

GFI's Form 990 (for the year 2020)

The Good Food Institute (GFI) is entirely funded by the philanthropic support of our global family of donors. Our mission is ambitious, and GFI is planning for the organizational growth necessary to effect the transformation of the global food system. Our leadership team prioritizes organizational sustainability to ensure that we can focus on the highest impact activities while maintaining sufficient reserves to weather external factors that may impact future fundraising. This statement outlines how our 2020 form 990 reflects our commitment to resilience and aligns with our organizational budgeting process.



Fiscal sustainability strategy

A core element of GFI's fiscal management strategy is to build our budget each year based on the gifts received by December 31st of the preceding year. New gifts and payments on prior grants from our donor community in 2020 made it possible for GFI to set its 2021 operating budget at \$14.3 million to fund the work of our global teams.

While our 2020 form 990 indicates total revenues of \$18.9 million, this includes total pledges and grants receivable of \$6.4 million that will not be received until future years and are not guaranteed. Removing the donated services and pledges and grants receivable gives a more accurate portrayal of our income at \$12.5 million. Not reflected in the form 990 are payments on grants from prior years that seeded a portion of our 2021 operating budget.



Operating reserve

As an organization entirely supported by gifts and grants, it is vital that GFI maintain a sufficient operating reserve to sustain our programmatic impact. This need is especially clear during times of uncertainty. GFI's goal is to maintain a reserve equal to at least 12 months of operating costs. This reserve is our safety net, protecting GFI's mission impact against external factors beyond our control that could impact future fundraising. Financial stability also enables GFI to recruit and retain high-quality team members, reducing the risk of over-extending our financial commitments.

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2020

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the **2020** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE GOOD FOOD INSTITUTE, INC		D Employer identification number 81-0840578
	Doing business as		E Telephone number 866-849-4457
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	2503D N HARRISON ST.		G Gross receipts \$ 32,968,463.
	City or town, state or province, country, and ZIP or foreign postal code ARLINGTON, VA 22207		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F Name and address of principal officer: BRUCE FRIEDRICH SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		If "No," attach a list. See instructions	
J Website: GFI.ORG		H(c) Group exemption number	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 2015	M State of legal domicile: DE

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WE ARE DEVELOPING THE ROADMAP FOR A SUSTAINABLE, SECURE, AND JUST PROTEIN SUPPLY. WE IDENTIFY THE		
	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	5
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	4
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	75
	6 Total number of volunteers (estimate if necessary)	6	34
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	20,471,188.	18,736,534.
	9 Program service revenue (Part VIII, line 2g)	895,578.	18,999.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	184,309.	122,409.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	47,353.	45,652.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21,598,428.	18,923,594.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,461,118.	4,601,209.
	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)	4,355,268.	6,137,861.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) 1,179,306.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,077,918.	2,534,534.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,894,304.	13,273,604.	
19 Revenue less expenses. Subtract line 18 from line 12	12,704,124.	5,649,990.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 23,937,460.	End of Year 29,918,594.
	21 Total liabilities (Part X, line 26)	1,870,009.	2,303,124.
	22 Net assets or fund balances. Subtract line 21 from line 20	22,067,451.	27,615,470.

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			
	BRUCE FRIEDRICH, CHIEF EXECUTIVE OFFICER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name JEFF PARKER	Preparer's signature JEFF PARKER	Date 11/11/21	Check if self-employed <input type="checkbox"/>	PTIN P00970069
	Firm's name CLIFTONLARSONALLEN LLP	Firm's EIN 41-0746749	Phone no. (618) 233-1200		
	Firm's address 475 REGENCY PARK, SUITE 175 O'FALLON, IL 62269				

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: TO HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO TRANSFORM THE GLOBAL FOOD SYSTEM AWAY FROM CONVENTIONAL ANIMAL PRODUCTS AND TOWARD PLANT-BASED MEAT, EGGS AND DAIRY; PRODUCTS PRODUCED USING CELLULAR AGRICULTURE (E.G., CULTIVATED MEAT AND PRECISION FERMENTED DAIRY AND

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 5,146,739. including grants of \$ 4,404,130.) (Revenue \$ 0.) SCIENCE AND TECHNOLOGY - GFI'S SCIENCE AND TECHNOLOGY DEPARTMENT ACCELERATES THE SCIENCE OF ALTERNATIVE PROTEIN TECHNOLOGIES. GFI'S SCIENTISTS ARE THE GLOBAL EXPERTS IN THIS SECTOR AND WORK TO ENSURE THAT A ROADMAP EXISTS FOR ALTERNATIVE PROTEIN INNOVATION, THAT THE BEST SCIENTISTS ARE ENGAGED IN RESEARCH AND DEVELOPMENT, AND THAT SIGNIFICANT FUNDS ARE DIRECTED TOWARD THE HIGHEST IMPACT AREAS OF ALTERNATIVE PROTEIN RESEARCH.

