

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2002

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 2002 calendar year, or tax year period beginning **JUL 1, 2002** and ending **JUN 30, 2003**

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

Please use IRS label or print or type. See Specific Instructions

C Name of organization: **WEST OHIO FOOD BANK**

Number and street (or P O box if mail is not delivered to street address) Room/suite: **P.O. BOX 1566**

City or town, state or country, and ZIP + 4: **LIMA, OH 45802-1566**

D Employer identification number: **34-1587528**

E Telephone number: **(419) 222-7946**

F Accounting method: Cash Accrual
 Other (specify) _____

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

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If Yes enter number of affiliates: _____

H(c) Are all affiliates included? **N/A** Yes No (If "No" attach a list)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Enter 4-digit GEN: _____

G Web site: **N/A**

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.

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

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12: **426,292.**

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

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	147,842.		
	b	Indirect public support	1b	48,444.		
	c	Government contributions (grants)	1c	18,340.		
	d	Total (add lines 1a through 1c) (cash \$ 214,126. noncash \$ 500.)	1d		214,626.	
	2	Program service revenue including government fees and contracts (from Part VII line 93)	2		151,430.	
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4			
	5	Dividends and interest from securities	5			
	6a	Gross rents	6a			
	b	Less rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe: INTEREST INCOME)	7		154.		
8a	Gross amount from sale of assets other than inventory	(A) Securities	8a	12,390.		
		(B) Other	8b	12,620.		
			8c	-230.		
		d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d		-230.
9a	Gross revenue (not including \$ 0. of contributions reported on line 1a)		9a	47,485.		
			9b			
			9c		47,485.	
10a	Gross sales of inventory, less returns and allowances		10a			
			10b			
	Less cost of goods sold					
	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)					
11	Other revenue (from Part VII line 103)	11		207.		
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		413,672.		
Expenses	13	Program services (from line 44, column (B))	13		284,808.	
	14	Management and general (from line 44, column (C))	14		35,126.	
	15	Fundraising (from line 44, column (D))	15		53,116.	
	16	Payments to affiliates (attach schedule)	16			
	17	Total expenses (add lines 16 and 44, column (A))	17		373,050.	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		40,622.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		109,567.	
	20	Other changes in net assets or fund balances (attach explanation)	20		0.	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		150,189.	

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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 Page 2

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 \$ _____ noncash \$ _____				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors etc	38,188.	13,366.	5,728.	19,094.
26	Other salaries and wages	125,182.	110,234.	9,598.	5,350.
27	Pension plan contributions				
28	Other employee benefits	8,346.	6,313.	784.	1,249.
29	Payroll taxes	14,079.	10,649.	1,322.	2,108.
30	Professional fundraising fees				
31	Accounting fees	5,277.		5,277.	
32	Legal fees				
33	Supplies	7,444.	5,631.	699.	1,114.
34	Telephone	6,301.	4,766.	592.	943.
35	Postage and shipping	5,986.	4,190.	599.	1,197.
36	Occupancy	48,895.	44,005.	2,445.	2,445.
37	Equipment rental and maintenance	11,345.	11,345.		
38	Printing and publications	625.	250.	62.	313.
39	Travel	2,321.	1,756.	218.	347.
40	Conferences, conventions, and meetings	4,024.	4,024.		
41	Interest	1,128.		1,128.	
42	Depreciation, depletion, etc (attach schedule)	26,232.	20,985.	3,935.	1,312.
43	Other expenses not covered above (itemize)				
a	_____				
b	_____				
c	_____				
d	_____				
e	SEE STATEMENT 3	67,677.	47,294.	2,739.	17,644.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15	373,050.	284,808.	35,126.	53,116.

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

What is the organization's primary exempt purpose? <input type="checkbox"/>	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
ELIMINATION OF HUNGER	
a SERVES OVER 100 NONPROFIT MEMBER AGENCIES IN AN 11 COUNTY AREA OF WEST CENTRAL OH.-MEMBER ORG OF 2ND HARVEST NAT'L FOOD BK-WORKS TO ELIMINATE HUNGER IN AREA	
(Grants and allocations \$ _____)	284,808.
b _____	
(Grants and allocations \$ _____)	
c _____	
(Grants and allocations \$ _____)	
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)	284,808.

