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

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

Form **990** (2014)

Department of the Treasury

Information about Form 990 and its instructions is at www.irs.gov/form990

A F	or the	2014 calendar year, or tax year beginning and its instructions is at wy			nispection		
		C Name of organization		4:4: .	ation mount or		
B C	heck if oplicabl		D Employer ide	enunc	auon number		
	Addre:	S MUE HERAN BOOD INTENTANTIE THO					
	∃Name	DATE OF MARKET		- 0	77107		
ļ	_chang		····		573197		
<u></u>	_]return	Number and street (or P.O. box if mail is not delivered to street address) Room/	_ ,				
L	Final return/	C/O DOUGLAS RAUCH, 54 WILDE RD		517	620-2924		
	termin ated	City or fown, state or province, country, and ZIP or foreign postal code	G Grass receipts \$		966,401.		
	Ameno return	WADAN, MA UZ408	H(a) Is this a gro				
	Applic	F Name and address of principal officer. DOOGLAS RAUCH	for subordi	nates?	Yes X No		
	pendir	SAME AS C ABOVE	H(b) Are all subordi	nates inc	cluded? Yes No		
1 7	ax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527 If "No," atta	ach a l	list. (see instructions)		
JV	Vebsit	e: > HTTP://DAILYTABLE.ORG	H(c) Group exe	mption	number 🕨		
KF	orm of	organization: X Corporation	Year of formation: 201	12 м	State of legal domicile: MA		
	ırt I	Summary					
		Briefly describe the organization's mission or most significant activities: SEE SCHI	EDULE O				
Activities & Governance	•	<u></u>					
Б	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of	more than 25% of its	net as	sets		
Ver					4		
ဇ္ဟ		Number of independent voting members of the governing body (Part VI, line 1b)			4		
≪5		Total number of individuals employed in calendar year 2014 (Part V, line 2a)		 	6		
ĕ		· · · · · · · · · · · · · · · · · · ·			0		
Ę		Total number of volunteers (estimate if necessary)			0.		
Ac		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
	b	Net unrelated business taxable income from Form 990-T, line 34		7b			
			Prior Year	^	Current Year		
Revenue		Contributions and grants (Part VIII, line 1h)	1	0.	966,398.		
		Program service revenue (Part VIII, line 2g)		0.	0.		
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	3.		
1,1.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	966,401.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1·3)		0.	11,513.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
ç	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0. 228			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.			
b e	b	Total fundraising expenses (Part IX, column (D), line 25) 44,308.					
ω		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		0.	<u> 122,832.</u>		
		Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25)		0.	363,158		
	19	Revenue less expenses. Subtract line 18 from line 12		0.	603,243.		
Net Assets or Fund Balances			Beginning of Current	Year	End of Year		
ets	20	Total assets (Part X, line 16)	46,9		949,589.		
Ass Ba	21	Total liabilities (Part X, line 26)	100,0		400,445.		
<u>se</u>	22	Net assets or fund balances. Subtract line 21 from line 20	-53,0		549,144.		
	art II	Signature Block	<u></u>				
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and s	tatements, and to the bes	st of my	knowledge and belief, it is		
		et, and complete. Declaration of preparer (other than officer) is based on all information of which pre			•		
ii u c	, correc	Is and complete. Declaration of property (action than amost / to cases of all minimum assistances)					
C:-	_	Signature of officer	Date				
Sig		DOUGLAS RAUCH, PRESIDENT	-				
Her	е	Type or print name and title					
			Date Ca	ieck	PTIN		
		Print/Type preparer's name Preparer's signature	11/06/15	_	- -1		
Paid		ALFONSO PERILLO			04-2442519		
This state and the state of the							
Use	Only	Firm's address 160 FEDERAL STREET, 9TH FLOOR	Dir.	_ (1 '	7 227 6161		
		BOSTON, MA 02110	Phone n	0. 0 T	7-227-6161		
May	/ the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No		

	990 (2Ó14) THE URBAN FO	OD INITIATIVE, INC	46-0673197 Pag
Pai	rt III Statement of Program Service Ac	complishments	_
	Check if Schedule O contains a response or	note to any line in this Part III	
1	Briefly describe the organization's mission:		
	AT DAILY TABLE WE BELIEVE	THAT DELICIOUS, WH	OLESOME AND AFFORDABLE
	FOOD SHOULD BE AVAILABLE		
			Y MAKING IT EASY FOR THEM
	TO CHOOSE TASTY, HEALTHY,		• • • • • • • • • • • • • • • • • • • •
	Did the organization undertake any significant pro-		
4			
			Yes 🔝
	If "Yes," describe these new services on Schedule		
3	Did the organization cease conducting, or make si	gnificant changes in how it conducts, a	any program services? Yes X
	If "Yes," describe these changes on Schedule O.		
1	Describe the organization's program service accor	nplishments for each of its three larges	st program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are re-	equired to report the amount of grants	and allocations to others, the total expenses, and
	revenue, if any, for each program service reported		
la			11,513.) (Revenue \$
	CREATE A COMMUNITY-BASED		
			NALLY ADVANTAGED FOOD ITEM
			MALLI ADVANTAGED FOOD ITEM
	AT A FRACTION OF TYPICAL	PRICES.	
	-	······································	
		<u> </u>	

b	(Code:) (Expenses \$	including grants of \$) (Revenue \$
		<u></u>	
			<u> </u>
			
