0
90	Warehouse Offices	5/17/10	25,008	1,668	0
99	CRS Hardware	9/30/09	10,011	0	0
116	Metasoft Software	8/31/10	6,995	0	0
118	Loan costs	4/20/11	4,517	627	0
120	Building addition	9/14/11	1,200	30	0
130	Website	8/23/11	1,750	0	0
131	Website	10/25/11	2,599	0	0
132	Website	5/11/12	1,499	0	0
134	Garden Project	7/30/12	1,220	244	0
138	QuickBooks 2013	3/12/13	1,027	0	0
143	Server Software	3/04/14	1,386	308	0
152	Raybun - CBSC - LAND	11/15/13	708,000	0	0
155	LOAN ORIGINATION COSTS	11/15/13	10,390	0	0
187	Building Improvements - Rabun County	7/01/15	2,662,262	0	0
188	Updated Website	4/13/16	11,700	3,900	0
190	QuickBooks 2016	4/28/16	1,444	482	0
204	Loan Cost - Rabun	7/21/15	13,208	5,137	0
Total Other Depreciation			4,446,568	31,130	0
Total ACRS and Other Depreciation			4,446,568	31,130	0
Listed Property:					
25	Crown Lift Truck	4/03/00	19,544	0	0
40	Akins Ford 2003	3/14/03	48,428	0	0
83	Truck	2/29/08	43,000	0	0
87	Supra 650 A/C for Truck	6/30/09	16,500	0	0
110	Lift Gate	8/06/09	5,571	0	0
112	Maxon Lift Gate	3/23/10	5,500	0	0
117	Motor	7/21/10	3,330	0	0
133	Truck	1/31/12	97,249	2,801	0
144	2007 International 4300	8/08/13	24,989	3,598	0
145	2006 Internatilonal 4300	8/08/13	24,989	3,598	0
146	NEW TRANSMISSION FOR ASSET #40, 2003	2/11/14	4,880	702	0
147	REFER UNIT	4/07/14	9,454	1,361	0
148	REFER UNIT	4/07/14	8,684	1,250	0
160	Lift Gate	7/09/14	4,475	859	0
			316,593	14,169	0
Grand Totals			5,127,718	54,946	0

58-1938066

Future Depreciation Report**FYE: 6/30/17**

FYE: 6/30/2016

FOOD HUB

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
Prior MACRS:					
119	Master Plan	6/30/16	56,094	1,438	0
136	Rabun Walk-in Freezer	12/18/12	43,102	12,931	0
140	Master Plan	6/30/16	4,339	111	0
150	CARRIER 7.5 TON HEAT PUMP	4/25/14	12,500	320	0
153	IMPROVEMENTS TO CBSC	6/30/14	99,301	2,546	0
154	IMPROVEMENTS TO CBSC	6/30/16	57,264	1,468	0
161	CBSC - RABUN FACILITY FOODBANK SPA	12/12/15	352,136	9,029	0
163	Bin Dumper	6/30/16	13,000	2,470	0
164	Hopper Receiver	6/30/16	17,000	3,230	0
166	Inspection/trim belt conveyor	6/30/16	10,500	1,995	0
167	Hopper Receiver w/ elevating conveyor	6/30/16	6,800	1,292	0
168	Urschel Model G Dicer	6/30/16	23,500	4,465	0
169	Urschel Model OV slicer	6/30/16	21,500	4,085	0
170	Hopper Receiver w/ elevating conveyor	6/30/16	6,800	1,292	0
171	Vibrating fines remover	6/30/16	7,500	1,425	0
172	Air Knife	6/30/16	4,000	760	0
173	Hopper Receiver w/ elevating conveyor	6/30/16	6,800	1,292	0
174	Lycoblancher/cooler combo	6/30/16	48,000	9,120	0
175	Vibrating Dewatering Shaker	6/30/16	7,500	1,425	0
176	Hopper Receiver w/ elevating conveyor	6/30/16	6,800	1,292	0
177	Hopper Receiver w/ elevating conveyor	6/30/16	6,800	1,292	0
178	Bagging Table	6/30/16	10,000	1,900	0
179	Jaw Sealer	6/30/16	12,500	2,375	0
180	Metal Detector	6/30/16	14,800	2,812	0
181	Accumulation Disk/Table	6/30/16	4,500	855	0
182	Hopper Receiver w/ elevating conveyor	6/30/16	7,000	1,330	0
183	Dip Immersion Washer	6/30/16	11,000	2,090	0
184	Spray Tank System	6/30/16	2,500	475	0
185	Inspection Table	6/30/16	10,500	1,995	0
186	Teaching Kitchen - Rabun County	2/22/16	97,007	16,491	0
189	Insulation Van	2/10/16	26,976	4,586	0
191	Dell PowerEdge Server	12/20/15	4,997	750	0
193	HVAC IN OFFICE SPACE - RABUN	8/18/15	1,028	133	0
200	PIPE & EQUIPMENT FOR IQF	1/13/16	70,000	11,900	0
201	FABRICATION, MATERIALS, WELDING & I	2/05/16	18,918	3,216	0
202	ENGINEERING COST FOR ASSEMBLY LINE	4/13/16	11,003	2,090	0
203	CONSTRUCTION MONITORING - ASSEMBL	2/18/16	5,848	994	0
			<u>1,119,813</u>	<u>117,270</u>	<u>0</u>
Other Depreciation:					
165	4-Roll Peeler/Washer	6/30/16	12,500	0	0
205	2 Computers - Rabun Co	1/06/16	2,147	429	0
	Total Other Depreciation		<u>14,647</u>	<u>429</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>14,647</u>	<u>429</u>	<u>0</u>
	Grand Totals		<u>1,134,460</u>	<u>117,699</u>	<u>0</u>

