

**Return of Organization Exempt From Income Tax**

**2001**

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

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

**A For the 2001 calendar year, or tax year beginning** 7/1, 2001, and ending 6/30, 2001

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return  
 Amended return  
 Application pending

**C** Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

**D** Employer identification number: 04-3272663

**E** Telephone number: (508) 528-3115

**F** Accounting method:  Cash  Accrual  
 Other (specify) \_\_\_\_\_

**G** Web site: \_\_\_\_\_

**J** Organization type (check only one):  501(c) (3) (insert no)  4947(a)(1) or  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail it should file a return without financial data. Some states require a complete return.

**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12: 72046.53

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See Specific Instructions on page 16)

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	<u>34084.73</u>		
	b	Indirect public support	1b	<u>18209.25</u>		
	c	Government contributions (grants)	1c	<u>3695.00</u>		
	d	<b>Total</b> (add lines 1a through 1c) (cash \$ <u>55983.98</u> noncash \$ <u>15373.79</u> )	1d		<u>71357.77</u>	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		<u>0</u>	
	3	Membership dues and assessments	3		<u>0</u>	
	4	Interest on savings and temporary cash investments	4		<u>688.76</u>	
	5	Dividends and interest from securities	5		<u>0</u>	
	6a	Gross rents	6a	<u>0</u>		
	b	Less rental expenses	6b	<u>0</u>		
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c		<u>0</u>	
7	Other investment income (describe _____)	7		<u>0</u>		
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	b	Less cost or other basis and sales expenses	8a	<u>0</u>		
	c	Gain or (loss) (attach schedule)	8b	<u>0</u>		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	<u>0</u>		
8d	<b>Total</b> (combine line 8c, columns (A) and (B))	8d		<u>0</u>		
9	Special events and activities (attach schedule)					
	a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	<u>0</u>		
	b	Less direct expenses other than fundraising expenses	9b	<u>0</u>		
9c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		<u>0</u>		
10a	Gross sales of inventory, less returns and allowances	10a	<u>0</u>			
	b	Less cost of goods sold	10b	<u>0</u>		
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		<u>0</u>	
11	Other revenue (from Part VII, line 103)	11		<u>0</u>		
12	<b>Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		<u>72046.53</u>		
Expenses	13	Program services (from line 44, column (B))	13		<u>63542.51</u>	
	14	Management and general (from line 44, column (C))	14		<u>1094.82</u>	
	15	Fundraising (from line 44, column (D))	15		<u>450.00</u>	
	16	Payments to affiliates (attach schedule)	16		<u>0</u>	
	17	<b>Total expenses</b> (add lines 13 and 14, column (A))	17		<u>65087.33</u>	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		<u>6959.20</u>	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		<u>45306.83</u>	
	20	Other changes in net assets or fund balances (attach explanation) <u>Food &amp; Adjmt.</u>	20		<u>(2735.19)</u>	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		<u>49532.84</u>	

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\* FOOD VALUE ADJUSTMENT & SPOILAGE

**Part II Statement of Functional Expenses** All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ <u>0</u> noncash \$ <u>15116.90</u> )	15116.90	15116.90		
23	Specific assistance to individuals (attach schedule)	0	0		
24	Benefits paid to or for members (attach schedule)	0	0		
25	Compensation of officers, directors, etc	0	0	0	0
26	Other salaries and wages	22296.12	22296.12	0	0
27	Pension plan contributions	0	0	0	0
28	Other employee benefits	0	0	0	0
29	Payroll taxes	11044.88	11044.88	0	0
30	Professional fundraising fees	0	0	0	0
31	Accounting fees	726.81	726.81	0	0
32	Legal fees	158.15	158.15	0	0
33	Supplies	1479.40	800.00	479.40	200.00
34	Telephone	1064.80	564.80	400.00	100.00
35	Postage and shipping	261.42	50.00	61.42	150.00
36	Occupancy	1154.00	1000.00	154.00	0
37	Equipment rental and maintenance	0	0	0	0
38	Printing and publications	0	0	0	0
39	Travel	0	0	0	0
40	Conferences, conventions, and meetings	0	0	0	0
41	Interest	0	0	0	0
42	Depreciation, depletion, etc (attach schedule)	0	0	0	0
43	Other expenses not covered above (itemize) a	0	0	0	0
b	FOOD PURCHASED FOR DISTRIBUTION	9945.83	9945.83	0	0
c	PROGRAM MISC EXPENSES	1839.02	1839.02	0	0
d					
e					
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	65087.33	63542.51	1094.82	450.00