GFI'S SCITECH TEAM IS FOCUSED ON THREE PRINCIPLE ACTIVITIES: 1. ANALYZING CURRENT AND FUTURE TECHNICAL CHALLENGES AND IDENTIFYING THE MOST IMPORTANT RESEARCH AND COMMERCIALIZATION OPPORTUNITIES FOR ALTERNATIVE PROTEINS. 2. MOBILIZING FUNDING FOR OPEN-ACCESS RESEARCH AND EARLY-STAGE

4b (Code:) (Expenses \$ 2,003,701. including grants of \$ 0.) (Revenue \$ 0.) POLICY - GFI'S POLICY DEPARTMENT IS FOCUSED ON REMOVING HURDLES TO ALTERNATIVE PROTEINS AND LEVERAGING GOVERNMENT RESOURCES TO ACCELERATE PROGRESS. THE POLICY TEAM DIRECTS TWO PRIMARY INITIATIVES: EDUCATING PUBLIC INSTITUTIONS, AND ENGAGING WITH NONPROFIT ORGANIZATIONS TO SUPPORT POLICY OBJECTIVES. THE POLICY DEPARTMENT ALSO USES IMPACT LITIGATION AS A STRATEGIC TOOL WHERE WARRANTED.

4c (Code:) (Expenses \$ 1,348,815. including grants of \$ 0.) (Revenue \$ 18,999.) COMMUNICATIONS - GFI'S COMMUNICATIONS DEPARTMENT WORKS TO ENSURE THAT GFI'S WORK ACROSS THE OTHER PROGRAMMATIC DEPARTMENTS ACHIEVES MAXIMUM IMPACT AND POSITIONS GFI AS A THOUGHT LEADER IN THE ALTERNATIVE PROTEIN SPACE. THE COMMUNICATIONS TEAM SECURES MEDIA ATTENTION FOR MISSION-ALIGNED COMPANIES, FOR THE SCIENCE OF ALTERNATIVE PROTEINS GENERALLY, FOR GFI'S REGULATORY AND STATUTORY WORK, AND FOR GFI'S CORPORATE ENGAGEMENT EFFORTS, THEREBY SUPPORTING THE WORK OF GFI. COMMUNICATIONS DRIVES THE CONVERSATION ABOUT INNOVATIVE ALTERNATIVES TO INDUSTRIAL ANIMAL AGRICULTURE ON SOCIAL MEDIA, INSERTS GFI EXPERTS INTO THE CONVERSATION AT KEY CONFERENCES, AND MAINTAINS A WEBSITE THAT SERVES AS THE WEB'S CENTRAL HUB FOR INFORMATION RELATED TO ALTERNATIVE PROTEIN RESEARCH AND INNOVATION.

4d Other program services (Describe on Schedule O.) (Expenses \$ 1,726,011. including grants of \$ 197,079.) (Revenue \$ 0.)

4e Total program service expenses 10,225,266.

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 <i>Schedule B, Schedule of Contributors</i> ?	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, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <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, 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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a 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>	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 assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c 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>		X
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 Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	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	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV</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
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
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? <i>If "Yes," complete Schedule J</i>		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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

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		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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 on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members included... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Did the organization have members or stockholders... 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... 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b 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 exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MI
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 SARAH DAVID - 866-849-4457 2503 D N HARRISON ST. #19, ARLINGTON, VA 22207

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 [X]

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

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 officers, directors, trustees... List all of the organization's current key employees... List the organization's five current highest compensated employees... List all of the organization's former officers, key employees... List all of the organization's former directors or trustees...