		Man. 11. 11. 11. 11. 11. 11. 11. 11. 11. 1	
	4444		
С	(Code:) (Expenses \$	including grants of \$) (Revenue \$
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			· · · · · · · · · · · · · · · · · · ·
			<u> </u>
	. <u> </u>		
	Other program services (Describe in Schedule O.)		
d	Other program services (besones in concede of		
d		ants of \$	(Revenue S
d e	(Expenses \$ including gr Total program service expenses ▶	192,911.	(Revenue S

5

A G 0

Form 990 (2014) THE URBAN FO Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	!		į
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			į
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			i
	Schedule D, Part III	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			İ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			1
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	-	<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44-		Х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11d	Х	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	1te	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110	21	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
10-	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- ' ' '	-21	
ıza		12a	Х	ł
_	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
n	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			1
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			Ì
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Χ_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_X_
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		(0014)

Form 990 (2014) THE URBAN FOOD INITIATIVE, INC Part IV Checklist of Required Schedules (continued)

	Did the executation was at more than \$5,000 at weather each as a little and described		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	0.4	x	
		21	Λ	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	00		Х
		22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			١,,
	Schedule J	23_		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			١,,
	Schedule K. If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
••	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
.0	instructions for applicable filing thresholds, conditions, and exceptions):			
_		200		Х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	77	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?		İ	ĺ
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	_32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34_		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
,,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
38	Did the organization complete Schedule () and provide explanations in Schedule O for Part VI lines 1 th and 197			1

Form 990 (2014) THE URBAN FOOD INITIATIVE, INC Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					
			***************************************		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	ol			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and re		ble gaming			
	(gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	rns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
	If "Yes," has it filed a Form 990 T for this year? If "No," to line 3b, provide an explanation in Schedule	ο		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other		ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
ь	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccour	ts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		_X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action?	,	5b		_X_
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	any contributions that were not tax deductible as charitable contributions?			6a		_X_
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	tions o	r gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	provided to the payor?	7a		<u>X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			
	to file Form 8282?			7c		<u>X</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti			7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Fi			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by th	e			
	sponsoring organization have excess business holdings at any time during the year?			8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			١	1	
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	100				l
a	Initiation fees and capital contributions included on Part VIII, line 12	10a 10b				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	[100	<u> </u>			
11	Section 501(c)(12) organizations. Enter:	11a				
a	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	116				
b		11b			l	
40-	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		7	12a		
		1	İ	124		
12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		1		
13	Is the organization licensed to issue qualified health plans in more than one state?			13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.				-	
ل م	Enter the amount of reserves the organization is required to maintain by the states in which the					
b	organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand			1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu			14b		
	The state of the s			Corp	. 000	/201//

Form 990 (2014) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
J	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	Territoria decida e regiona membrane apost poroles net regando by the internal revente decide.		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1,4		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
	Did the organization regularly and consistently monitor and enforce compliance with the policy? # "Yes," describe	125		
C		120	Х	
40	in Schedule O how this was done	12c		X
13	Did the organization have a written whistleblower policy?			X
14	Did the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-	Х	
	The organization's CEO, Executive Director, or top management official	15a	Α.	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	İ		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			_v
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	401		
<u></u>	exempt status with respect to such arrangements?	16b		L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed MA	مرعنامه	.—— lo	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avalidO	ıc	
	for public inspection. Indicate how you made these available. Check all that apply.			
,-	Own website Another's website X Upon request Other (explain in Schedule O)	d finas	امزما	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	a milan	udl	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	ECRATCHIT, INC (781)356-8050			
	625 GROVE STREET, BRAINTREE, MA 02184			