**Joint Costs.** Check  if you are following SOP 98-2  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_,  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See Specific Instructions on page 24)

What is the organization's primary exempt purpose? <input type="checkbox"/> _____	Program Service Expenses <sup>15</sup> (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
a FOOD PANTRY DISTRIBUTION AND I.R. SOCIAL SERVICES FOR THE POOR, NEEDY, ELDERLY AND HOMELESS. 125333 LBS OF FOOD DISTRIBUTED (DONATED & PURCHASED) WITH VOLUNTEER TIME & FACILITIES ESTIMATED AT \$8000.00 (Grants and allocations \$ _____)	30201.51
b OUTREACH WORKER TO PROVIDE I.R. SOCIAL SERVICES TO THE NEEDY, POOR, AND HOMELESS FAMILIES AND INDIVIDUALS UNITED WAY ALLOCATION \$11000.00 WITH MATCHING FUNDS (Grants and allocations \$ 11000.00)	16670.50
c SENIOR NUTRITIONAL COORDINATOR AND EXECUTIVE DIRECTOR TO PROVIDE I.R. SOCIAL SERVICES AND NUTRITIONAL SERVICES TO THE ELDERLY. \$4000.00 GRANTS WITH MATCHING FUNDS (Grants and allocations \$ 4000.00)	16670.50
d _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	63542.51

**Part IV Balance Sheets** (See Specific Instructions on page 24)

Note		(A) Beginning of year		(B) End of year	
Assets	45	Cash—non-interest-bearing	0	45	0
	46	Savings and temporary cash investments	4343.11	46	46500.24
	47a	Accounts receivable	0	47c	0
		b Less allowance for doubtful accounts	0		
	48a	Pledges receivable	0	48c	0
		b Less allowance for doubtful accounts	0		
	49	Grants receivable	0	49	0
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)	0	50	0
	51a	Other notes and loans receivable (attach schedule)	0	51c	0
		b Less allowance for doubtful accounts	0		
	52	Inventories for sale or use	0	52	0
	53	Prepaid expenses and deferred charges	0	53	0
	54	Investments—securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	54	0
	55a	Investments—land, buildings, and equipment basis	0	55c	0
		b Less accumulated depreciation (attach schedule)	0		
	56	Investments—other (attach schedule)	0	56	0
	57a	Land, buildings, and equipment basis	0	57c	0
		b Less accumulated depreciation (attach schedule)	0		
58	Other assets (describe <input type="checkbox"/> <u>Food Supply for Distribution</u> )	1893.72	58	3032.60	
59 Total assets (add lines 45 through 58) (must equal line 74)			45306.83	59	49532.84
Liabilities	60	Accounts payable and accrued expenses	0	60	0
	61	Grants payable	0	61	0
	62	Deferred revenue	0	62	0
	63	Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	0
	64a	Tax-exempt bond liabilities (attach schedule)	0	64a	0
	b	Mortgages and other notes payable (attach schedule)	0	64b	0
	65	Other liabilities (describe <input type="checkbox"/> <u>N/A</u> )	0	65	0
66 Total liabilities (add lines 60 through 65)			0	66	0
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74		45306.83	67	49532.84
	67	Unrestricted			
	68	Temporarily restricted			
	69	Permanently restricted	0	69	0
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74		/	70	/
	70	Capital stock, trust principal, or current funds			
	71	Paid-in or capital surplus, or land, building, and equipment fund			
	72	Retained earnings, endowment, accumulated income, or other funds			
73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)			45306.83	73	49532.84
74 Total liabilities and net assets / fund balances (add lines 66 and 73)			45306.83	74	49532.84

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

**Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return** (See Specific Instructions, page 26)

a	Total revenue, gains, and other support per audited financial statements ▶	a	78046.53
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments \$ 0		
(2)	Donated services and use of facilities \$ 6000.00		
(3)	Recoveries of prior year grants \$ 0		
(4)	Other (specify) \$ 0		
	Add amounts on lines (1) through (4) ▶	b	6000.00
c	Line a minus line b ▶	c	72046.53
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$ 0		
(2)	Other (specify) \$ 0		
	Add amounts on lines (1) and (2) ▶	d	0
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	72046.53