Part IV Balance Sheets

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

		(A) Beginning of year		(B) End of year	
Assets	45	Cash - non-interest-bearing	9,325.	45	21,194.
	46	Savings and temporary cash investments	2,815.	46	2,800.
	47 a	Accounts receivable	5,423.		
		b Less allowance for doubtful accounts			
			7,751.	47c	5,423.
	48 a	Pledges receivable			
		b Less allowance for doubtful accounts			
	49	Grants receivable		49	
	50	Receivables from officers directors trustees and key employees		50	
	51 a	Other notes and loans receivable			
		b Less allowance for doubtful accounts			
				51c	
	52	Inventories for sale or use	671,304.	52	317,404.
	53	Prepaid expenses and deferred charges	1,810.	53	3,463.
54	Investments - securities		54		
	<input type="checkbox"/> Cost <input type="checkbox"/> FMV				
55 a	Investments - land buildings, and equipment basis				
	b Less accumulated depreciation				
			55c		
56	Investments - other		56		
57 a	Land, buildings and equipment basis	232,526.			
	b Less accumulated depreciation	104,228.			
		147,329.	57c	128,298.	
58	Other assets (describe)		58		
59	Total assets (add lines 45 through 58) (must equal line 74)	840,334.	59	478,582.	
Liabilities	60	Accounts payable and accrued expenses	30,945.	60	10,989.
	61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees and key employees		63	
	64 a	Tax-exempt bond liabilities		64a	
		b Mortgages and other notes payable	28,518.	64b	
	65	Other liabilities (describe SEE STATEMENT 4)	671,304.	65	317,404.
66	Total liabilities (add lines 60 through 65)	730,767.	66	328,393.	
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				
	67	Unrestricted	105,946.	67	146,529.
	68	Temporarily restricted	3,621.	68	3,660.
	69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70	Capital stock, trust principal or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
73	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)	109,567.	73	150,189.	
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	840,334.	74	478,582.	

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 VI Other Information

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes" attach a detailed description of each activity		X
77	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
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes" attach a statement		X
80 a	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	If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures See line 81 instructions <input type="checkbox"/> 81a 0.		
b	Did the organization file Form 1120-POL for this year?		X
82 a	Did the organization receive donated services or the use of materials equipment or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) <input type="checkbox"/> 82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes" did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A		
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c	Dues assessments and similar amounts from members <input type="checkbox"/> 85c N/A		
d	Section 162(e) lobbying and political expenditures <input type="checkbox"/> 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices <input type="checkbox"/> 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) <input type="checkbox"/> 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A		
h	If section 6033(e)(1)(A) dues notices were sent does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A		
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12 <input type="checkbox"/> 86a N/A		
b	Gross receipts included on line 12 for public use of club facilities <input type="checkbox"/> 86b N/A		
87	501(c)(12) organizations Enter a Gross income from members or shareholders <input type="checkbox"/> 87a N/A		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) <input type="checkbox"/> 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership 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
89 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> 0., section 4912 <input type="checkbox"/> 0., section 4955 <input type="checkbox"/> 0.		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912 4955, and 4958 <input type="checkbox"/> 0.		
d	Enter Amount of tax on line 89c above, reimbursed by the organization <input type="checkbox"/> 0.		
90 a	List the states with which a copy of this return is filed <input type="checkbox"/> OHIO		
b	Number of employees employed in the pay period that includes March 12, 2002 <input type="checkbox"/> 90b 9		
91	The books are in care of <input type="checkbox"/> BAMBI MARKHAM Telephone no <input type="checkbox"/> 419-222-7946		
	Located at <input type="checkbox"/> 123 E.WAYNE STREET, LIMA, OHIO ZIP + 4 <input type="checkbox"/> 45802-1566		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 92 N/A		

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a <u>SHARED MAINTENANCE FEES</u>					151,430.
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income			14	154.	
100 Gain or (loss) from sales of assets other than inventory			18	-230.	
101 Net income or (loss) from special events			01	47,485.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a <u>MISCELLANEOUS</u>			01		207.
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		47,409.	151,637.
105 Total (add line 104 columns (B) (D), and (E))					199,046.