432006 11-07-14

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

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			_ (0	2)			(D)	(E)	(F)
Name and Title	Average	(do		Posi neck		than :	one	Reportable	Reportable	Estimated
	hours per	box, uni		ox, unless person is both an ifficer and a director/trustee)		h an	compensation	compensation	amount of	
	week		C LI			1	100,	from	from related	other
	(list any hours for	director				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	10 9	stee			sater		(W-2/1099-MISC)	(17 2) 1033 (4)(00)	organization
	organizations	ruste	al trus		ye.	in the second		(** 2) 1000 mileo,		and related
	below	E E	lion.	_	e e	stco	55			organizations
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employed	Former			•
1) DOUGLAS RAUCH	1.00									
RESIDENT/DIRECTOR		X		Х				0.	0.	0
2) JOSE ALVAREZ	1.00									
REASURER/CLERK/DIRECTOR		X		X				0.	0.	0
3) JAY MARTIN	1.00									
DIRECTOR		X						0.	0.	0
4) BILL WALCZAK	1.00	1						_	_	_
DIRECTOR		X				<u> </u>		0.	0.	0
(5) RUDOLF RUBENIS	40.00								_	_
EXECUTIVE DIRECTOR		<u> </u>	_	X		_		91,724.	0.	0
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432008 11-07-14 Form 990 (2014)

\$100,000 of compensation from the organization

				D INITIA	TIVE, INC		46-0673	197 Pag
rt \	/[[]							_
		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclu from tax und sections 512 - 514
1	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grant similar amounts not included above the state of th	1b 1c 1d 1d ions) 1e 1s, and 1f	966,398. 42,593.				
	h	Total. Add lines 1a-1f		>	966,398.			
				Business Code				
2	a b c							
	e							
	f	All other program service reve						
		Total. Add lines 2a-2f						
3		Investment income (including				•		,
4 5		other similar amounts)	exempt bond p	roceeds >	3.			
			(i) Real	(ii) Personal				
6		Gross rents Less: rental expenses Rental income or (loss)						
	d	Net rental income or (loss)						
7	а	Gross amount from sales of	(i) Securities	(ii) Other				
	b	assets other than inventory Less: cost or other basis and sales expenses						:
	Ç	Gain or (loss)						
		Net gain or (loss)						
8	а	Gross income from fundraising including \$contributions reported on line	of					
		Part IV, line 18	, a b					
_		Net income or (loss) from fund	-	P				
9	а	Gross income from gaming ac Part IV, line 19						
	h	Less: direct expenses						
		Net income or (loss) from gam						
10		Gross sales of inventory, less and allowances	returns					
		Less: cost of goods sold Net income or (loss) from sale	b					
	<u></u>	Miscellaneous Revenu		Business Code				
11	a	Miccolarizada Havaria				_		
' '	b	all the later of t						
	c							
	d	All other revenue					-	
	e	Total. Add lines 11a-11d						
1		Total revenue. See instructions.			966,401)	0.	0.	1

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		CXPCH3GG	general expenses	Схреносо
	and domestic governments. See Part IV, line 21	11,513.	11,513.		
2	Grants and other assistance to domestic				, ,,,,,
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members		·	<u> </u>	
5	Compensation of current officers, directors,				
	trustees, and key employees	91,724.	56,869.	28,434.	6,421
6	Compensation not included above, to disqualified		•	1	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	114,930.	71,874.	35,904.	7,152
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	4,000.	3,200.	800.	
10	Payroll taxes	18,159.	11,313.	5,653.	1,193
11	Fees for services (non-employees):				
а	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	82,643.	16,351.	50,312.	15,980
12	Advertising and promotion	453.	453.		
13	Office expenses	444.		444.	·
14	Information technology				
15	Royalties				
16	Occupancy	12,502.	10,492.	2,010.	
17	Travel	1,087.			1,087
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	509.	164.		345
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,279.		1,279.	
24	Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e, If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)				44 557
а	FISCAL AGENT FEE	11,996.			11,996
þ	KITCHEN RELATED EXPENSE	9,406.	9,406.		
С	PAYROLL PROCESSING FEES	2,048.	1,276.	638.	134
d	LICENSES AND FEES	465.		465.	
е	All other expenses	262 452	100 011	105 000	44 200
25	Total functional expenses. Add lines 1 through 24e	363,158.	192,911.	125,939.	44,308
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.		Į.		

Form 990 (2014)

	Check if Schedule O contains a response or note to any line in this Part X		····	
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	31,890.	1	381,030
2	Savings and temporary cash investments	15,011.	2	10,015
3	Pledges and grants receivable, net		3	268,000
			4	
	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	· · · · · · · · · · · · · · · · · · ·		5	
6				
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	· · · · · · · · · · · · · · · · · · ·		6	
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				949,589
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		100/000.		303,300
				
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25	· · · · · · · · · · · · · · · · · · ·			
		Λ	25	10,492
00				400,445
20		100,000.	-20	100,113
07	· · · · · · · · · · · · · · · · · · ·	-53 099	27	281,144
		33,033.		268,000
	, , ,	···		200,000
29	·		25	
20	•		30	
				-
				