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

a	Total expenses and losses per audited financial statements ▶	a	68354.14
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities \$ 6000.00		
(2)	Prior year adjustments reported on line 20, Form 990 \$ (2733.19)		
(3)	Losses reported on line 20, Form 990 \$ 0		
(4)	Other (specify) \$ 0		
	Add amounts on lines (1) through (4) ▶	b	3266.81
c	Line a minus line b ▶	c	65087.33
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$ 0		
(2)	Other (specify) \$ 0		
	Add amounts on lines (1) and (2) ▶	d	0
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	65087.33

**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated, see Specific Instructions on page 26)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
PAUL W. Foulst 160 DAILEY DR., FRANKLIN, MA	PRESIDENT 20 hrs.	0	0	0
JAMES D. MEEHIGAN 208 Wood St., Woodville, MA	TREASURER/CLERK 5 hrs.	0	0	0
WANDA A. Foulst 160 DAILEY DR., FRANKLIN, MA	EXEC. DIR. SENIOR IER 20 hrs	16670.50	0	0
WANDA A. Foulst 160 DAILEY DR., FRANKLIN, MA	OUTREACH WORKER 20 hrs.	16670.50	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations?  Yes  No  
If "Yes," attach schedule—see Specific Instructions on page 27

**Part VI Other Information (See Specific Instructions on page 27)**

		Yes	No
<b>76</b>	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
<b>77</b>	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
<b>78a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
<b>78b</b>	If "Yes," has not filed a tax return on Form 990-T for this year?		X
<b>79</b>	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
<b>80a</b>	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
<b>81a</b>	Enter direct or indirect political expenditures See line 81 instructions and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
<b>81b</b>	Did the organization file Form 1120-POL for this year?		X
<b>82a</b>	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
<b>82b</b>	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)		
<b>83a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
<b>83b</b>	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
<b>84a</b>	Did the organization solicit any contributions or gifts that were not tax deductible?		X
<b>84b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		X N/A
<b>85a</b>	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?		X N/A
<b>85b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		X N/A
<b>85c</b>	Dues, assessments, and similar amounts from members		
<b>85d</b>	Section 162(e) lobbying and political expenditures		
<b>85e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
<b>85f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
<b>85g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		X N/A
<b>85h</b>	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
<b>86a</b>	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12		
<b>86b</b>	Gross receipts, included on line 12, for public use of club facilities		
<b>87a</b>	501(c)(12) orgs Enter a Gross income from members or shareholders		
<b>87b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
<b>88</b>	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
<b>89a</b>	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955		
<b>89b</b>	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
<b>89c</b>	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		N/A
<b>89d</b>	Enter Amount of tax on line 89c, above, reimbursed by the organization		N/A
<b>90a</b>	List the states with which a copy of this return is filed		MASSACHUSETTS
<b>90b</b>	Number of employees employed in the pay period that includes March 12, 2001 (See instructions)		1
<b>91</b>	The books are in care of Located at		JAMES D. MEEHAN 80 WEST CENTRAL ST. FRANKLIN, MA Telephone no (508) 528-3115 ZIP + 4 02038-0118
<b>92</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		N/A



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

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

OMB No 1545-0047

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

**2001**

**Supplementary Information—(See separate instructions.)**

Department of the Treasury  
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

**FRANKLIN FOOD PANTRY INCORPORATED**

Employer identification number

**04-3272663**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE	N/A	N/A	N/A	N/A
<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>
<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>
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<del> </del>	<del> </del>	<del> </del>	<del> </del>	<del> </del>

Total number of other employees paid over \$50,000 ▶

N/A

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	N/A	N/A
<del> </del>	<del> </del>	<del> </del>
<del> </del>	<del> </del>	<del> </del>
<del> </del>	<del> </del>	<del> </del>
<del> </del>	<del> </del>	<del> </del>

Total number of others receiving over \$50,000 for professional services ▶

N/A

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?		X
Note. Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments		

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box)

- 5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vii) (Also complete the Support Schedule in Part IV-A)
- 11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)
- 12  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A.)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above
N/A	N/A
X	X

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

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

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

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	55984	45744	32067	20243	154038
16 Membership fees received	0	0	0	0	0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	0	0	0	0	0
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	0	0	0	0	0
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	0	0	0	0	0
23 Total of lines 15 through 22	55984	45744	32067	20243	154038
24 Line 23 minus line 17	55984	45744	32067	20243	154038
25 Enter 1% of line 23	559.84	457.44	320.67	202.43	
26 Organizations described on lines 10 or 11. a Enter 2% of amount in column (e), line 24					26a 3081
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts					26b 44645
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c 154038
d Add Amounts from column (e) for lines 18 0 19 0 22 0 26b 44645					26d 44645
e Public support (line 26c minus line 26d total)					26e 109393
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 71 %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year					
(2000) . . . . . (1999) N/A (1998) . . . . . (1997) . . . . .					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year					
(2000) . . . . . (1999) . . . . . (1998) . . . . . (1997) . . . . .					
c Add Amounts from column (e) for lines 15 0 16 0 17 0 20 0 21 0					27c N/A
d Add Line 27a total and line 27b total					27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)	27f				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %
28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15					