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Future Depreciation Report FYE: 6/30/17

FYE: 6/30/2016

RENTAL INCOME

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<u>Prior MACRS:</u>					
149	CBSC - RABUN FACILITY RENTAL SPACE	11/15/13	492,000	12,616	0
151	CARRIER 7.5 TON HEAT PUMP	4/25/14	12,500	320	0
192	Outside HVAC System - Bella's Restaurant	3/21/16	10,975	281	0
193	IMPROVEMENTS TO CBSC-Rental	6/30/14	81,247	2,084	0
			<u>596,722</u>	<u>15,301</u>	<u>0</u>
	Grand Totals		<u>596,722</u>	<u>15,301</u>	<u>0</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>GA</u>
<u>Prior MACRS:</u>				
7	Loading Dock	3/13/98	12,000	308
8	Concrete Platform	5/28/98	1,240	0
22	Reznor F-200 Gas Heater	3/28/00	1,970	0
23	DEKA Battery	4/03/00	2,397	0
24	Hobart Battery Charger	4/03/00	1,203	0
39	New Heater	12/03/02	1,271	0
45	3 Work Tables w/ backsplash	7/29/03	1,302	0
54	Freezer - Cornelia	6/23/05	13,462	0
56	Cooler	6/23/05	163,326	0
57	4'x4' Floor Scale	4/07/06	1,500	0
58	Vacuum Machine	5/01/06	4,160	0
65	Racking for Warehouses	2/01/07	2,325	0
78	A/C Unit	6/30/08	3,100	0
80	Floor Scale	6/10/08	1,500	0
86	Heavy Duty Hopper	8/13/08	1,276	0
92	Scales	2/23/10	6,834	0
93	Scales	6/23/10	1,950	0
94	Nissan Forklift	6/24/10	9,630	0
95	Forklift	6/30/10	4,500	0
96	Forklift	6/30/10	5,000	0
97	New Cooler	6/16/10	50,986	0
113	Compressor for Cooler	10/15/10	1,200	0
114	Warranty on cooler	6/30/11	1,055	0
121	Fence	10/13/11	1,945	121
123	Warehouse offices	3/07/12	3,963	102
124	Forklift	7/19/11	7,490	431
125	Bread Slicer	3/27/12	2,479	143
126	Freezer and Coolers	9/02/11	3,143	181
135	42"Riding Mower	5/21/13	3,170	365
137	New Telephone System	12/31/12	3,144	362
139	Computer-Tina	4/04/13	1,382	159
141	Kitchen Equipment	8/21/13	14,500	1,670
142	Compressor for Cooler	8/19/13	2,450	283
156	Floor cleaner/sweeper	7/01/14	4,708	904
157	Pallet Jack	7/01/14	2,390	459
158	SFSP Carts	6/01/15	4,535	871
159	2 Windows 7 Computers	4/01/15	2,330	447
162	Floor Scrubber	9/30/14	3,745	719
194	WINDOWS 7 PRO DESKTOP COMPUTER (1)	3/05/16	1,666	566
195	WINDOWS 7 PRO DESKTOP COMPUTER (2)	3/05/16	1,666	566
196	WINDOWS 7 PRO DESKTOP COMPUTER (3)	3/05/16	1,666	566
197	WINDOWS 7 PRO DESKTOP COMPUTER (4)	3/05/16	1,666	566
198	WINDOWS 7 PRO DESKTOP COMPUTER (5)	3/05/16	1,666	566
199	WINDOWS 7 PRO DESKTOP COMPUTER (6)	3/05/16	1,666	566
			<u>364,557</u>	<u>10,921</u>

Other Depreciation:

4	Building for Freezer	10/31/97	32,633	827
17	Building	5/15/99	212,257	5,443
18	Land	5/15/99	149,205	0
38	Building-Capital Campaign	11/02/02	466,029	11,950
53	Vodavi Starplus STS Tel	4/25/05	3,095	0
60	Richard Boone Concrete Pad	7/28/06	1,550	39
62	Construction and New Conference	9/01/06	11,322	286
66	Network Server	2/01/07	2,416	0
68	Pimarius	4/01/07	11,500	0
70	Security Surveillance System	6/22/07	2,129	0
73	Warehouse Improvements	5/31/08	6,900	175
75	New Door - improvements	6/13/08	5,000	127
77	Warehouse Improvements	6/19/08	4,265	108
79	Security System	7/12/07	2,498	0
81	Computer	4/13/08	1,188	0
82	Phone System	6/12/08	1,900	0
84	Parking Lot Improvements	6/30/09	2,850	190