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93A	FEE TO MEMBER AGENCIES FOR TRANSPORTATION, SORTING, STORAGE & HANDLING OF DONATED FOOD

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions)

(A) Name, address and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions)

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

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

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

Under penalty 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 and correct. All information of which preparer has any knowledge

Date: 10/15/03
 Preparer's name and title: BAMB. L. HUGO-MARKHAM EXECUTIVE DIRECTOR
 Preparer's SSN or PTIN: 10-1303

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

2002

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)

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

Name of the organization **WEST OHIO FOOD BANK** Employer identification number **34 1587528**

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 OVER \$50,000				
Total number of other employees paid over \$50,000	0			

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 OVER \$50,000		
Total number of others receiving over \$50,000 for professional services	0	

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

	Yes	No
1 During the year, has the organization attempted to influence national state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A or line 1 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.	SEE STATEMENT 6	

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 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)(vi). (Also complete the Support Schedule in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 12 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and 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

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total		
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	189,571.	237,922.	213,062.	168,890.	809,445.		
16 Membership fees received							
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	188,423.	166,329.	174,891.	112,883.	642,526.		
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	121.	288.	1,206.	2,963.	4,578.		
19 Net income from unrelated business activities not included in line 18							
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
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.							
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	37,997.	21,482.	SEE STATEMENT 7 3,904.	6,737.	70,120.		
23 Total of lines 15 through 22	416,112.	426,021.	393,063.	291,473.	1,526,669.		
24 Line 23 minus line 17	227,689.	259,692.	218,172.	178,590.	884,143.		
25 Enter 1% of line 23	4,161.	4,260.	3,931.	2,915.			
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e) line 24				26a	N/A	
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 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the sum of all these excess amounts.					26b	N/A	
c Total support for section 509(a)(1) test. Enter line 24, column (e).					26c	N/A	
d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					26d	N/A	
e Public support (line 26c minus line 26d total)					26e	N/A	
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f	N/A %	
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.						
(2001)	0.	(2000)	0.	(1999)	0.	(1998)	0.
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.							
(2001)	0.	(2000)	0.	(1999)	0.	(1998)	0.
c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 642,526. 20 _____ 21 _____					27c	1,451,971.	
d Add: Line 27a total _____ 0. and line 27b total _____ 0.					27d	0.	
e Public support (line 27c total minus line 27d total)					27e	1,451,971.	
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e).					27f	1,526,669.	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g	95.1071%	
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h	.2999%	

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, 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.

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

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

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures announcements and other written communications to the public dealing with student admissions, programs and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	32d	
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	33h	
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50 1975-2 C B 587 covering racial nondiscrimination? If "No " attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

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

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

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

N/A

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

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

FORM 990 **GAIN (LOSS) FROM SALE OF OTHER ASSETS** **STATEMENT** **1**

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
FIXED ASSETS JUNKED	VARIOUS	06/30/03	PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	0.	4,108.	0.	3,488.	-620.
DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
FORD TRUCK	01/25/02	06/15/03	DONATED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	12,000.	12,000.	0.	0.	0.
DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
SALE OF PALLETS	VARIOUS	06/30/03	DONATED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	390.	0.	0.	0.	390.
TO FM 990, PART I, LN 8	12,390.	16,108.	0.	3,488.	-230.

FORM 990 **SPECIAL EVENTS AND ACTIVITIES** **STATEMENT** **2**

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
CANNISTER/WISHING WELL SOUPER BOWL OF CARING CHURCHES	1,377.		1,377.		1,377.
CHARITY NIGHT	3,139.		3,139.		3,139.
SPECIAL PURPOSE DIRECT MAILINGS	100.		100.		100.
KOHLE'S GRAND OPENING	36,073.		36,073.		36,073.
BUSINESS DRESS DOWN	840.		840.		840.
PAMPERED CHEF	290.		290.		290.
SCRUB AWAY HUNGER	128.		128.		128.
	2,035.		2,035.		2,035.

WEST OHIO FOOD BANK

34-I587528

HARVEST FOR THE HUNGERY	820.	820.	820.
CHECK OUT HUNGER	2,683.	2,683.	2,683.
TO FM 990, PART I, LINE 9	47,485.	47,485.	47,485.