N/A

**Part V Private School Questionnaire** (See page 7 of the instructions)  
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

	Yes	No
29		

30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

30		
----	--	--

31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?  
If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)

31		
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32 Does the organization maintain the following:  
a Records indicating the racial composition of the student body, faculty, and administrative staff?  
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?  
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?  
d Copies of all material used by the organization or on its behalf to solicit contributions?

31		
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32a		
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32b		
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32c		
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32d		
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If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)

33 Does the organization discriminate by race in any way with respect to

N/A

- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?

31		
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32a		
-----	--	--

32b		
-----	--	--

32c		
-----	--	--

32d		
-----	--	--

33a		
-----	--	--

33b		
-----	--	--

33c		
-----	--	--

33d		
-----	--	--

33e		
-----	--	--

33f		
-----	--	--

33g		
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33h		
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If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)

34a Does the organization receive any financial aid or assistance from a governmental agency?

33e		
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33f		
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33g		
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33h		
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34a		
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34b		
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b Has the organization's right to such aid ever been revoked or suspended?  
If you answered "Yes" to either 34a or b, please explain using an attached statement

35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

34a		
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34b		
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35		
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35		
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**Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 12 of the instructions) *N/A*

**51** Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? *N/A*

**a** Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
- (ii) Other assets

*N/A*

	Yes	No
51a(i)		
a(ii)		
b(i)		
b(ii)		
b(iii)		
b(iv)		
b(v)		
b(vi)		
c		

**b** Other transactions

- (i) Sales or exchanges of assets with a noncharitable exempt organization
- (ii) Purchases of assets from a noncharitable exempt organization
- (iii) Rental of facilities, equipment, or other assets
- (iv) Reimbursement arrangements
- (v) Loans or loan guarantees
- (vi) Performance of services or membership or fundraising solicitations

**c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees

**d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>

**52a** Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? *N/A*  Yes  No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
<i>N/A</i>	<i>N/A</i>	<i>N/A</i>

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No 1545-0047

**2001**

Name of organization

FRANKLIN FOOD PANTRY, INC

Employer identification number

04:3272663

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 box(es) for both the General rule and a Special rule—see instructions)

**General Rule—**

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

**Special Rules—**

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

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

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

▶ \$ \_\_\_\_\_

**Caution:** Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization FRANKLIN FOOD PANTRY, INC. Employer identification number 04:3272663

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

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>		\$ <u>11,000.00</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>2</u>		\$ <u>3695.00</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>3</u>		\$ <u>3500.00</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization	Employer identification number
----------------------	--------------------------------

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

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

Name of organization

**FRANKLIN FOOD PANTRY, INC**

Employer identification number

**04-3272663**

**Part II Noncash Property** (See Specific Instructions)

**NONE N/A**

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<b>NONE</b>	<b>N/A</b>	

Name of organization

Employer identification number

**Part II** Noncash Property (See Specific Instructions)

(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	..... ..... .....	\$ .....	/ / .....
—	..... ..... .....	\$ .....	/ / .....
—	..... ..... .....	\$ .....	/ / .....
—	..... ..... .....	\$ .....	/ / .....
—	..... ..... .....	\$ .....	/ / .....
—	..... ..... .....	\$ .....	/ / .....
—	..... ..... .....	\$ .....	/ / .....
—	..... ..... .....	\$ .....	/ / .....
—	..... ..... .....	\$ .....	/ / .....
—	..... ..... .....	\$ .....	/ / .....
—	..... ..... .....	\$ .....	/ / .....

Name of organization **FRANKLIN FOOD PANTRY, INC.**

Employer identification number **04 3272663**

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry). For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once—see instructions) **NONE**  $\triangleright$  \$ **N/A**

(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<b>NONE</b>	<b>N/A</b>	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

Name of organization

Employer identification number

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry)

For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once—see instructions) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	.....	.....	.....
	.....	.....	.....
	.....	.....	.....
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
.....		.....	
.....		.....	
—	.....	.....	.....
	.....	.....	.....
	.....	.....	.....
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
.....		.....	
.....		.....	
—	.....	.....	.....
	.....	.....	.....
	.....	.....	.....
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
.....		.....	
.....		.....	
—	.....	.....	.....
	.....	.....	.....
	.....	.....	.....
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
.....		.....	
.....		.....	