58-1938066

GA Future Depreciation Report**FYE: 6/30/17**

FYE: 6/30/2016

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>GA</u>
88	Building Improvements	12/31/08	4,615	0
89	Racking	4/20/10	61,000	0
90	Warehouse Offices	5/17/10	25,008	1,668
99	CRS Hardware	9/30/09	10,011	0
116	Metasoft Software	8/31/10	6,995	0
118	Loan costs	4/20/11	4,517	627
120	Building addition	9/14/11	1,200	30
130	Website	8/23/11	1,750	0
131	Website	10/25/11	2,599	0
132	Website	5/11/12	1,499	0
134	Garden Project	7/30/12	1,220	244
138	QuickBooks 2013	3/12/13	1,027	0
143	Server Software	3/04/14	1,386	308
152	Raybun - CBSC - LAND	11/15/13	708,000	0
155	LOAN ORIGINATION COSTS	11/15/13	10,390	0
187	Building Improvements - Rabun County	7/01/15	2,662,262	0
188	Updated Website	4/13/16	11,700	3,900
190	QuickBooks 2016	4/28/16	1,444	482
204	Loan Cost - Rabun	7/21/15	13,208	5,137
Total Other Depreciation			4,446,568	31,541
Total ACRS and Other Depreciation			4,446,568	31,541
Listed Property:				
25	Crown Lift Truck	4/03/00	19,544	0
40	Akins Ford 2003	3/14/03	48,428	0
83	Truck	2/29/08	43,000	0
87	Supra 650 A/C for Truck	6/30/09	16,500	0
110	Lift Gate	8/06/09	5,571	0
112	Maxon Lift Gate	3/23/10	5,500	0
117	Motor	7/21/10	3,330	0
133	Truck	1/31/12	97,249	5,602
144	2007 International 4300	8/08/13	24,989	2,879
145	2006 Internatilonal 4300	8/08/13	24,989	2,879
146	NEW TRANSMISSION FOR ASSET #40, 2003	2/11/14	4,880	563
147	REFER UNIT	4/07/14	9,454	1,089
148	REFER UNIT	4/07/14	8,684	1,000
160	Lift Gate	7/09/14	4,475	859
			316,593	14,871
Grand Totals			5,127,718	57,333

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>GA</u>
<u>Prior MACRS:</u>				
119	Master Plan	6/30/16	56,094	1,438
136	Rabun Walk-in Freezer	12/18/12	43,102	4,965
140	Master Plan	6/30/16	4,339	111
150	CARRIER 7.5 TON HEAT PUMP	4/25/14	12,500	320
153	IMPROVEMENTS TO CBSC	6/30/14	99,301	2,547
154	IMPROVEMENTS TO CBSC	6/30/16	57,264	1,468
161	CBSC - RABUN FACILITY FOODBANK SPA	12/12/15	352,136	9,029
163	Bin Dumper	6/30/16	13,000	4,940
164	Hopper Receiver	6/30/16	17,000	6,460
166	Inspection/trim belt conveyor	6/30/16	10,500	3,990
167	Hopper Receiver w/ elevating conveyor	6/30/16	6,800	2,584
168	Urschel Model G Dicer	6/30/16	23,500	8,930
169	Urschel Model OV slicer	6/30/16	21,500	8,170
170	Hopper Receiver w/ elevating conveyor	6/30/16	6,800	2,584
171	Vibrating fines remover	6/30/16	7,500	2,850
172	Air Knife	6/30/16	4,000	1,520
173	Hopper Receiver w/ elevating conveyor	6/30/16	6,800	2,584
174	Lycy blancher/cooler combo	6/30/16	48,000	18,240
175	Vibrating Dewatering Shaker	6/30/16	7,500	2,850
176	Hopper Receiver w/ elevating conveyor	6/30/16	6,800	2,584
177	Hopper Receiver w/ elevating conveyor	6/30/16	6,800	2,584
178	Bagging Table	6/30/16	10,000	3,800
179	Jaw Sealer	6/30/16	12,500	4,750
180	Metal Detector	6/30/16	14,800	5,624
181	Accumulation Disk/Table	6/30/16	4,500	1,710
182	Hopper Receiver w/ elevating conveyor	6/30/16	7,000	2,660
183	Dip Immersion Washer	6/30/16	11,000	4,180
184	Spray Tank System	6/30/16	2,500	950
185	Inspection Table	6/30/16	10,500	3,990
186	Teaching Kitchen - Rabun County	2/22/16	97,007	32,982
189	Insulation Van	2/10/16	26,976	9,172
191	Dell PowerEdge Server	12/20/15	4,997	1,500
193	HVAC IN OFFICE SPACE - RABUN	8/18/15	1,028	267
200	PIPE & EQUIPMENT FOR IQF	1/13/16	70,000	23,800
201	FABRICATION, MATERIALS, WELDING & I	2/05/16	18,918	6,432
202	ENGINEERING COST FOR ASSEMBLY LINE	4/13/16	11,003	4,181
203	CONSTRUCTION MONITORING - ASSEMBL	2/18/16	5,848	1,989
			<u>1,119,813</u>	<u>198,735</u>
<u>Other Depreciation:</u>				
165	4-Roll Peeler/Washer	6/30/16	12,500	0
205	2 Computers - Rabun Co	1/06/16	2,147	429
	Total Other Depreciation		<u>14,647</u>	<u>429</u>
	Total ACRS and Other Depreciation		<u>14,647</u>	<u>429</u>
	Grand Totals		<u>1,134,460</u>	<u>199,164</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>GA</u>
<u>Prior MACRS:</u>				
149	CBSC - RABUN FACILITY RENTAL SPACE	11/15/13	492,000	12,616
151	CARRIER 7.5 TON HEAT PUMP	4/25/14	12,500	320
192	Outside HVAC System - Bella's Restaurant	3/21/16	10,975	281
193	IMPROVEMENTS TO CBSC-Rental	6/30/14	81,247	2,084
			<u>596,722</u>	<u>15,301</u>
	Grand Totals		<u>596,722</u>	<u>15,301</u>