	Total net assets or fund balances	-53,099.		549,144
-3.3	Total liet assets of fully balances	46,901.		949,589
	2 3 4 5 6 7 8 9 10 a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(n)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10 Tax-exempt bond liabilities 19 Escrow or custodial account liability. Complete Part IV of Schedule D 20 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 20 Secured mortgages and notes payable to unrelated thirid parties 21 Unsecured notes and loans payable to unrelated thirid parties 22 Unsecured notes and loans payable to unrelated thirid parties 23 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here 7 Imporarily restricted net assets 20 Temporarily restricted net assets 31 Temporarily restricted net assets 32 Temporarily res	Savings and temporary cash investments	Cash - non-interest-bearing 31, 890. 1

		6-06731	97	Pag	_{je} 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)				<u>01.</u>
2	Total expenses (must equal Part IX, column (A), line 25)				<u>58.</u>
3	Revenue less expenses. Subtract line 2 from line 1	1	<u> 503</u>	, 2	<u>43.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<u>, </u>	<u>-53</u>	, 0	<u>99.</u>
5	Net unrealized gains (losses) on investments	;			
6	Donated services and use of facilities	;			
7	Investment expenses 7	•			
8	Prior period adjustments	1			
9	Other changes in net assets or fund balances (explain in Schedule O))	-1	, 0	00.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	o !	549	, 1	44.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
			,	/es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on				
	separate basis, consolidated basis, or both:			Ì	
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate ba				
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis			1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au	ıdit.		Ì	
•	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedu				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single				
	Act and OMB Circular A-133?		За		Х
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
-	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	I	3ь		
	and the second supplies to the second			90 f	2014)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

		THE	URBAN FOOD	INITIATIVE,	INC		4	<u>6-0673197 </u>					
Pa	rt I	Reason for Public	Charity Status (All organizations must co	mplete th	is part.) Se	e instructions.						
The	organ	ization is not a private found					<u>"</u>						
1				-	-		VAV(i)						
2	\equiv	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
	=				otion 170	/LV4VAV;;	:1						
3		A hospital or a cooperative	•			· · · · · · · · · · · · · · · · · · ·	,	Maria de la compansión de la compansión de la compansión de la compansión de la compansión de la compansión de					
4	!	A medical research organiz	ation operated in co	injunction with a hospital	described	in sectio	n 170(p)(1)(A)(III). Enter	me nospitai s name,					
		city, and state:											
5	L	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
		section 170(b)(1)(A)(iv). (C	Complete Part II.)										
6	\sqsubseteq	A federal, state, or local go	vernment or governr	mental unit described in s	section 17	'0(b)(1)(A)	(v).						
7	X	An organization that norma	illy receives a substa	antial part of its support f	rom a gov	ernmental	unit or from the general	public described in					
		section 170(b)(1)(A)(vi), (C	omplete Part II.)										
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Part	: 11.)								
9		An organization that norma	illy receives: (1) more	e than 33 1/3% of its sup	port from	contributio	ons, membership fees, a	nd gross receipts from					
		activities related to its exen											
		income and unrelated busin	•										
		See section 509(a)(2). (Co		,									
10		An organization organized	•	sively to test for public sa	fetv. See :	section 50	9(a)(4).						
11	一	An organization organized						purposes of one or					
•		more publicly supported or											
		lines 11a through 11d that	_										
_		Type I. A supporting orga	= :					aivina					
а		the supported organization											
					тпајонту	or tile dilet	ctors or trustees or the s	apporting					
		organization. You must o			atalatata ta		ad avanaination(s), by ba	vina					
b	L	☐ Type II. A supporting org											
		control or management of			ame perso	ns mat co	ntroi or manage the sup	porteu					
	_	organization(s). You mus	•										
C								ed with,					
	F***	its supported organizatio	• • •	•									
d	I L		-										
		that is not functionally int						veness					
	_	requirement (see instruct											
е		☐ Check this box if the orga					Type I, Type II, Type III						
		functionally integrated, o	r Type III non-functio	onally integrated supporti	ng organia	zation.							
f	Ente	er the number of supported (organizations				***************************************						
g		vide the following information	n about the supporte	ed organization(s).				<u>-</u>					
	((ii) EIN	(iii) Type of organization	(iv) Is the o listed i	rganization							
		organization		(described on lines 1-9 above or IRC section		document?	support (see Instructions)	other support (see Instructions)					
				(see instructions))	Yes	No	instructions)	Instructions)					
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LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

46-0673197 Page 2

Schedule A (Form 990 or 990-EZ) 2014 THE URBAN FOOD INITIATIVE, INC 46-0673:

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) ► 📘	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")			85,000.	105,000.	966,398.	1,156,398.
2	Tax revenues levied for the organ-						,
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3			85,000.	105,000.	966,398.	1 156 398.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,					-	
	column (f)						757,976.
6	Public support, Subtract line 5 from line 4.						398,422.
<u>Se</u>	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ► 📘	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	<u>-</u>		85,000.	105,000.	966,398.	1,156,398.
8	Gross income from interest,		!				
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources				11.	3.	14.
9	Net income from unrelated business						
	activities, whether or not the				i		
	business is regularly carried on					·	
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support, Add lines 7 through 10					,	1,156,412,
12	· ·	•				12	
13	First five years. If the Form 990 is for t	the organization's	s first, second, thi	ird, <mark>fourth,</mark> or fifth ta	x year as a section	n 501(c)(3)	
	organization, check this box and stop					<u> </u>	> X
	ction C. Computation of Public						
14	Public support percentage for 2014 (lin		•	• • • • • • • • • • • • • • • • • • • •		14	
15							%
16	33 1/3% support test - 2014, If the or						
_	stop here. The organization qualifies a						
t	33 1/3% support test - 2013. If the or						
	and stop here. The organization qualifi						
17	10% -facts-and-circumstances test						
	and if the organization meets the "facts						
	meets the "facts-and-circumstances" to						
ì	10% -facts-and-circumstances test						
	more, and if the organization meets the						
40	organization meets the "facts-and-circularity organization organization. If the organization						
_18	Private joundation. If the organization	дад поселеска	DOX OF RITE 13, 10	Ja, 100, 17a, Ut 17L		edule A (Form 990	
					SCHE	GREVE OUR SEC	0. 000 EE, 2014

Schedule A (Form 990 or 990-EZ) 2014 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support	Ott, picase com	pioto i dir iii				
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus						
iness under section 513						'
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf					•	
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)		<u> </u>		<u> </u>		
Section B. Total Support		1				
Calendar year (or fiscal year beginning in) ► 📙	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on					!	
securities loans, rents, royalties				ļ		
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is				-		
regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>		<u></u>		
14 First five years. If the Form 990 is for t	he organization'	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	on 501(c)(3) organiz	ation,
check this box and stop here						<u></u> ▶└
Section C. Computation of Public					 	
15 Public support percentage for 2014 (lin					15	
16 Public support percentage from 2013 \$,,		16	9/
Section D. Computation of Invest			10		11	
17 Investment income percentage for 201					17	9
18 Investment income percentage from 20					18 22 1/394 and line 1	
19a 33 1/3% support tests - 2014. If the o						
more than 33 1/3%, check this box and						
b 33 1/3% support tests - 2013. If the c	rganization did i	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	anu 🛌 🦳
line 18 is not more than 33 1/3%, chec						
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19 <u>b, check th</u>	nis box and see in	structions	<u></u>

432023 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

2

1

8

Part IV Supporting Organizations

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

Section A. All Supporting Organizations	

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

	Yes	No
1		
2		
3a		
3b		
3c		
_4a		
4b		
_4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
100		
10b		

20999 1

3b

Schedule A (Form 990 or 990-EZ) 2014

instructions).

	dule A (Form 990 or 990 EZ) 2014 THE URBAN FOO			<u>46-0673197 Page 7</u>
Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	<u> </u>
Sect	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt	pt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	\$	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive)	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	,	(i)	(ii)	(iii)
_		Excess Distributions	Underdistributions	Distributable
Sect	on E - Distribution Allocations (see instructions)		Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014	111-11-		
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:	· · · · · · · · · · · · · · · · · · ·		
a				
ь				
c				
d	" -	,		
	From 2013			
	Total of lines 3a through e			
	Applied to underdistributions of prior years		*****	
	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
÷	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D.			
7	line 7:			
_	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.		<u> </u>	
5	Remaining underdistributions for years prior to 2014, if			
J	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
O	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c. Breakdown of line 7:			
8	DISANOWITO IIIIS 7.			
a				-
<u>b</u>				
Ç	Excess from 2013			
	_ : ::====:::::::====:::::=============			
e	Excess from 2014	<u> </u>		

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 THE URBAN FOOD INITIATIVE, INC	46-0673197 Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a o	r 17b; and Part III, line 12.
Also complete this part for any additional information. (See instructions).	
DODM 000 GOVERNUE & GVORE VEND	
FORM 990 SCHEDULE A - SHORT YEAR	
THE ORGANIZATION WAS CREATED ON 7/25/2012. THEREFORE THE 2	012 TAX
THE CHARLEST TOO MEETING OF THE STATE OF THE	V de la de l
RETURN WAS FOR THE SHORT YEAR 7/25/12 - 12/31/12.	
	····
	· · · · · · · · · · · · · · · · · · ·

06561106 700333 20999

SCHEDULE D

Department of the Treasury

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Internal Revenue Service Name of the exception

