

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2014

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

A For the 2014 calendar year, or tax year beginning 7/1/2014 , and ending 6/30/2015

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

C Name of organization Loaves and Fishes Community Services
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1871 High Grove Lane
 City or town State ZIP code
Naperville IL 60540
 Foreign country name Foreign province/state/county Foreign postal code

D Employer identification number 36-3786777

E Telephone number 630-355-3663

F Name and address of principal officer:
Megan Selck 1871 High Grove Lane, Naperville, IL 60540

G Gross receipts \$ 14,432,982

H(a) Is this a group return for subsidiaries? Yes No
H(b) Are all subsidiaries included? Yes No
 If "No," attach a list. (see instructions)

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

J Website: ▶ www.loaves-fishes.org

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1991 **M State of legal domicile:** IL

H(c) Group exemption number ▶ _____

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>Provides food and leadership in the community by uniting and mobilizing resources to empower people to be self-sufficient for the purpose of ending hunger and empowering lives.</u>		
	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	19
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	19
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	22
	6 Total number of volunteers (estimate if necessary)	6	1,724
	7a 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	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	12,255,215	14,414,043
	9 Program service revenue (Part VIII, line 2g)	0	0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,526	2,101
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	223,905	14,556
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,480,646	14,430,700
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	10,446,249	12,453,051
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	921,296	1,143,312
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>285,135</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	524,813	647,559
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	11,892,358	14,243,922
19 Revenue less expenses. Subtract line 18 from line 12	588,288	186,778	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 4,563,785	End of Year 4,515,287
	21 Total liabilities (Part X, line 26)	973,375	738,099
	22 Net assets or fund balances. Subtract line 21 from line 20	3,590,410	3,777,188

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 ▶ Megan Selck Signature of officer 11/3/15 Date
 ▶ Megan Selck Type or print name and title President / CEO

Paid Preparer Use Only

Print/type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN
Robert Witt	Robert Witt	11/3/2015		P00284217
Firm's name ▶ <u>Robert R Witt Jr CPA PC</u>	Firm's EIN ▶ <u>20-3942710</u>			
Firm's address ▶ <u>608 South Washington St., Unit 307, Naperville, IL 60540</u>	Phone no. <u>(630) 988-0734</u>			

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

For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2014)