SCHEDULE G (Form 990 or 990-EZ)	Fundraising Other Events	2015
	For calendar year 2015, or tax year beginning 07/01/15 , and ending 06/30/16	

Name FOOD BANK OF NORTHEAST GEORGIA INC.	Employer Identification Number 58-1938066
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		(a) Other event	(b) Other event	(c) Other event	(d) Total other events
		<u>THANKSGIVING AP</u> <small>(event type)</small>	<u>SPRING APPEAL</u> <small>(event type)</small>	<u>HUNGER BOWL</u> <small>(event type)</small>	<small>(add col. (a) through col. (c))</small>
Revenue	1 Gross receipts	103,853	55,615	48,732	291,122
	2 Less: Charitable contributions	103,853	55,615	48,732	255,860
	3 Gross income <small>(line 1 minus line 2)</small>				35,262
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food/beverages				
	8 Entertainment				
	9 Other expenses	24,180	12,213	214	51,317

SCHEDULE G (Form 990 or 990-EZ)	Fundraising Other Events	2015
	For calendar year 2015, or tax year beginning 07/01/15 , and ending 06/30/16	

Name FOOD BANK OF NORTHEAST GEORGIA INC.	Employer Identification Number 58-1938066
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		(a) Other event <u>SUMMER APPEAL</u> <small>(event type)</small>	(b) Other event <u>WILL ROCK FOR F</u> <small>(event type)</small>	(c) Other event <u>EMPTY BOWL</u> <small>(event type)</small>	(d) Total other events <small>(add col. (a) through col. (c))</small>
Revenue	1 Gross receipts	41,262	25,497	9,765	
	2 Less: Charitable contributions	41,262			
	3 Gross income <small>(line 1 minus line 2)</small>		25,497	9,765	
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food/beverages				
	8 Entertainment				
	9 Other expenses	6,015	2,689	5,076	

SCHEDULE G (Form 990 or 990-EZ)	Fundraising Other Events	2015
	For calendar year 2015, or tax year beginning 07/01/15 , and ending 06/30/16	

Name FOOD BANK OF NORTHEAST GEORGIA INC.	Employer Identification Number 58-1938066
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		(a) Other event <u>LEGAL FOOD FREN</u> <small>(event type)</small>	(b) Other event <hr/> <small>(event type)</small>	(c) Other event <hr/> <small>(event type)</small>	(d) Total other events <small>(add col. (a) through col. (c))</small>
Revenue	1 Gross receipts	6,398			
	2 Less: Charitable contributions	6,398			
	3 Gross income <small>(line 1 minus line 2)</small>				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food/beverages				
	8 Entertainment				
	9 Other expenses	930			

Net Operating Loss Carryover Worksheet

Form **990-T**

2015

For calendar year 2015, or tax year beginning **07/01/15**, ending **06/30/16**

Name

**FOOD BANK OF NORTHEAST GEORGIA
INC.**

Employer Identification Number
58-1938066

Preceding Taxable Year	Prior Year			Current Year	Next Year Carryover
	Adj. To NOL Inc/(Loss) After Adj.	NOL Utilized (Income Offset)	Carryovers to Current Year	Income Offset By NOL Carryback / Carryover Utilized	
18th 06/30/98					
17th 06/30/99					
16th 06/30/00					
15th 06/30/01					
14th 06/30/02					
13th 06/30/03					
12th 06/30/04					
11th 06/30/05					
10th 06/30/06					
9th 06/30/07					
8th 06/30/08					
7th 06/30/09					
6th 06/30/10					
5th 06/30/11					
4th 06/30/12					
3rd 06/30/13					
2nd 06/30/14	196				
1st 06/30/15	20,590				
NOL carryover available to current year			0		
Current year	-470,834				470,834
NOL carryover available to next year					470,834