Inspection

INGII	THE URBAN FOOD INITIATIVE, INC		Emp	46-0673	
Pa	art I Organizations Maintaining Donor Advised Funds or Other Similar Fund	ls or A	ccou		
\	organization answered "Yes" to Form 990, Part IV, line 6.				
	(a) Donor advised funds	(b) Fund	ds and other acco	ounts
1	Total number at end of year	`			
2	Aggregate value of contributions to (during year)				
3	Assessment about the second second second				
4	Aggregate value of grants from (during year) Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor adv	igad fug	do		
5	- · · · · · · · · · · · · · · · · · · ·				No
_	are the organization's property, subject to the organization's exclusive legal control?		,	Yes	L No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose				
				Yes	☐ No
Pa	impermissible private benefit? Int II Conservation Easements. Complete if the organization answered "Yes" to Form 990,			Tes	L NO
1	Purpose(s) of conservation easements held by the organization (check all that apply).	ait iv,	11116 7.		
ı	Preservation of land for public use (e.g., recreation or education) Preservation of a his	torically	impod	ant land area	
		runea ni:	Stone 9	structure	
_	Preservation of open space	f		tion non	the lest
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form	i oi a co	nserva	uon easement on	me iasi
	day of the tax year.		 -	Hold at the End of t	ha Tay Vans
_	Total number of announcition assembnts			Held at the End of t	ille lax rear
a			2a		
b			2b 2c		
c			2C		
d			2d		
3	listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the			during the tay	
3	year	ie organ	ization	during the tax	
,					
4	Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	•			
5	violations, and enforcement of the conservation easements it holds?				□ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements				L NO
6 7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements durin				
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 17	-		· ———	_
•	· · · · · · · · · · · · · · · · · · ·			Yes	☐ No
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expens				
9	include, if applicable, the text of the footnote to the organization's financial statements that describes				
	conservation easements.	s the org	igi iiza ii	on a accounting i	.
Pa	irt III Organizations Maintaining Collections of Art, Historical Treasures, or Constitution	Other S	Simila	ar Assets.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.				
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue state	ment ar	ıd bala	nce sheet works	of art.
	historical treasures, or other similar assets held for public exhibition, education, or research in further				
	the text of the footnote to its financial statements that describes these items.				
h	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statemen	nt and b	alance	sheet works of ar	t. historical
_	treasures, or other similar assets held for public exhibition, education, or research in furtherance of p				
	relating to these items:				•
	(i) Revenue included in Form 990, Part VIII, line 1		▶ \$	S	
	(ii) Assets included in Form 990, Part X		▶ \$	- 	
2	If the organization received or held works of art, historical treasures, or other similar assets for finance		provide		
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	- ''			
а	B. C. Laddy B. Coop Brad Will Key 4		▶ \$	S	
	Assets included in Form 990, Part X		> \$		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2014

		<u>AN FOOD IN</u>						<u>73197</u>	
Pai	t III Organizations Maintaining C	ollections of A	rt, Historica	l Treasures,	or Othe	r Simila	ır Asse	ts (continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	ds, check any o	the following th	at are a si	gnificant ι	use of its	collection i	tems
	(check all that apply):								
а	Public exhibition	c	i Loan o	exchange prog	rams				
b	Scholarly research	€	e Dother_						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	in how they furtl	ner the organiza	tion's exer	mpt purpo	se in Part	t XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, historical	treasures, or ot	her simil <mark>a</mark> r	assets			
	to be sold to raise funds rather than to be m							Yes	No_
Par	t IV Escrow and Custodial Arran		ete if the organi	zation answered	l "Yes" to	Form 990,	Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custodi	ian or other intermed	diary for contrib	utions or other a	issets not	included			
	on Form 990, Part X?	************************	, 4, 5, 4, 5, 5,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,		Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII								
								Amount	
С	Beginning balance	,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1c			
d	Additions during the year								
e	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on Fe							Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	xplanation has t	een provided in	Part XIII	.,,.,,,	_1		
Par	t V Endowment Funds. Complete i	f the organization an	nswered "Yes" t	o Form 990, Par	t IV, line 1	0.			
		(a) Current year	(b) Prior yea	ır (c) Two ye	ars back	(d) Three ye	ears back	(e) Four ye	ears back
1a	Beginning of year balance								
b	Contributions	304,000,							
c	Net investment earnings, gains, and losses		<u></u>						
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	36,000,							
f	Administrative expenses	·							
g	End of year balance								
2	Provide the estimated percentage of the curr		e (line 1g, colur	nn (a)) held as:					
а	Board designated or quasi-endowment		%						
ь	Permanent endowment	%							
С	Temporarily restricted endowment ▶ 10	0.00 %							
	The percentages in lines 2a, 2b, and 2c shou								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation that are h	eld and administ	ered for th	ne organiza	ation	_	
	by:							Y	es No
	(i) unrelated organizations	.,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			. , , ,		3a(i)	X
	(ii) related organizations							3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedule R?	***************************************				3b	
4	Describe in Part XIII the intended uses of the	organization's endo	owment funds.						
Par	t VI Land, Buildings, and Equipm	ient.							
	Complete if the organization answere	d "Yes" to Form 990), Part IV, line 11	a. See Form 99	0, Part X, I	ine 10.			
	Description of property	(a) Cost or o	1 , ,	Cost or other	1	cumulate	a	(d) Book v	/alue
		basis (investr	ment) b	asis (other)	dep	reciation			
1a	Land						_		
b	Buildings				ļ				
С	Leasehold improvements			<u> </u>	1				
d	Equipment				1				
	Other				<u> </u>		$-\!$		
Total	Add lines 1a through 1e. (Column (d) must e	qual Form 990 Part	X. column (B) I	ine 10c.)					0.