FORM 990 OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
OUTSIDE LABOR	4,531.	4,531.		
INSURANCE	877.		877.	
MISCELLANEOUS EXPENSE	565.	565.		
OTHER PROFESSIONAL FEES	4,913.	4,913.		
BANK AND CREDIT CARD EXPENSE	1,862.		1,862.	
PRODUCT PURCHASES & RELATED EXPENSES	37,285.	37,285.		
SPECIAL EVENTS EXPENSE	17,644.			17,644.
TOTAL TO FM 990, LN 43	67,677.	47,294.	2,739.	17,644.

FORM 990 OTHER LIABILITIES STATEMENT 4

DESCRIPTION	AMOUNT
AGENCY FOOD HELD FOR DISTRIBUTION	317,404.
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B	317,404.

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES

STATEMENT 5

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
BAMBI MARKHAM 123 EAST WAYNE STREET LIMA, OHIO 45802-1566	EXECUTIVE DIRECTOR 40+	38,188.	0.	0.
DR. PHIL COMPTON 0475 TOWNSHIP RD. 30 ADA, OHIO 45810	PRESIDENT 10/MO	0.	0.	0.
JOYCE ROOP 5100 PLEASANT DR. ELIDA, OHIO 45807	TREASURER 2/MO	0.	0.	0.
RENEE PLACE 2450 ADA ROAD LIMA, OHIO 45801	SECRETARY 2/MO	0.	0.	0.
KAY WELLMAN 730 W. MARKET STREET LIMA, OHIO 45805	BOARD MEMBER 2/MO	0.	0.	0.
ELIZABETH JACKSON 115 PARTRIDGE PLACE LIMA, OHIO 45805	BOARD MEMBER 2/MO	0.	0.	0.
ART SHAW 501 W. GERMAN, P.O. BOX 98 NEW KNOXVILLE, OHIO 45871	BOARD MEMBER 2/MO	0.	0.	0.
GARY SELHORST 3850 SEARFOSS RD. COLUMBUS GROVE, OH 45830	BOARD MEMBER 2/MO	0.	0.	0.
PASTOR KENNETH BAKER 9503 CELINA MEADOW RD. CELINA, OH 45822	BOARD MEMBER 2/MO	0.	0.	0.
JIM LEITZ 123 EAST WAYNE STREET LIMA, OHIO 45801	BOARD MEMBER 2/MO	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		38,188.	0.	0.

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 6
PART III, LINE 3

ONLY NONPROFIT AGENCIES QUALIFY TO RECEIVE FOOD--NO DISTRIBUTIONS TO INDIVIDUALS

SCHEDULE A OTHER INCOME STATEMENT 7

DESCRIPTION	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT
MISCELLANEOUS	-3,503.	4,017.	3,904.	6,737.
SPECIAL EVENTS	41,500.	17,465.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	37,997.	21,482.	3,904.	6,737.

WEST OHIO FOOD BANK
 FIXED ASSET DEPRECIATION RECONCILIATION
 June 30, 2003

Attachment to Form 990 # 34-1587528

FIXED ASSETS ACCOUNT	COST				ACCUM DEP				NET BOOK		
	G L NO	BEGIN BAL	ADDITIONS	DELETIONS	ENDING BAL	G L NO	BEGIN BAL	ADDITIONS		DELETIONS	ENDING BAL
BUILDING & IMPROVEMENTS	1910	26,608 25			26,608 25	1911	6,798 81	2,012 93		8,811 74	17,796 51
EQUIPMENT	1920	124,855 87	18,237 05	14,812 78	128,280 14	1921	42,875 23	12,234 21	2,192 29	52,917 15	75,362 99
OFFICE EQUIP & FURNITURE	1930	77,349 21	1,583 64	1,295 00	77,637 85	1931	31,810 03	11,984 51	1,295 00	42,499 54	35,138 31
LAND	1940	0 00			0 00	N/A	0 00			0 00	0 00
TOTALS		<u>228,813.33</u>	<u>19,820.69</u>	<u>16,107.78</u>	<u>232,526.24</u>		<u>81,484.07</u>	<u>26,231.65</u>	<u>3,487.29</u>	<u>104,228.43</u>	<u>128,297.81</u>
								A/C 8105			

Page 3, Part IV, Line 57