Franklin Food Pantry  
July 1 2001 to June 30, 2002  
Major Donations and Grants

	Donations over 2% or (OVER \$300) FY2000 2% = \$2306 FY2001 2%* = \$3081										
	FY 1994	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001	FY2001 *2%	1997-00 Totals	1997-00 *2%
<b>PUBLIC</b>											
Aspin Louis G								\$600 00		\$600 00	
Aubuchon, Co Inc W E								\$300 00		\$300 00	
Bailey, Lisa G								\$950 00		\$950 00	
Bank of Boston		\$2,500 00								\$0 00	
Bay Bank		\$1,000 00			\$1,100 00					\$1,100 00	
Ben Franklin Bank							\$460 00	\$500 00		\$960 00	
Bernon Foundation					\$1,000 00					\$1,000 00	
Berry Insurance							\$500 00	\$1,000 00		\$1,500 00	
Big Apple Day for Sam			\$320 00	\$260 00	\$170 00	\$384 16	\$0 00			\$814 16	
Bua Joseph						\$400 00		\$100 00		\$500 00	
Callgaris Barbara B								\$300 00		\$300 00	
Circle of Friends	\$45 00	\$484 00	\$492 35	\$527 00	\$179 00					\$706 00	
Conza Margaret						\$300 00		\$280 00		\$580 00	
Dean CoOp Bank						\$825 00	\$350 00			\$1,175 00	
DeBaggis, Estate of						\$500 00	\$0 00			\$500 00	
Dell Dynamics Sara Lee		\$1,000 00					\$0 00			\$0 00	
Draker USA				\$450 00			\$0 00			\$450 00	
Empty Bowls							\$1,000 00	\$820 00		\$1,820 00	
Federated Church	\$225 00	\$905 00					\$0 00			\$0 00	
Feinstein Family Fund				\$279 72			\$296 87			\$576 59	
Fleet Bank								\$1,000 00		\$1,000 00	
Fletcher Hospital Corp								\$2,000 00		\$2,000 00	
Franklin Elks						\$500 00		\$716 40		\$1,216 40	
Franklin Newcomers			\$500 00	\$500 00	\$500 00	\$1,000 00	\$1,260 00	\$1,060 00		\$4,320 00	\$4,320 00
Franklin Rotary								\$500 00		\$500 00	
JEM Electronics			\$1,500 00							\$0 00	
Kaufman Brian								\$300 00		\$300 00	
Lasota Walter L								\$300 00		\$300 00	
Lessard Lucien							\$500 00			\$500 00	
Lion's Club				\$534 00	\$250 00					\$784 00	
McDonald, John					\$2,500 00					\$2,500 00	
Meehan Timothy						\$500 00				\$500 00	
Metcalf Sand & Gravel			\$500 00			\$300 00				\$300 00	
Miller Nicholas S								\$600 00		\$600 00	
Morse Stephen						\$500 00	\$500 00			\$1,000 00	
Multifasteners, Inc		\$1,000 00	\$300 00							\$0 00	
Norfolk Together Inc				\$500 00	\$1,000 00					\$1,500 00	
Nulton Elise						\$1,250 00	\$500 00			\$1,750 00	
Nulton Kevin L								\$1,500 00		\$1,500 00	
Nurberg, Steven		\$800 00	\$125 00	\$250 00	\$1,000 00	\$3,500 00	\$3,100 00	\$1,000 00		\$8,850 00	\$8,850 00
Perry William						\$500 00	\$500 00			\$1,000 00	
Putnam Investments		\$1,000 00		\$1,750 00	\$2,500 00	\$2,915 00	\$2,936 00	\$2,500 00		\$12,601 00	\$12,601 00
Shaw Gerard P								\$500 00		\$500 00	
St Mary's Church	\$200 00	\$1,200 00	\$1,100 00	\$1,300 00	\$1,100 00	\$1,000 00	\$1,200 00	\$1,200 00		\$5,800 00	\$5,800 00
Snow Margaret		\$400 00	\$160 00	\$240 00	\$360 00			\$240 00		\$840 00	
Stop & Shop		\$1,500 00	\$2,500 00	\$2,821 03	\$2,071 94	\$3,430 00	\$3,551 30	\$1,399 50		\$13,073 77	\$13,073 77
Svensden, Karen								\$400 00		\$400 00	
200 Foundation						\$500 00	\$500 00	\$500 00		\$1,500 00	
USP Foundation				\$1,000 00						\$1,000 00	
Valle Mark S								\$1,200 00		\$1,200 00	
Wal-Mart Foundation							\$700 00			\$700 00	
<b>Totals</b>	<b>\$470 00</b>	<b>\$11,589 00</b>	<b>\$7,497 35</b>	<b>\$10,211 75</b>	<b>\$13,730 94</b>	<b>\$18,804 16</b>	<b>\$17,354 17</b>	<b>\$21,765 90</b>	<b>\$0 00</b>	<b>\$81,866 92</b>	<b>\$44,844 77</b>
<b>GOVERNMENTAL</b>											
Franklin, Town of							\$2,000 00	\$2,000 00		\$4,000 00	
FEMA EFSP	\$800 00	\$1,082 00	\$1,123 00	\$1,783 00	\$1,500 00	\$2,810 50	\$3,045 50	\$3,695 00	\$3,695 00	\$12,834 00	\$10,282 00
United Way TC						\$7,500 00	\$8,375 00	\$11,000 00	\$11,000 00	\$24,875 00	\$13,875 00
United Way of SENE						\$386 09	\$482 61			\$868 70	
United Way Others								\$446 40		\$446 40	
Norfolk County Commsn		\$500 00		\$1,000 00	\$500 00		\$500 00	\$500 00		\$2,500 00	
Project Bread		\$3,610 00	\$3,150 00	\$3,150 00	\$3,150 00	\$3,700 00	\$3,750 00	\$3,500 00	\$3,500 00	\$17,250 00	\$16,900 00
										\$0 00	
	<b>\$600 00</b>	<b>\$1,582 00</b>	<b>\$1,123 00</b>	<b>\$2,783 00</b>	<b>\$2,000 00</b>	<b>\$10,696 59</b>	<b>\$10,403 11</b>	<b>\$15,641 40</b>	<b>\$14,695 00</b>	<b>\$41,524 10</b>	<b>\$24,137 00</b>