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (Individual trustee or director, Institutional trustee, Officer, Key employee, Highest compensated employee, Former), (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal							201,606.	0.	16,163.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							201,606.	0.	16,163.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MAUVE CORPORATE SYSTEMS, 9 FRANKLIN'S YARD FOSSGATE, YORK, YORKSHIRE, UNITED KINGDOM	UK PEO	401,921.
WAXMAN STRATEGIES, 1150 CONNECTICUT AVE, NW, WASHINGTON, DC 20036	MARKETING AND ENGAGEMENT	122,984.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **2**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	859,088.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	17,877,446.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 574,957.			
	h	Total. Add lines 1a-1f		18,736,534.			
Program Service Revenue	2 a	CONFERENCES AND MEETINGS	Business Code				
			900099	18,999.	18,999.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
g	Total. Add lines 2a-2f		18,999.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		127,153.		127,153.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	6a	(i) Real			
				(ii) Personal			
	b	Less: rental expenses	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities			
				(ii) Other			
					14,040,125.		
	b	Less: cost or other basis and sales expenses	7b	14,044,869.			
	c	Gain or (loss)	7c	-4,744.			
d	Net gain or (loss)		-4,744.		-4,744.		
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
b	Less: direct expenses	8b					
c	Net income or (loss) from fundraising events						
9 a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	OTHER INCOME	Business Code				
			900099	45,652.		45,652.	
	b						
	c						
	d	All other revenue					
e	Total. Add lines 11a-11d		45,652.				
12	Total revenue. See instructions		18,923,594.	18,999.	0.	168,061.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 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 and domestic governments. See Part IV, line 21	2,191,358.	2,191,358.		
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	2,409,851.	2,409,851.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	217,768.	78,120.	122,908.	16,740.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,742,474.	3,062,343.	1,057,623.	622,508.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	131,516.	86,221.	32,426.	12,869.
9 Other employee benefits	638,000.	417,558.	145,071.	75,371.
10 Payroll taxes	408,103.	255,395.	104,640.	48,068.
11 Fees for services (nonemployees):				
a Management	26,853.	20,152.	4,316.	2,385.
b Legal	12,577.	2,280.	10,297.	
c Accounting	95,002.		95,002.	
d Lobbying	191,273.	191,273.		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	1,732,669.	1,176,822.	229,842.	326,005.
12 Advertising and promotion	37,942.	30,450.	5,948.	1,544.
13 Office expenses	59,413.	31,978.	17,536.	9,899.
14 Information technology	2,688.	1,342.	1,112.	234.
15 Royalties				
16 Occupancy	128,253.	116,041.	9,651.	2,561.
17 Travel	36,167.	25,732.	6,924.	3,511.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	67,549.	51,608.	8,227.	7,714.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,854.	2,255.	485.	114.
23 Insurance	56,502.	45,222.	7,996.	3,284.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BANK, FILING AND OTHER	48,520.	4,571.	3,229.	40,720.
b MISCELLANEOUS EXPENSES	21,697.	16,950.	3,849.	898.
c FOREIGN EXCHANGE GAIN/L	6,366.	5,217.	930.	219.
d DONOR STEWARDSHIP	4,482.		3.	4,479.
e All other expenses	3,727.	2,527.	1,017.	183.
25 Total functional expenses. Add lines 1 through 24e	13,273,604.	10,225,266.	1,869,032.	1,179,306.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,797,470.	1	2,235,533.
	2 Savings and temporary cash investments	3,046,932.	2	4,515,220.
	3 Pledges and grants receivable, net	7,863,421.	3	6,408,998.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	117,514.	9	231,650.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 16,897.		
	b Less: accumulated depreciation	10b 2,027.	10c 0.	14,870.
	11 Investments - publicly traded securities	10,112,123.	11	16,512,323.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	23,937,460.	16	29,918,594.	
Liabilities	17 Accounts payable and accrued expenses	541,515.	17	687,761.
	18 Grants payable	1,328,494.	18	1,615,363.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 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		25	
	26 Total liabilities. Add lines 17 through 25	1,870,009.	26	2,303,124.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	12,743,850.	27	17,209,123.
	28 Net assets with donor restrictions	9,323,601.	28	10,406,347.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	22,067,451.	32	27,615,470.
33 Total liabilities and net assets/fund balances	23,937,460.	33	29,918,594.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	18,923,594.
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,273,604.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,649,990.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	22,067,451.
5	Net unrealized gains (losses) on investments	5	23,029.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-125,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	27,615,470.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash 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?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2020)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **THE GOOD FOOD INSTITUTE, INC** Employer identification number **81-0840578**

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 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).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3574782.	5285624.	7933743.	20471188.	18736534.	56001871.
2 Tax revenues levied for the organization'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	3574782.	5285624.	7933743.	20471188.	18736534.	56001871.
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)						11392476.
6 Public support. Subtract line 5 from line 4.						44609395.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	3574782.	5285624.	7933743.	20471188.	18736534.	56001871.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		1,072.	40,260.	96,417.	127,153.	264,902.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				47,353.	45,652.	93,005.
11 Total support. Add lines 7 through 10						56359778.
12 Gross receipts from related activities, etc. (see instructions)					12	1,317,346.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14	79.15	%
15 Public support percentage from 2019 Schedule A, Part II, line 14	15		%
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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 performed, 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 business under section 513						
4 Tax revenues levied for the organization'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.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 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.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
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?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described in line 11a above?		
11b		
c A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
2a		
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2020

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2020		
a	From 2015		
b	From 2016		
c	From 2017		
d	From 2018		
e	From 2019		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2020 distributable amount		
i	Carryover from 2015 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2020 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2020 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2021. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2016		
b	Excess from 2017		
c	Excess from 2018		
d	Excess from 2019		
e	Excess from 2020		

Schedule A (Form 990 or 990-EZ) 2020

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

THE GOOD FOOD INSTITUTE, INC

Employer identification number

81-0840578

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)(3) (enter number) organization

[] 4947(a)(1) nonexempt charitable trust not treated as a private foundation

[] 527 political organization

Form 990-PF

[] 501(c)(3) exempt private foundation

[] 4947(a)(1) nonexempt charitable trust treated as a private foundation

[] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ... \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	 <hr/> <hr/> <hr/>	\$ <u>554,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ <u>600,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ <u>450,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ <u>3,600,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ <u>1,950,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	_____ _____ _____	\$ <u>2,400,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	_____ _____ _____	\$ <u>463,020.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	_____ _____ _____	\$ <u>1,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	_____ _____ _____	\$ <u>845,157.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____ _____ _____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____ _____ _____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ▶ \$ 0.
- 3 Volunteer hours for political campaign activities 0.

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ 0.
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. **Schedule C (Form 990 or 990-EZ) 2020**

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	9,921.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	389,737.													
c	Total lobbying expenditures (add lines 1a and 1b)	399,658.													
d	Other exempt purpose expenditures	9,825,608.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	10,225,266.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	661,263.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	165,316.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount			498,266.	661,263.	1,159,529.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,739,294.
c Total lobbying expenditures			247,345.	399,658.	647,003.
d Grassroots nontaxable amount			124,567.	165,316.	289,883.
e Grassroots ceiling amount (150% of line 2d, column (e))					434,825.
f Grassroots lobbying expenditures			9,635.	9,921.	19,556.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4
5 Taxable amount of lobbying and political expenditures (See instructions)	5

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization THE GOOD FOOD INSTITUTE, INC **Employer identification number** 81-0840578

