

PUBLIC DISCLOSURE COPY

TAX RETURN FILING INSTRUCTIONS

** FORM 990 PUBLIC DISCLOSURE COPY **

FOR THE YEAR ENDING

December 31, 2009

Prepared for	Food & Friends, Inc. 219 Riggs Road, NE Washington, DC 20011
Prepared by	Drolet & Associates, P.L.L.C 1901 L Street, NW #250 Washington, DC 20036
Amount due or refund	Not applicable
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Not applicable
Return must be mailed on or before	Not applicable
Special Instructions	This copy of the return is provided ONLY for Public Disclosure purposes. Any confidential information regarding large donors has been removed.

Form **990**

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

2009

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 2009 calendar year, or tax year beginning

and ending

B Check if applicable:

- Address change
- Name change
- Initial return
- Terminated
- Amended return
- Application pending

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

C Name of organization

FOOD & FRIENDS, INC.

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

219 RIGGS ROAD, NE

Room/suite

City or town, state or country, and ZIP + 4

WASHINGTON, DC 20011

F Name and address of principal officer: **CRAIG M. SHNIDERMAN**
ADDRESS: SAME AS C ABOVE

D Employer identification number

52-1648941

E Telephone number

202-269-2277

G Gross receipts \$ **9,208,422.**

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

H(b) Are all affiliates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number

I Tax-exempt status: 501(c) (3) (insert no.) 4947(a)(1) or 527

J Website: **WWW.FOODANDFRIENDS.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1989** **M** State of legal domicile: **DC**

Part I Summary

Activities & Governance			
1	Briefly describe the organization's mission or most significant activities: PROVIDE LIFE-SUSTAINING NUTRITION TO PEOPLE WITH HIV/AIDS, CANCER & OTHER ILLNESSES.		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	20
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
5	Total number of employees (Part V, line 2a)	5	67
6	Total number of volunteers (estimate if necessary)	6	11261
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	13,067.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	9,368.
Revenue		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	7,670,465.	6,959,053.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9,856.	-22,861.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	32,573.	30,717.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,712,894.	6,966,909.
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,120,541.	3,721,824.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25)	1,066,935.	
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	3,626,132.	3,384,540.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	7,746,673.	7,106,364.
19	Revenue less expenses. Subtract line 18 from line 12	-33,779.	-139,455.
Net Assets or Fund Balances		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	12,856,489.	12,594,460.
21	Total liabilities (Part X, line 26)	1,719,855.	1,204,946.
22	Net assets or fund balances. Subtract line 21 from line 20	11,136,634.	11,389,514.

Part II Signature Block

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

Sign Here

Signature of officer

Date

CRAIG M. SHNIDERMAN, EXECUTIVE DIRECTOR

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

Date

8/19/10

Check if self-employed

Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

DROLET & ASSOCIATES, P.L.L.C
1901 L STREET, NW #250
WASHINGTON, DC 20036

EIN

Phone no. **202-822-0717**

May the IRS discuss this return with the preparer shown above? (see instructions)

Yes No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
FOSTER A COMMUNITY CARING FOR THOSE LIVING WITH HIV/AIDS, CANCER AND OTHER LIFE-CHALLENGING ILLNESSES BY PREPARING AND DELIVERING SPECIALIZED MEALS AND GROCERIES ALONG WITH NUTRITION COUNSELING.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
If "Yes," describe these new services on Schedule O. [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If "Yes," describe these changes on Schedule O. [] Yes [X] No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 3,344,746. including grants of \$) (Revenue \$)
IN 2009 FOOD & FRIENDS' STAFF AND MORE THAN 11,000 VOLUNTEERS PROVIDED OVER 539,000 SPECIALIZED MEALS THROUGH OUR HOME-DELIVERED MEALS SERVICE TO MORE THAN 1,900 PEOPLE LIVING WITH HIV/AIDS, CANCER AND OTHER LIFE-CHALLENGING ILLNESSES AND THEIR CAREGIVERS. THIS REPRESENTS MORE THAN A 5.5% GROWTH IN MEALS.
FOOD & FRIENDS IS PROUD TO HAVE EARNED A SECOND CONSECUTIVE 4-STAR RATING FROM CHARITY NAVIGATOR FOR SOUND FISCAL MANAGEMENT.

4b (Code:) (Expenses \$ 1,964,374. including grants of \$) (Revenue \$)
IN 2009 FOOD & FRIENDS' STAFF AND MORE THAN 11,000 VOLUNTEERS PROVIDED OVER 404,000 MEALS THROUGH OUR GROCERIES TO GO SERVICE TO OVER 800 PEOPLE LIVING WITH HIV/AIDS, CANCER AND OTHER LIFE-CHALLENGING ILLNESSES AND THEIR CAREGIVERS. THIS REPRESENTS NEARLY 9.5% GROWTH IN MEALS.

4c (Code:) (Expenses \$ 437,402. including grants of \$) (Revenue \$)
IN 2009, FOOD & FRIENDS' COMMUNITY DIETITIANS MADE MORE THAN 5,800 NUTRITION CONTACTS, PROVIDING INDIVIDUAL NUTRITION COUNSELING TO FOOD & FRIENDS' CLIENTS AND OTHERS IN THE COMMUNITY LIVING WITH LIFE-CHALLENGING ILLNESS. NUTRITION COUNSELING TYPICALLY INCLUDES A FULL ASSESSMENT OF BODY COMPOSITION AND DIET ANALYSIS AND IN-DEPTH NUTRITION EDUCATION INDIVIDUALIZED TO EACH CLIENT'S NEEDS. THESE SERVICES ARE FREE OF CHARGE TO RECIPIENTS AND INCLUDE HANDS-ON COOKING CLASSES AND SEMINARS ON A HOST OF NUTRITION TOPICS.

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

4e Total program service expenses \$ 5,746,522.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
	• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	Yes No X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	X	
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