Form 990	Two Year Comparison Report	2014 & 2015
For calendar year 2015, or tax year beginning 07/01/15 , ending 06/30/16		

Name **FOOD BANK OF NORTHEAST GEORGIA INC.** Taxpayer Identification Number **58-1938066**

		2014	2015	Differences
Revenue	1. Contributions, gifts, grants	21,834,460	21,155,206	-679,254
	2. Membership dues and assessments			
	3. Government contributions and grants			
	4. Program service revenue	1,299,593	1,364,757	65,164
	5. Investment income	3,672	1,881	-1,791
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory			
	8. Net income or (loss) from fundraising events	-84,097	-77,752	6,345
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory			
	11. Other revenue	71,084	12,692	-58,392
	12. Total revenue. Add lines 1 through 11	23,124,712	22,456,784	-667,928
Expenses	13. Grants and similar amounts paid			
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	95,550	86,252	-9,298
	16. Salaries, other compensation, and employee benefits	1,136,980	1,299,472	162,492
	17. Professional fundraising fees			
	18. Other professional fees	129,044	108,238	-20,806
	19. Occupancy, rent, utilities, and maintenance	125,518	167,245	41,727
	20. Depreciation and Depletion	121,519	376,415	254,896
	21. Other expenses	21,431,532	19,339,575	-2,091,957
	22. Total expenses. Add lines 13 through 21	23,040,143	21,377,197	-1,662,946
	23. Excess or (Deficit). Subtract line 22 from line 12	84,569	1,079,587	995,018
Other Information	24. Total exempt revenue	23,124,712	22,456,784	-667,928
	25. Total unrelated revenue	57,857	-3,678	-61,535
	26. Total excludable revenue	1,232,395	1,305,256	72,861
	27. Total assets	5,964,521	8,648,690	2,684,169
	28. Total liabilities	1,334,440	2,693,844	1,359,404
	29. Retained earnings	4,630,081	5,954,846	1,324,765
	30. Number of voting members of governing body	18	18	
	31. Number of independent voting members of governing body	18	18	
	32. Number of employees	41	60	
	33. Number of volunteers	2192	2428	

Form 990T		Two Year Comparison Report		2014 & 2015	
Name		For calendar year 2015, or tax year beginning 07/01/15 , ending 06/30/16		Taxpayer Identification Number	
FOOD BANK OF NORTHEAST GEORGIA INC.				58-1938066	
		2014	2015	Differences	
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rental income (net of expense)	4.			
	5. Unrelated debt-financed income (net of expense)	5.	57,857	-3,678	-61,535
	6. Interest, and other income from controlled organizations (net of expense)	6.			
	7. Investment income of specific organizations (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.			
	10. Other income	10.			
	11. Total trade or business income. Combine lines 1 through 10	11.	57,857	-3,678	-61,535
Expenses	12. Compensation of officers, directors, and trustees	12.	9,360	-9,360	
	13. Other salaries and wages	13.	7,889	106,537	98,648
	14. Repairs and maintenance	14.		1,753	1,753
	15. Bad debts	15.			
	16. Interest	16.		10,460	10,460
	17. Taxes and licenses	17.		8,265	8,265
	18. Charitable contributions	18.			
	19. Depreciation and Depletion	19.		292,541	292,541
	20. Contributions to deferred compensation plans	20.		1,559	1,559
	21. Employee benefit programs	21.		7,848	7,848
	22. Other deductions	22.	20,018	38,193	18,175
	23. Total deductions. Add lines 12 through 22	23.	37,267	467,156	429,889
	24. Taxable income before NOL. Subtract line 23 from 11	24.	20,590	-470,834	-491,424
	25. Net operating loss deduction	25.			
	26. Specific deduction	26.	1,000		-1,000
	27. Unrelated business taxable income.	27.	19,590	-470,834	-490,424
	Tax & Credits	28. Income tax (corporate or trust)	28.	2,939	-2,939
29. Proxy tax		29.			
30. Alternative minimum tax		30.			
31. Total taxes		31.	2,939		-2,939
32. Other credits		32.			
33. General business credit		33.			
34. Credit for prior year minimum tax		34.			
35. Total credits		35.			
36. Net tax after credits		36.	2,939		-2,939
37. Recapture taxes		37.			
38. Total Taxes	38.	2,939		-2,939	
Due/Refund	39. Prior year overpayment and estimated tax payments	39.			
	40. Payment made with extension	40.			
	41. Backup withholding and foreign withholding	41.			
	42. Other payments	42.			
	43. Total payments	43.			
	44. Balance due/(Overpayment)	44.	2,939		-2,939
	45. Overpayment applied to next year	45.			
	46. Penalties	46.			
	47. Total due/(Refund)	47.	2,939		-2,939