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(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 financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		16,897.	2,027.	14,870.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				14,870.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on 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	(c) Method of valuation: Cost 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) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost 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) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE GOOD FOOD INSTITUTE, INC. REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A "MORE-LIKELY-THAN-NOT" THRESHOLD. THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. GFI DOES NOT BELIEVE ITS CONSOLIDATED FINANCIAL STATEMENTS INCLUDE, OR REFLECT, ANY UNCERTAIN TAX POSITIONS.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
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Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EAST ASIA & THE PACIFIC	0		OTHER	HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS TO	645,486.
SOUTH AMERICA	0		OTHER	HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS TO	361,980.
SOUTH ASIA	0		OTHER	HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS TO	395,031.
MIDDLE EAST & NORTH AFRICA	0		OTHER	HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS TO	822,377.
EUROPE	0		OTHER	HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS TO	258,506.
EAST ASIA & THE PACIFIC	0		GRANTS	ASSESSMENT OF HIGH-PRESSURE PROCESSING (HPP) AND HIGH-PRESSURE TEMPERATURE PROCESSING	200,000.
SOUTH AMERICA	0		GRANTS	THE PRIMARY OBJECTIVES ARE: 1) TO SOLVE SCALE-UP CHALLENGES, 2) OPTIMIZE THE	317,293.
SOUTH ASIA	0		GRANTS	CHARACTERISE SELECT VARIETIES OF SORGHUM, PEARL MILLET AND FINGER MILLET TOWARDS PROMOTING	97,078.
3 a Subtotal	0	0			3,097,751.
b Total from continuation sheets to Part I	0	0			1,795,479.
c Totals (add lines 3a and 3b)	0	0			4,893,230.

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Schedule F (Form 990) 2020

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST & NORTH AFRICA	0		GRANTS	GENERATE RELEVANT DATA REGARDING THE CONSTITUENTS, MECHANISMS, MICROBIAL	500,001.
EUROPE	0		GRANTS	WAGENINGEN UNIV. - TO DESIGN A PLANT-BASED FRACTIONATION PROCESS FOR PEA AND MUNG BEAN;	1,295,478.
EUROPE	0		GRANTS - CONTINUATION FROM ABOVE	RIVAL FOODS - 1. REALIZE THE WORLDS FIRST SMALL-SCALE, COMPACT, EASY-TO-USE, AFFORDABLE	0.
Totals					1,795,479.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EAST ASIA & THE PACIFIC	ASSESSMENT OF HIGH-PRESSURE PROCESSING (HPP) AND HIGH-PRESSURE RESEARCH, CONTENT & PUBLICATION, MEDIA ENGAGEMENT, AND CONFERENCES &	100,000.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE
			EAST ASIA & THE PACIFIC	THE PRIMARY OBJECTIVES ARE: 1) TO SOLVE SCALE-UP CHALLENGES, 2) OBTAINING AND FRACTIONING PROTEINS FROM CASSAVA LEAVES FOR TECHNO-FUNCTIONAL	217,294.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE
			SOUTH AMERICA	CHARACTERISE SELECT VARIETIES OF SORGHUM, PEARL MILLET AND FINGER MILLET TOWARDS	97,078.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE
			SOUTH AMERICA	GENERATE RELEVANT DATA REGARDING THE CONSTITUENTS, MECHANISMS, MICROBIAL	250,000.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE
			MIDDLE EAST & NORTH AFRICA	DEVELOP A TEXTURIZATION PROCESS OF ALGAL PROTEIN FOR SEAFOOD ANALOGS;	250,001.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE
			MIDDLE EAST & NORTH AFRICA	TO DESIGN A PLANT-BASED FRACTIONATION PROCESS FOR PEA AND MUNG	400,000.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 14

3 Enter total number of other organizations or entities 0

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Part II	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)									
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
		EUROPE	PROMOTE ACHIEVEMENTS IN CELLULAR AGRICULTURE.	249,997.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE		
		EUROPE	GENERATE INDUCED MYOGENIC PROGENITOR CELLS FROM LARGE ANIMALS AS AN	150,000.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE		
		EUROPE	1. REALIZE THE WORLDS FIRST SMALL-SCALE, COMPACT, EASY-TO-USE, AFFORDABLE	165,000.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE		
		EUROPE	ESTABLISH MEDIA CONSUMPTION AND WASTE PRODUCTION PROFILES FOR BOTH EXPANSTION	160,481.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE		
		EUROPE	USING MACROMOLECULAR CROWDING TO ENHANCE MEAT CULTIVATION.	100,000.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE		
		EUROPE	HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS	50,000.	WIRE TRANSFER	0.	N/A	FAIR MARKET VALUE		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

EACH GRANTEE SUBMITS A BUDGET PROPOSAL AND ONCE AN AGREED UPON BUDGET IS REACHED, GFI SENDS THE GRANTEE A LETTER STATING THE AMOUNT OF FUNDS TO BE DISBURSED AND A DESCRIPTION OF THE USE OF THE FUNDS. AT THE COMPLETION OF THE AWARD PERIOD, THE GRANTEE SUBMITS A FINAL REPORT THAT CONTAINS A SUMMARY OF THE USE OF FUNDS.