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014 THE UR	BAN FOOD INITIATI	VE, INC	46-0673197 Page 3
Part VII Investments - Other Secur	rities.	VII, 1110	40 007JIJ7 rage
Complete if the organization answe	ered "Yes" to Form 990, Part IV, line	11b. See Form 990, Part X, line	12.
(a) Description of security or category (including name	of security) (b) Book value		ost or end-of-year market value
(1) Financial derivatives	,,,,,		
(2) Closely-held equity interests	,,,,,		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) li			
Part VIII Investments - Program Re			
Complete if the organization answe	ered "Yes" to Form 990, Part IV, line	11c. See Form 990, Part X, line 1	13
(a) Description of investment	(b) Book value	(c) Method of valuation: Co	ost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) li Part IX Other Assets.	ine 13.) ►	<u> </u>	
	west #Weet to Force 000 Post IV Boo	11d See Fram COO Ded V line 1	15
Complete if the organization answe	(a) Description	11d. See Form 990, Part X, line	(b) Book value
(1) CONCEDITORION IN DROC			219,464.
(1) CONSTRUCTION-IN-PROC (2) SECURITY DEPOSIT	.000		40,000
			40,000
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X,	col. (B) line 15.)	·	259,464.
Part X Other Liabilities.			
Complete if the organization answe	ered "Yes" to Form 990, Part IV, line	11e or 11f. See Form 990, Part X	(, line 25.
1. (a) Description of liab	ility	(b) Book value	
(1) Federal income taxes			
(2) DEFERRED RENT	_	10,492.	
(3)			
(4)			
(5)			
(6)			
(7)			
/01			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII 🔀

Schedule D (Form 990) 2014

(9)

10,492.

	edule D (Form 990) 2014 THE URBAN FOOD INTTIATIVE				<u> J6 / 3 I 9 / Page 4</u>
Pai	rt XI Reconciliation of Revenue per Audited Financial Statem	nents With	n Revenue per R	eturn	l .
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a			1	
1	Total revenue, gains, and other support per audited financial statements		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	1,085,806.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	i 1			
а	Net unrealized gains (losses) on investments		440 405		
b	***************************************		119,405.		
С	Recoveries of prior year grants				
d					440 405
e				2e	119,405.
3	Subtract line 2e from line 1			3	966,401.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b		.		
þ	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add tines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	966,401.
Pai	rt XII Reconciliation of Expenses per Audited Financial Stater		n Expenses per	Hetu	rn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a				400 560
1	Total expenses and losses per audited financial statements	• • • • • • • • • • • • • • • • • • • •	***************************************	1 1	483,563.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	440 40=		
а			119,405.		
b	Prior year adjustments	1 i			
C	Other losses				
d			1,000.		
е	Add lines 2a through 2d			2e	120,405.
3	Subtract line 2e from line 1			3	363,158.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	<u>. </u>		
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	363,158.
Pai	rt XIII Supplemental Information.				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa			4; Part i	X, line 2; Part XI,
mes	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad	iditional infon	mation.		
זגם	RT V, LINE 4:				
<u> FAI</u>	(I V, DING 4:				
DUE	RING THE YEAR ENDED DECEMBER 31, 2014, TE	MPORARI	LY RESTRIC	TED	NET ASSETS
COl	NSISTED OF AMOUNTS FROM CONTRIBUTIONS REC	EIVABLE	WHOSE FUN	DS A	ARE
SCI	HEDULED TO BE RECEIVED IN 2015.	<u> </u>			
PAI	RT X, LINE 2:				
RE?	TURNS FOR TAX YEARS BEGINNING WITH THOSE	FILED F	OR THE YEA	R Ei	NDED
DEC	CEMBER 31, 2011 ARE OPEN TO EXAMINATION.				
	RT XII, LINE 2D - OTHER ADJUSTMENTS:				
- + 11	TITE! DE CHIEF THOUDIFFERING.				
	SS ON UNCOLLECTIBLE PLEDGES				

2 /

5

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization Employer identification number THE URBAN FOOD INITIATIVE, INC 46-0673197 Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Yes X No criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (book (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant or government if applicable cash grant non-cash non-cash assistance or assistance FMV, appraisal, other) assistance FAIR FOODS, INC. 540 COLUMBIA ROAD FEEDING AMERICA DORCHESTER, MA 02125 04-3043885 501(C)(3) 7,812.REPORT PROGRAM SUPPORT

3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) (2014)

0.