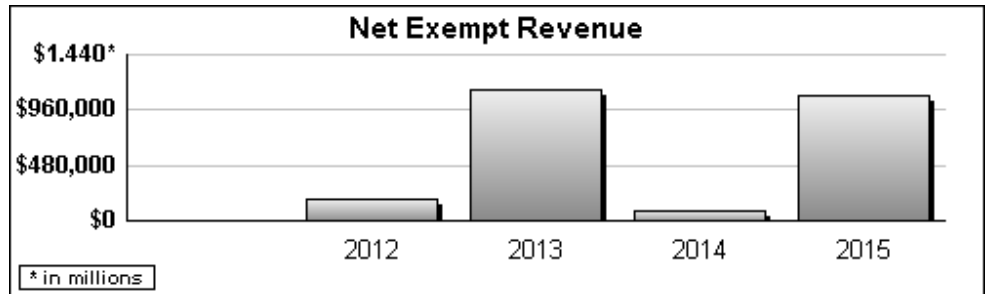
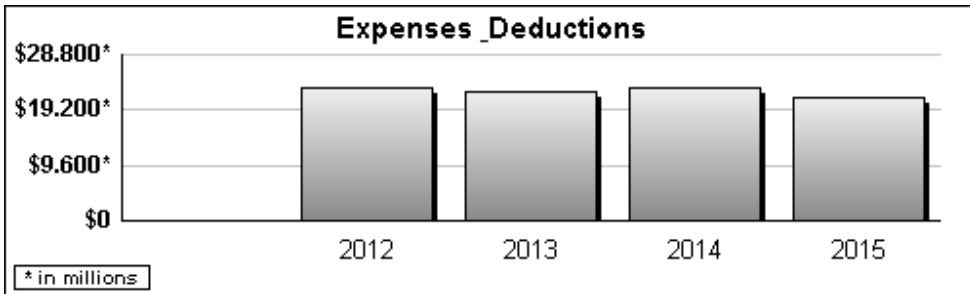
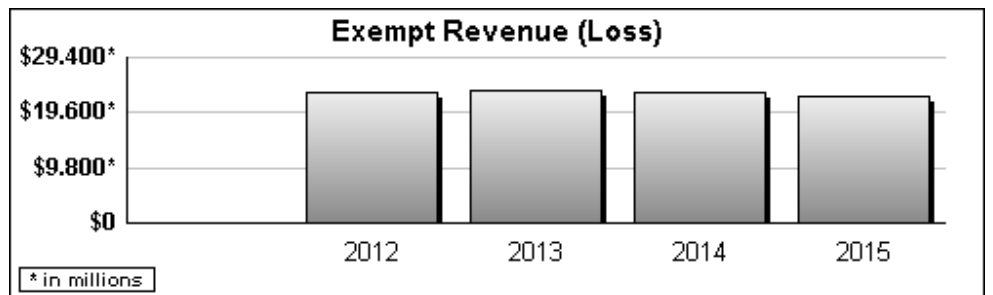
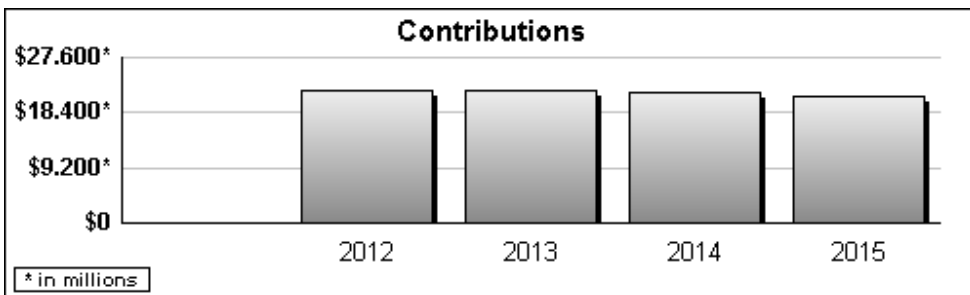
Form 990	Tax Return History	2015
Name FOOD BANK OF NORTHEAST GEORGIA INC.		Employer Identification Number 58-1938066

	2011	2012	2013	2014	2015	2016
Contributions, gifts, grants		21,941,755	22,103,336	21,834,460	21,155,206	
Membership dues						
Program service revenue		1,228,163	1,375,289	1,299,593	1,364,757	
Capital gain or loss						
Investment income		310	1,536	3,672	1,881	
Fundraising revenue (income/loss)		-72,785	-76,162	-84,097	-77,752	
Gaming revenue (income/loss)						
Other revenue		7,473	58,310	71,084	12,692	
Total revenue		23,104,916	23,462,309	23,124,712	22,456,784	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.		82,000	90,250	95,550	86,252	
Other compensation		796,968	892,972	1,136,980	1,299,472	
Professional fees			211,425	129,044	108,238	
Occupancy costs		127,092	103,710	125,518	167,245	
Depreciation and depletion		126,648	124,124	121,519	376,415	
Other expenses		21,782,372	20,901,853	21,431,532	19,339,575	
Total expenses		22,915,080	22,324,334	23,040,143	21,377,197	
Excess or (Deficit)		189,836	1,137,975	84,569	1,079,587	
Total exempt revenue		23,104,916	23,462,309	23,124,712	22,456,784	
Total unrelated revenue			45,384	57,857	-3,678	
Total excludable revenue		23,104,916	1,313,589	1,232,395	1,305,256	
Total Assets		3,677,315	5,926,196	5,964,521	8,648,690	
Total Liabilities		269,778	1,380,684	1,334,440	2,693,844	
Net Fund Balances		3,407,537	4,545,512	4,630,081	5,954,846	