PART I, LINE 3, COLUMN (E):

REGION: EAST ASIA & THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS TO CREATE A SUSTAINABLE, HEALTHY, AND JUST FOOD SYSTEM

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS TO CREATE A SUSTAINABLE, HEALTHY, AND JUST FOOD SYSTEM

REGION: SOUTH ASIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS TO CREATE A SUSTAINABLE, HEALTHY, AND JUST FOOD SYSTEM

REGION: MIDDLE EAST & NORTH AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS TO CREATE A SUSTAINABLE, HEALTHY, AND JUST FOOD SYSTEM

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: HARNESS THE POWER OF FOOD INNOVATION AND MARKETS TO ACCELERATE ALTERNATIVE PROTEINS TO CREATE A SUSTAINABLE, HEALTHY, AND JUST FOOD SYSTEM

REGION: EAST ASIA & THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: ASSESSMENT OF HIGH-PRESSURE PROCESSING (HPP) AND HIGH-PRESSURE TEMPERATURE PROCESSING (HPTP) ON THE FLAVOUR AND TECHRIO-FUNCTIONAL QUALITY OF PLANT PROTEINS. RESEARCH, CONTENT & PUBLICATION, MEDIA ENGAGEMENT, AND CONFERENCES & PRESENTATIONS GRANT. THESE ROLES INCLUDE HEAD OF COMMUNICATIONS AND RESEARCH & CONTENT MANAGER, POSITIONS THAT ARE CRUCIAL TO DELIVERING FOOD FRONTIERS PUBLIC COMMUNICATIONS FROM RESEARCH AND REPORTS, TO EVENTS AND MEDIA ENGAGEMENT.

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: THE PRIMARY OBJECTIVES ARE: 1) TO SOLVE SCALE-UP CHALLENGES, 2) OPTIMIZE THE ORGANOLEPTIC PROPERTIES OF THE TASTE, TEXTURE, APPEARANCE AND AROMA OF CASHEW-ADDED MEAT PRODUCTS TO IMPROVE TASTE, TEXTURE, APPEARANCE AND AROMA 3) DETERMINE THE PHYSICO-CHEMICAL FEATURES AND THE NUTRITIONAL COMPOSITION. OBTAINING AND FRACTIONING PROTEINS FROM CASSAVA LEAVES FOR TECHNO-FUNCTIONAL PROPERTIES.

REGION: SOUTH ASIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: CHARACTERISE SELECT VARIETIES OF SORGHUM, PEARL MILLET AND FINGER MILLET TOWARDS PROMOTING

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

NUTRITIONALLY SUPERIOR, SENSORY ACCEPTABLE AND COST EFFECTIVE INDIAN
FLATBREAD AND BISCUITS.

REGION: MIDDLE EAST & NORTH AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: GENERATE RELEVANT DATA

REGARDING THE CONSTITUENTS, MECHANISMS, MICROBIAL PROFILES AND METABOLIC
PATHWAYS WHICH APPEAR TO BE RESPONSIBLE FOR THE SATISFYING ORGANOLEPTIC
ATTRIBUTES THAT WE WILL IDENTIFY IN PRODUCTS OF TRADITIONAL AND ADAPTED
MULTI-PHASE FERMENTATION TECHNOLOGIES FOR WHICH PRODUCTION METHODS ARE
PUBLICLY AVAILABLE; PROPOSE PRODUCTION PROTOCOLS FOR STUDIED PRODUCTS
THAT MIGHT SERVE TO ELEVATE AND IDENTIFY IN PRODUCTS OF TRADITIONAL AND
ADAPTED MULTI-PHASE FERMENTATION TECHNOLOGIES FOR WHICH PRODUCTION
METHODS ARE PUBLICLY AVAILABLE; PROPOSE PRODUCTION PROTOCOLS FOR STUDIED
PRODUCTS THAT MIGHT SERVE TO ELEVATE AND ACCENTUATE BENEFICIAL
ORGANOLEPTIC FACTORS. DEVELOP A TEXTURIZATION PROCESS OF ALGAL PROTEIN
FOR SEAFOOD ANALOGS; FORMULATE & CHARACTERIZE THE SENSORY PROPERTIES OF
THE PROTOTYPE PRODUCTS.

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: WAGENINGEN UNIV. - TO DESIGN A
PLANT-BASED FRACTIONATION PROCESS FOR PEA AND MUNG BEAN; TO UNDERSTAND
WHICH RAW MATERIAL PROPERTIES IN COMBINATION WITH PROCESS CONDITIONS LEAD
TO THE FORMATION OF SPECIFIC STRUCTURES AND TO UNDERSTAND INTERACTIONS
BETWEEN PLANT INGREDIENTS DURING STRUCTURING PROCESSES AND IN THE FINAL
PRODUCT; TO TEST FINAL PRODUCT CONCEPTS BASED ON THE USE OF TAILORED
INGREDIENTS WITH CHEFS AND CONSUMERS FOR OPTIMIZATION OF ORGANOLEPTIC
QUALITY & PUBLICATION: TO VALORIZE PROTEINS FROM AGRICULTURAL

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SIDE-STREAMS, INCREASING PROTEIN AVAILABILITY AND IMPROVING THE BUSINESS

CASE FOR PLANT-BASED FARMING: TO IDENTIFY NEW PROTEIN FRACTIONS OF

INTEREST AND DEVELOP TECHNOLOGIES TO BRING THESE TO INDUSTRIAL PRODUCTS.