Franklin Food Pantry  
 July 1, 2001 to June 30, 2002  
 Receipts - Disbursements Balance Sheet

	Jul-01	Aug-01	Sep-01	Oct-01	Nov-01	Dec-01	Jan-02	Feb-02	Mar-02	Apr-02	May-02	Jun-02	Totals
<b>FY 2001 (6/01 - 7/02)</b>													
Cash Receipts													
Public	\$385.22	\$200.00	\$635.00	\$560.00	\$4,008.47	\$8,365.00	\$280.00	\$775.00	\$1,127.00	\$920.00	\$260.00	\$1,106.42	\$18,602.11
Clubs	\$0.00	\$0.00	\$38.00	\$0.00	\$0.00	\$350.00	\$631.11	\$718.40	\$0.00	\$1,930.00	\$64.00	\$737.81	\$4,467.32
Corporate	\$0.00	\$11.81	\$0.00	\$75.00	\$2,099.50	\$6,217.00	\$150.00	\$47.19	\$50.00	\$0.00	\$0.00	\$1,085.00	\$9,715.30
Churches	\$100.00	\$100.00	\$100.00	\$100.00	\$200.00	\$100.00	\$100.00	\$100.00	\$100.00	\$100.00	\$100.00	\$100.00	\$1,300.00
Grants - FEMA	\$1,735.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,960.00	\$0.00	\$0.00	\$0.00	\$3,695.00
Grants - United Way	\$0.00	\$0.00	\$2,750.00	\$0.00	\$0.00	\$2,750.00	\$0.00	\$0.00	\$2,750.00	\$0.00	\$0.00	\$2,750.00	\$11,000.00
Grants - Project Bread	\$0.00	\$0.00	\$3,500.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,500.00
Grants (Other)	\$223.20	\$0.00	\$0.00	\$0.00	\$0.00	\$500.00	\$223.20	\$0.00	\$500.00	\$2,000.00	\$0.00	\$257.85	\$3,704.25
<b>SubTotals</b>													
Interest on CD's	\$7.39	\$6.19	\$5.08	\$5.86	\$3.38	\$3.59	\$5.71	\$5.07	\$5.16	\$5.40	\$5.49	\$4.69	\$625.75
Interest													
<b>Totals - Cash</b>	<b>\$2,430.81</b>	<b>\$317.80</b>	<b>\$7,028.08</b>	<b>\$7,408.86</b>	<b>\$6,311.35</b>	<b>\$18,285.59</b>	<b>\$1,390.02</b>	<b>\$1,643.66</b>	<b>\$8,492.16</b>	<b>\$4,955.40</b>	<b>\$429.49</b>	<b>\$6,021.77</b>	<b>\$56,672.74</b>
<b>In-Kind Donations</b>													
Food Donations # s													
Public	2,586.0	1,243.0	1,998.4	1,286.9	12,211.5	8,494.8	1,882.2	1,081.6	2,576.9	1,965.0	9,236.1	1,619.8	44,182.2
Grtr Boston Food Bank	1,087.0	1,750.0	2,260.0	1,210.0	1,527.0	1,446.0	2,388.0	1,684.0	1,701.0	2,257.0	3,384.0	1,586.0	22,250.0
MEFAP	1,853.0	1,698.0	1,423.0	1,498.0	1,810.0	1,868.0	1,456.0	1,642.0	1,460.0	1,814.0	1,416.0	2,034.0	19,570.0
USDA - TEFAP	1,014.0	841.0	878.0	798.0	630.0	2,150.0	1,907.0	458.0	0.0	574.0	120.0	714.0	10,084.0
<b>Totals</b>	<b>6,320.0</b>	<b>5,532.0</b>	<b>6,559.4</b>	<b>4,792.9</b>	<b>16,178.5</b>	<b>11,956.8</b>	<b>7,633.2</b>	<b>4,865.6</b>	<b>5,737.8</b>	<b>6,410.0</b>	<b>14,138.1</b>	<b>5,963.8</b>	<b>96,086.2</b>
<b>Est. Value @ \$.16/#</b>													<b>\$15,373.78</b>
<b>Total Revenue</b>													
In-Kind Donations													
Facilities Estimated \$'s	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$3,000.00
Time Estimated \$'s	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$3,000.00
<b>Totals Estimated \$'s</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$500.00</b>	<b>\$6,000.00</b>
<b>USDA - TEFAP @ \$.63/#</b>	<b>8,547.0</b>	<b>\$5,421.58</b>											

Franklin Food Pantry  
 July 1, 2001 to June 30, 2002  
 Receipts - Disbursements Balance Sheet