Form 990T	Tax Return History	2015
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Name FOOD BANK OF NORTHEAST GEORGIA INC.	Employer Identification Number 58-1938066
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	2011	2012	2013	2014	2015	2016
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*			45,384	57,857	-3,678	
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.			45,384	57,857	-3,678	
Compensation of officers, ect.			16,078	9,360		
Other salaries and wages			7,759	7,889	106,537	
Repairs and maintenance					1,753	
Bad debts						
Interest					10,460	
Taxes and licenses					8,265	
Charitable contributions						
Depreciation and Depletion					292,541	
Deferred compensation plans					1,559	
Employee benefit programs					7,848	

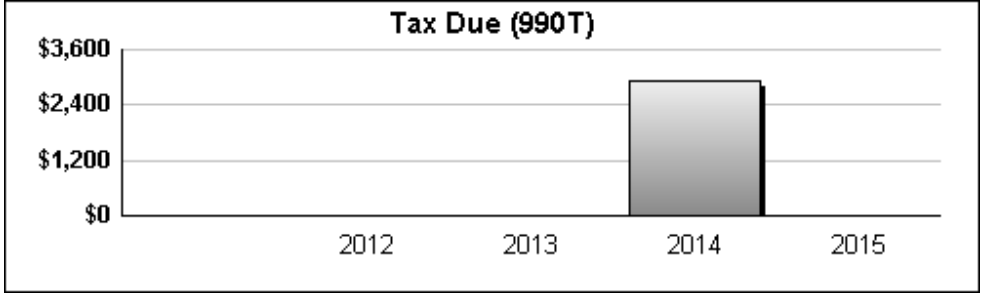
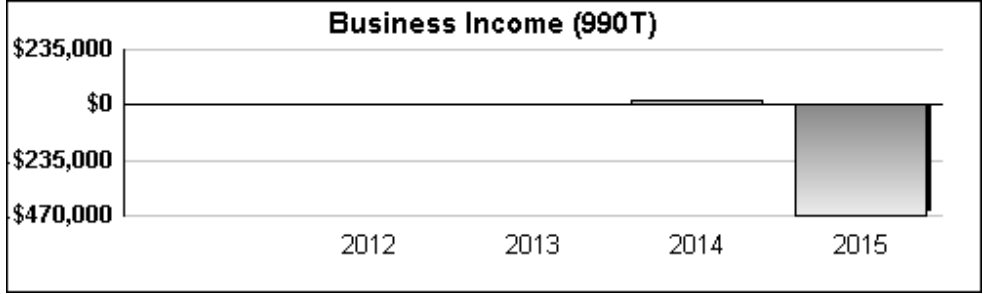
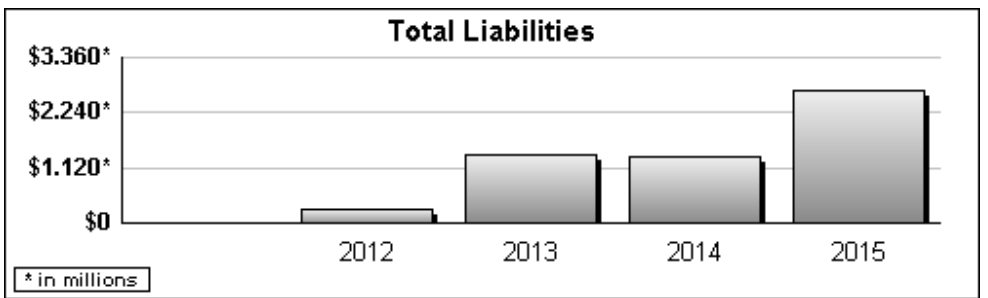
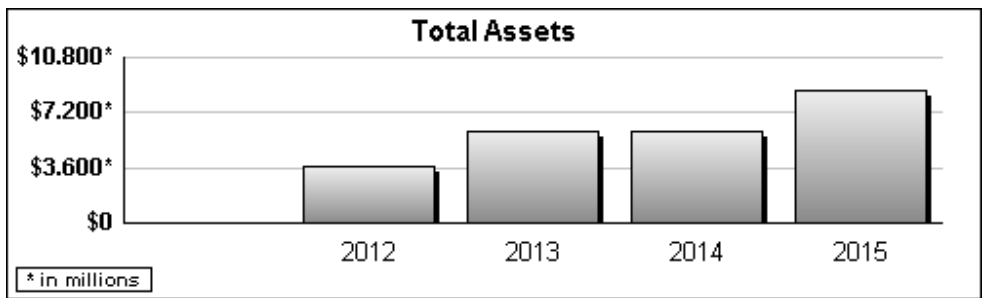