42

Schedule I (Form 990) (2014)

A G O

432102 10-15-14

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

Employer identification number

	THE URBAN FO	OD INI	TIATIVE,	INC	46-	06733	197	
Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of c noncash contrib	letermini		s
1	Art · Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods		·					
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities · Publicly traded							
10	Securities · Closely held stock							
11	Securities · Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -				•			
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other		·					
18	Collectibles	-						
19	Food inventory	X	25	42,593.	FEEDING AM	ERICA	A R	EPO
20	Drugs and medical supplies			•				
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other				.,			
26	Other							
27	Other							
28	Other (
29	Number of Forms 8283 received by the organiz	ation during	g the tax year for c	ontributions		•		
	for which the organization completed Form 828			l l				
							Yes	No
30a	During the year, did the organization receive by	oontributio	on any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date							í
	exempt purposes for the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	equires the review	of any non-standard contribu	tions?	31		Х
	Does the organization hire or use third parties of	-	•					
	contributions?		-		************	32a		_X_
b	If "Yes," describe in Part II.							_
33	If the organization did not report an amount in o	column (c) f	or a type of proper	ty for which column (a) is che	ecked,			
	describe in Part II.			· ·]	
HA	For Paperwork Reduction Act Notice, see t	the Instruc	tions for Form 99	0.	Schedule M	1 (Form 9	990) (2014)

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SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

THE URBAN FOOD INITIATIVE, INC

Employer identification number 46-0673197

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DAILY TABLE IS AN INNOVATIVE RETAIL APPROACH TO PROVIDING AFFORDABLE
WHOLESOME FOOD TO THE ECONOMICALLY DISADVANTAGED AND UNDERSERVED IN OUR
INNER CITIES TO HELP SOLVE THE SOCIAL CHALLENGE OF HUNGER AND OBESITY
IN AMERICA.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
GROCERIES. AND WE DO THIS IN A RESPECTFUL MANNER THAT HONORS OUR
CUSTOMER, ENGENDERING DIGNITY.
FORM 990, PART VI, SECTION B, LINE 11:
THE PRESIDENT AND TREASURER REVIEW A DRAFT OF THE FORM 990 BEFORE FILING
IT.
FORM 990, PART VI, SECTION B, LINE 12C:
AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR
COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE MAY LEAVE THE MEETING
DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT
INVOLVING THE POSSIBLE CONFLICT OF INTEREST. THE CHAIRPERSON OF THE
GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED
PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION
OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR
COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH
REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A
PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A
MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLE POSSIBLE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2014) 432211 68-27-14

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Name of the organization

THE URBAN FOOD INITIATIVE, INC

Employer identification number 46-0673197

UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING

BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED

DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S

BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE.

IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO

WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT.

IF THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A

MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT

SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER

AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF AFTER

HEARING THE MEMBER'S RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS

WARRANTED BY THE CIRCUMSTANCES, THE GOVERNING BOARD OR COMMITTEE

DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT

OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

FORM 990, PART VI, SECTION B, LINE 15A:

THE PROCESS USED FOR DETERMINING THE EXECUTIVE DIRECTOR'S COMPENSATION WAS

A MARKET BASED DETERMINATION. BY REVIEWING CURRENT COMPENSATION FOR BOTH

NPO'S WITH THE ESTIMATED \$3-5 MILLION WE EXPECTED IN THE FIRST COUPLE OF

YEARS OF OPERATING, COMBINED WITH THE COMPETITIVE SALARY FOR COMPARABLE

EXPERIENCE AMONG RETAIL EXECUTIVES, WE OFFERED OUR EXECUTIVE DIRECTOR A

BEGINNING SALARY THAT WAS WELL WITHIN THE MEDIAN OF THIS RANGE.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY & FINANCIAL STATEMENTS

ARE AVAILABLE UPON REQUEST.

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization	Page 2 Employer identification number
THE URBAN FOOD INITIATIVE, INC	46-0673197
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTANTS:	<u> </u>
PROGRAM SERVICE EXPENSES	16,351.
MANAGEMENT AND GENERAL EXPENSES	50,312.
FUNDRAISING EXPENSES	15,980.
TOTAL EXPENSES	82,643.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	82,643.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
LOSS ON UNCOLLECTIBLE PLEDGES	-1,000.