	Jul-01	Aug-01	Sep-01	Oct-01	Nov-01	Dec-01	Jan-02	Feb-02	Mar-02	Apr-02	May-02	Jun-02	Totals
<b>Cash Disbursements</b>													
Food & Health Items	\$669.59	\$1,081.14	\$1,228.12	\$1,246.75	\$917.91	\$748.73	\$623.94	\$891.31	\$1,093.01	\$617.20	\$633.48	\$216.85	\$9,845.83
Supplies	\$0.00	\$129.89	\$130.00	\$215.74	\$0.00	\$42.23	\$48.87	\$526.96	\$0.00	\$150.88	\$0.00	\$0.00	\$1,242.87
Equipment	\$19.99	\$97.10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$139.98	\$16.57	\$59.99	\$0.00	\$238.55
Telephone	\$75.25	\$0.00	\$88.21	\$0.00	\$86.56	\$91.09	\$130.37	\$91.06	\$81.63	\$128.89	\$108.80	\$87.84	\$1,064.80
Postage	\$0.00	\$0.00	\$12.34	\$34.00	\$0.00	\$0.00	\$81.21	\$34.00	\$0.00	\$65.87	\$0.00	\$34.00	\$261.42
Admin & Insurance	\$51.07	\$50.50	\$50.50	\$50.50	\$51.41	\$695.44	\$209.78	\$76.73	\$51.98	\$130.45	\$269.98	\$57.61	\$1,745.96
Occupancy & Pest Cntrl	\$0.00	\$49.00	\$0.00	\$48.00	\$0.00	\$48.00	\$0.00	\$0.00	\$0.00	\$50.00	\$0.00	\$50.00	\$293.00
Outreach Worker	\$1,739.78	\$2,608.67	\$1,739.78	\$1,739.78	\$1,739.78	\$1,739.78	\$888.85	\$888.85	\$2,666.85	\$2,019.72	\$2,261.54	\$2,261.54	\$22,288.12
Taxes	\$843.82	\$1,265.73	\$843.82	\$843.82	\$843.82	\$843.82	\$429.25	\$429.25	\$1,287.75	\$1,047.28	\$1,183.28	\$1,183.28	\$11,044.88
Program Misc	\$800.00	\$0.00	\$0.00	\$0.00	\$110.00	\$0.00	\$0.00	\$479.02	\$155.00	\$50.00	\$25.00	\$0.00	\$1,839.02
Savings - CD Deposits	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Totals</b>	\$4,179.51	\$5,283.12	\$4,090.77	\$4,178.59	\$3,749.48	\$4,209.09	\$2,630.48	\$3,465.28	\$5,476.20	\$4,274.96	\$4,542.05	\$3,890.90	\$49,970.43
<b>Food Donations #'s</b>													
Public	2,586.0	1,243.0	1,998.4	1,266.8	12,211.5	6,484.8	1,882.2	1,081.6	2,576.9	1,965.0	9,236.1	1,619.8	44,182.2
Greater Boston Food Bk	1,067.0	1,750.0	2,280.0	1,210.0	1,527.0	1,446.0	2,388.0	1,684.0	1,701.0	2,257.0	3,364.0	1,596.0	22,250.0
MEFAP	1,653.0	1,698.0	1,423.0	1,498.0	1,810.0	1,868.0	1,458.0	1,642.0	1,460.0	1,614.0	1,416.0	2,034.0	19,570.0