BIOSENSE - PROMOTE ACHIEVEMENTS IN CELLULAR AGRICULTURE. ETH ZURICH -

GENERATE INDUCED MYOGENIC PROGENITOR CELLS FROM LARGE ANIMALS AS AN

ALTERNATIVE WAY TO GROW MUSCLE PROGENITORS IN COMPARISON TO CONVENTIONAL

METHODS.

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: RIVAL FOODS - 1. REALIZE THE

WORLD'S FIRST SMALL-SCALE, COMPACT, EASY-TO-USE, AFFORDABLE SHEAR CELL

MACHINE FOR USE BY LOCAL FOOD ENTREPRENEURS. 2. REALIZE THREE PRODUCT

PROTOTYPES FITTING INTO THE CATEGORY AT SEA, ON LAND, AND WITH WINGS TO

REPLACE THEIR ANIMAL-BASED COUNTERPARTS (FISH, RED MEAT AND WHITE

MEAT/POULTRY) AND TO TEST THESE PROTOTYPES WITH LOCAL FOOD ENTREPRENEURS

AND CONSUMERS. 3. ESTABLISH A PLATFORM WHERE INFORMATION ON PLANT-BASED

INGREDIENTS, SCT AND PRODUCTS IS MADE ACCESSIBLE TO FOOD ENTREPRENEURS,

INCLUDING FOOD PROFESSIONALS, FOOD PROCESSORS, AND CHEFS WITH A DESIRE TO

CREATE, DEVELOP AND SELL CULINARY PLANT-BASED PRODUCTS. UNIV. OF BATH -

ESTABLISH MEDIA CONSUMPTION AND WASTE PRODUCTION PROFILES FOR BOTH

EXPANSION AND DIFFERENTIATION IN DIFFERENT BIOREACTORS. PRODUCE

CORRELATIONS FOR THE RELATIONSHIP BETWEEN SCAFFOLD STRUCTURE, FLUID

DYNAMICS AND THE BIOLOGICAL PROFILES IN THE BIOREACTORS. NEWCASTLE UNIV

-USING MACROMOLECULAR CROWDING TO ENHANCE MEAT CULTIVATION.

PART II, COLUMN (D):

REGION: EAST ASIA & THE PACIFIC

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

(D) PURPOSE OF GRANT: ASSESSMENT OF HIGH-PRESSURE PROCESSING (HPP) AND HIGH-PRESSURE TEMPERATURE PROCESSING (HPTP) ON THE FLAVOUR AND TECHRIO-FUNCTIONAL QUALITY OF PLANT PROTEINS.

REGION: EAST ASIA & THE PACIFIC

(D) PURPOSE OF GRANT: RESEARCH, CONTENT & PUBLICATION, MEDIA ENGAGEMENT, AND CONFERENCES & PRESENTATIONS GRANT. THESE ROLES INCLUDE HEAD OF COMMUNICATIONS AND RESEARCH & CONTENT MANAGER, POSITIONS THAT ARE CRUCIAL TO DELIVERING FOOD FRONTIERS PUBLIC COMMUNICATIONS FROM RESEARCH AND REPORTS, TO EVENTS AND MEDIA ENGAGEMENT.

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: THE PRIMARY OBJECTIVES ARE: 1) TO SOLVE SCALE-UP CHALLENGES, 2) OPTIMIZE THE ORGANOLEPTIC PROPERTIES OF THE TASTE, TEXTURE, APPEARANCE AND AROMA OF CASHEW-ADDED MEAT PRODUCTS TO IMPROVE TASTE, TEXTURE, APPEARANCE AND AROMA 3) DETERMINE THE PHYSICOCHEMICAL FEATURES AND THE NUTRITIONAL COMPOSITION.

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: OBTAINING AND FRACTIONING PROTEINS FROM CASSAVA LEAVES FOR TECHNO-FUNCTIONAL PROPERTIES.

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: CHARACTERISE SELECT VARIETIES OF SORGHUM, PEARL MILLET AND FINGER MILLET TOWARDS PROMOTING NUTRITIONALLY SUPERIOR, SENSORY ACCEPTABLE AND COST EFFECTIVE INDIAN FLATBREAD AND BISCUITS.

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

REGION: MIDDLE EAST & NORTH AFRICA

(D) PURPOSE OF GRANT: GENERATE RELEVANT DATA REGARDING THE CONSTITUENTS, MECHANISMS, MICROBIAL PROFILES AND METABOLIC PATHWAYS WHICH APPEAR TO BE RESPONSIBLE FOR THE SATISFYING ORGANOLEPTIC ATTRIBUTES THAT WE WILL IDENTIFY IN PRODUCTS OF TRADITIONAL AND ADAPTED MULTI-PHASE FERMENTATION TECHNOLOGIES FOR WHICH PRODUCTION METHODS ARE PUBLICLY AVAILABLE; PROPOSE PRODUCTION PROTOCOLS FOR STUDIED PRODUCTS THAT MIGHT SERVE TO ELEVATE AND ACCENTUATE BENEFICIAL ORGANOLEPTIC FACTORS.

REGION: MIDDLE EAST & NORTH AFRICA

(D) PURPOSE OF GRANT: DEVELOP A TEXTURIZATION PROCESS OF ALGAL PROTEIN FOR SEAFOOD ANALOGS; FORMULATE & CHARACTERIZE THE SENSORY PROPERTIES OF THE PROTOTYPE PRODUCTS.