Form 990T	Tax Return History	2015
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Name	FOOD BANK OF NORTHEAST GEORGIA INC.	Employer Identification Number 58-1938066
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	2011	2012	2013	2014	2015	2016
Other deductions			21,351	20,018	38,193	
Net operating loss deduction						
Specific deduction		1,000	1,000	1,000		
Income after expense and deductions		-1,000	-804	19,590	-470,834	
Income tax (corporate or trust)				2,939		
Other taxes						
Total taxes				2,939		
General business credit						
Other credits						
Net tax after credits				2,939		
Estimated tax payments						
Other payments						
Balance due/Overpayment				2,939		

* Income shown net of expenses



Federal Statements**Taxable Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST INCOME	\$ 1,881					
TOTAL	\$ 1,881					

58-1938066

Federal Statements

FYE: 6/30/2016

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
CONTRACT SERVICES	\$ 32,352	\$ 10,180	\$ 835	\$ 21,337
FOOD HUB				
OTHER FEES	990	990		
TOTAL	<u>\$ 33,342</u>	<u>\$ 11,170</u>	<u>\$ 835</u>	<u>\$ 21,337</u>

Form 990, Part IX, Line 24e - All Other Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
REPAIR & MAINTENANCE	\$ 100,310	\$ 97,810	\$ 2,500	\$
DUES & SUBSCRIPTIONS	10,748	10,748		
BANK CHARGES	7,858		7,858	
AGENCY CONFERENCE	6,412			6,412
VEHICLE TAX	3,377	3,377		
FEDERAL TAX ON UBTI	2,939		2,939	
REPAIRS AND MAINT	1,753	1,753		
DUES AND SUB	566	566		
OTHER	30	30		
TOTAL	<u>\$ 133,993</u>	<u>\$ 114,284</u>	<u>\$ 13,297</u>	<u>\$ 6,412</u>

58-1938066

Federal Statements

FYE: 6/30/2016

Schedule A, Part II, Line 1(e)

Description	Amount
UNITED WAY	\$ 52,800
DONATED FOOD	18,330,588
OTHER	22,130
GRANTS	219,808
CONTRIBUTIONS	1,824,520
SPRING APPEAL	
CASH CONTRIBUTION	55,615
SUMMER APPEAL	
CASH CONTRIBUTION	41,262
FOOD2KIDS	
CASH CONTRIBUTION	323,287
THANKSGIVING APPEAL	
CASH CONTRIBUTION	103,853
CHRISTMAS APPEAL	
CASH CONTRIBUTION	125,618
NEWSLETTER	
CASH CONTRIBUTION	595
HUNGER BOWL	
CASH CONTRIBUTION	48,732
LEGAL FOOD FRENZY	
CASH CONTRIBUTION	6,398
TOTAL	<u>\$ 21,155,206</u>

Schedule A, Part II, Line 9(e)

Description	Amount
EMPTY BOWL	\$ 4,689
WILL ROCK FOR FOOD	22,808
SPRING APPEAL	-12,213
SUMMER APPEAL	-6,015
FOOD2KIDS	-3,573
THANKSGIVING APPEAL	-24,180
CHRISTMAS APPEAL	-58,124
NEWSLETTER	
BBQ FESTIVAL	

58-1938066

Federal Statements

FYE: 6/30/2016

Schedule A, Part II, Line 9(e) (continued)

Description	Amount
HUNGER BOWL	\$ -214
YEAR END APPEAL	
LEGAL FOOD FRENZY	-930
FOOD HUB	-467,156
RENTAL INCOME	-3,678
LESS: DEDUCTIONS	-1,000
TOTAL	<u>\$ -549,586</u>

Schedule A, Part II, Line 12

Description	Amount
AGENCY SHARE	\$ 734,354
GNAP	517,285
USDA FEES	113,118
INTEREST INCOME	1,881
MISCELLANEOUS INCOME	16,370
TOTAL	<u>\$ 1,383,008</u>

58-1938066

Federal Statements

FYE: 6/30/2016

Pledges receivable - EOY

<u>Description</u>	<u>Amount</u>
	\$ 306,875
TOTAL	\$ <u>306,875</u>

Accounts receivable - EOY

<u>Description</u>	<u>Amount</u>
AGENCY SHARE	\$ 46,964
OTHER	11,486
TOTAL	\$ <u>58,450</u>

Accounts payable - EOY

<u>Description</u>	<u>Amount</u>
ACCOUNTS PAYABLE	\$ 136,593
ACCRUED PAYROLL LIABILITIES	13,888
ACCRUED EXPENSES	9,375
ACCRUED INTEREST	3,137
TOTAL	\$ <u>162,993</u>