USDA - TEFAP	1,014.0	841.0	878.0	798.0	630.0	2,150.0	1,907.0	458.0	0.0	574.0	120.0	714.0	10,084.0
Sub-Total Donated #'s	6,260.0	5,532.0	6,177.4	5,772.8	22,989.0	11,948.8	7,175.2	5,272.6	6,738.9	6,410.0	14,146.1	5,963.6	108,166.2
Food Purchased Weight	681.8	1,116.0	1,484.4	1,209.1	374.6	661.8	1,085.4	951.8	1,026.2	542.2	1,040.0	0.0	9,247.3
<b>Food Total Weight</b>													105,333.5
<b>Food Distributed Weight*</b>													
Monthly	2,354.2	1,831.4	2,112.7	2,755.2	2,683.1	3,190.8	1,165.5	1,913.4	2,152.1	1,625.1	2,903.0	0.0	24,686.5
Emergency/Outreach	1,418.0	2,602.4	1,818.1	3,461.4	3,951.5	2,458.7	3,528.6	3,373.3	4,792.9	2,296.0	2,827.8	1,320.6	33,649.3
Senior's Program	2,587.9	3,887.6	1,549.6	1,832.4	2,423.6	2,658.0	1,988.4	1,597.8	1,594.2	1,830.4	2,238.9	1,680.9	25,957.7
USDA - TEFAP	815.2	819.2	688.8	807.4	1,108.8	610.8	684.8	674.8	935.8	519.2	651.2	489.6	9,005.4
Spill	134.4	129.2	85.4	25.0	34.2	45.9	117.4	59.4	135.2	74.4	149.2	192.0	1,181.7
Totals #s	7,309.7	9,249.8	8,254.6	8,981.4	10,201.2	8,964.0	7,694.7	7,618.7	9,610.2	6,419.9	8,493.3	3,683.1	94,480.6
<b>Totals @ \$ .16/# FY01</b>	\$1,169.55	\$1,479.87	\$1,000.74	\$1,437.02	\$1,632.19	\$1,434.24	\$1,231.15	\$1,218.99	\$1,537.63	\$1,027.18	\$1,358.93	\$589.30	\$15,116.90
<b>Totals (Non-Cash)</b>													
NET 2001		New 2002	Total 2002	Used 2002	Balance 2002								
Net Inventory #s	8,479.8	95,249.5	103,729.3	84,293.5	19,435.8								
Net Inventory #s (USDA)	1,147.0	10,084.0	11,231.0	9,005.4	2,225.6								
Net Inventory #s Total	9,626.8	105,333.5	114,960.3	93,298.9	21,661.4								
Net Inventory Total Value \$	\$1,347.75	@ \$ .14/# FY00		\$3,032.60	@ \$ .16/# FY01								
<b>In-Kind Donations Used</b>													
Facilities Estimated \$s	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$3,000.00
Time Estimated \$s	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$250.00	\$3,000.00
Totals Estimated \$s	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$500.00	\$6,000.00
<b>USDA - TEFAP @ \$ .63/#</b>	8,547.0	\$5,421.58											