REGION: EUROPE

(D) PURPOSE OF GRANT: TO DESIGN A PLANT-BASED FRACTIONATION PROCESS FOR PEA AND MUNG BEAN; TO UNDERSTAND WHICH RAW MATERIAL PROPERTIES IN COMBINATION WITH PROCESS CONDITIONS LEAD TO THE FORMATION OF SPECIFIC STRUCTURES AND TO UNDERSTAND INTERACTIONS BETWEEN PLANT INGREDIENTS DURING STRUCTURING PROCESSES AND IN THE FINAL PRODUCT; TO TEST FINAL PRODUCT CONCEPTS BASED ON THE USE OF TAILORED INGREDIENTS WITH CHEFS AND CONSUMERS FOR OPTIMIZATION OF ORGANOLEPTIC QUALITY & PUBLICATION: TO VALORIZE PROTEINS FROM AGRICULTURAL SIDE-STREAMS, INCREASING PROTEIN AVAILABILITY AND IMPROVING THE BUSINESS CASE FOR PLANT-BASED FARMING: TO IDENTIFY NEW PROTEIN FRACTIONS OF INTEREST AND DEVELOP TECHNOLOGIES TO BRING THESE TO INDUSTRIAL PRODUCTS.

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

REGION: EUROPE

(D) PURPOSE OF GRANT: GENERATE INDUCED MYOGENIC PROGENITOR CELLS FROM LARGE ANIMALS AS AN ALTERNATIVE WAY TO GROW MUSCLE PROGENITORS IN COMPARISON TO CONVENTIONAL METHODS.

REGION: EUROPE

(D) PURPOSE OF GRANT: 1. REALIZE THE WORLDS FIRST SMALL-SCALE, COMPACT, EASY-TO-USE, AFFORDABLE SHEAR CELL MACHINE FOR USE BY LOCAL FOOD ENTREPRENEURS. 2. REALIZE THREE PRODUCT PROTOTYPES FITTING INTO THE CATEGORY AT SEA, ON LAND, AND WITH WINGS TO REPLACE THEIR ANIMAL-BASED COUNTERPARTS (FISH, RED MEAT AND WHITE MEAT/POULTRY) AND TO TEST THESE PROTOTYPES WITH LOCAL FOOD ENTREPRENEURS AND CONSUMERS. 3. ESTABLISH A PLATFORM WHERE INFORMATION ON PLANT-BASED INGREDIENTS, SCT AND PRODUCTS IS MADE ACCESSIBLE TO FOOD ENTREPRENEURS, INCLUDING FOOD PROFESSIONALS, FOOD PROCESSORS, AND CHEFS WITH A DESIRE TO CREATE, DEVELOP AND SELL CULINARY PLANT-BASED PRODUCTS.

REGION: EUROPE

(D) PURPOSE OF GRANT: ESTABLISH MEDIA CONSUMPTION AND WASTE PRODUCTION PROFILES FOR BOTH EXPANSION AND DIFFERENTIATION IN DIFFERENT BIOREACTORS. PRODUCE CORRELATIONS FOR THE RELATIONSHIP BETWEEN SCAFFOLD SCTRUCTURE, FLUID DYNAMICS AND THE BIOLOGICAL PROFILES IN THE BIOREACTORS.

REGION: EUROPE

(D) PURPOSE OF GRANT: HARNESS THE POWER OF FOOD INNOVATION AND MARKET'S TO ACCELERATE ALTERNATIVE PROTEINS TO CREATE A SUSTAINABLE, HEALTHY, AND JUST FOOD SYSTEM

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART II, LINE 1 (ACCOUNTING METHOD):

THE ORGANIZATION USES THE ACCRUAL METHOD OF ACCOUNTING TO ACCOUNT FOR CASH GRANTS.

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047
2020
Open to Public
Inspection

Name of the organization

THE GOOD FOOD INSTITUTE, INC

Employer identification number
81-0840578

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 criteria used to award the grants or assistance? Yes No

2 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" on 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MASSACHUSETTS 100 VENTURE WAY, ST. 201 HADLEY, MA 01035	04-3167352		199,464.	0. N/A	N/A		DEVELOPMENT OF STANDARDIZED TESTS TO FACILITATE PLANT-BASED MEAT CREATION
UNIVERSITY OF MASSACHUSETTS 100 VENTURE WAY, ST. 201 HADLEY, MA 01035	04-3167352		50,000.	0. N/A	N/A		DEVELOPMENT OF STANDARDIZED TESTS TO FACILITATE PLANT-BASED MEAT CREATION
BIOCELLION CULTIVATED MEAT MODELING CONSORTIUM - 2415 E ROANOKE ST - SEATTLE, WA 98112	46-4448286		240,000.	0. N/A	N/A		MULTISCALE WHOLE-SYSTEM MODELING OF BIOREACTORS
UNIVERSITY OF WISCONSIN 21 N. PARK STREET MADISON, WI 53715	39-6006492		250,000.	0. N/A	N/A		CROSSING TWO KINGDOMS: BIOENGINEERED CLEAN MEAT IN PLANT-BASED TISSUE SCAPFOLDS
WASHINGTON STATE UNIVERSITY 100 DAIRY ROAD PULLMAN, WA 99164	91-6001108		249,827.	0. N/A	N/A		NOVEL PLANT PROTEINS AND INSOLUBLES FIBERS IN THE DEVELOPMENT OF MEAT ANALOGS
TROPIC LLC - C/O AMANDA STILES 626 BANCROFT WAY, SUITE A BERKELEY, CA 94710	82-2961054		100,000.	0. N/A	N/A		DEVELOPMENT OF TAILORED SEAWED INGREDIENTS TO IMPROVE PLANT-BASED MEAT AND SEAFOOD ORGANOLEPTICS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **8.**

3 Enter total number of other organizations listed in the line 1 table **3.**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) 2020**

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
UC REGENTS - UC DAVIS 202 COUSTEAU PLACE, SUITE 185 DAVIS, CA 95618	94-6036494		248,308.	0. N/A	N/A	N/A	OBJECTIVE 1: DEVELOP AND USE NOVEL ADVANCED EXPERIMENTAL OPTIMIZATION TECHNIQUES TO FIND LOW	
MOTE MARINE LABORATORY 1600 KEN THOMPSON PARKWAY SARASOTA, FL 34232	59-0756643		268,020.	0. N/A	N/A	N/A	SELECTION OF OPTIMAL SPECIES FOR CELL LINE DEVELOPMENT	
VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY - VIRGINIA POLYTECHNIC INSTITUTE - BLACKSBURG, VA 24061	54-6001805		236,425.	0. N/A	N/A	N/A	USING RESPONSE SURFACE METHODOLOGY AND ARTIFICIAL NEURAL NETWORKS TO OPTIMIZE CELL	
UNIVERSITY OF MINNESOTA 1334 ECKLES AVENUE SAINT PAUL, MN 55108	41-6007513		250,000.	0. N/A	N/A	N/A	CHARACTERIZING AND TEXTURIZING PULSE PROTEINS TO FORM MEAT-LIKE FIBERS	
PARAGON PURE 252 MASSAU STREET PRINCETON, NJ 08542	83-3707793		50,000.	0. N/A	N/A	N/A	RICE BRAN OIL OLEOGELS FOR PLANT-BASED MEAT	
TUFTS UNIVERSITY 136 HARRISON AVENUE BOSTON, MA 02111	04-2103634		49,314.	0. N/A	N/A	N/A	ATLANTIC SALMON PROJECT	

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

EACH GRANTEE SUBMITS A BUDGET PROPOSAL AND ONCE AN AGREED UPON BUDGET IS REACHED, GFI SENDS THE GRANTEE A LETTER STATING THE AMOUNT OF FUNDS TO BE DISBURSED AND A DESCRIPTION OF THE USE OF THE FUNDS. AT THE COMPLETION OF THE AWARD PERIOD, THE GRANTEE SUBMITS A FINAL REPORT THAT CONTAINS A SUMMARY OF THE USE OF FUNDS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: UC REGENTS - UC DAVIS

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: OBJECTIVE 1: DEVELOP AND USE NOVEL ADVANCED EXPERIMENTAL OPTIMIZATION TECHNIQUES TO FIND LOW COST, EFFECTIVE GROWTH MEDIA AND APPLY THIS TECHNIQUE TO CHICKEN MUSCLE CELL CULTURES.

NAME OF ORGANIZATION OR GOVERNMENT:

VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: USING RESPONSE SURFACE METHODOLOGY AND ARTIFICIAL NEURAL NETWORKS TO OPTIMIZE CELL CULTURE MEDIA FOR USE WITH STEM CELLS FROM SEAFOOD-RELEVANT SPECIES.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

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.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **THE GOOD FOOD INSTITUTE, INC** Employer identification number **81-0840578**

Part 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 determining noncash contribution amounts
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	X	14	574,957.	MARKET VALUE
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				
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 organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

COLUMN (B) REPORTS THE NUMBER OF CONTRIBUTIONS.

Multiple horizontal lines for data entry.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

THE GOOD FOOD INSTITUTE, INC

Employer identification number

81-0840578

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

MOST EFFECTIVE SOLUTIONS, MOBILIZE RESOURCES AND TALENT, AND EMPOWER
PARTNERS ACROSS THE FOOD SYSTEM TO MAKE ALTERNATIVE PROTEINS
ACCESSIBLE, AFFORDABLE, AND DELICIOUS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EGG PROTEINS); AND PRODUCTS PRODUCED VIA FERMENTATION (COLLECTIVELY,
"ALTERNATIVE PROTEINS").

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

COMMERCIALIZATION OF ALTERNATIVE PROTEINS.

3. INSPIRING AND SUPPORTING THE NEXT GENERATION OF INNOVATORS IN THE
ALTERNATIVE PROTEIN INDUSTRY.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

CORPORATE ENGAGEMENT - CORPORATE ENGAGEMENT IS THE DEPARTMENT AT THE
INTERSECTION OF SUPPLY AND DEMAND WITHIN THE ALTERNATIVE PROTEIN
SECTOR. CORPORATE ENGAGEMENT ENSURES THAT THE MARKET PROVIDES
ALTERNATIVE PROTEINS THAT ARE TASTY, COMPETITIVELY PRICED, AND EASILY
FOUND AT RETAIL AND IN FOODSERVICE. WORKING WITH COMPANIES AT ALL
STAGES OF THE PRODUCTION PROCESS, FROM ENTREPRENEURS WITH JUST AN IDEA,
TO MULTINATIONAL CONSUMER PACKAGED GOODS (CPG) COMPANIES, ENABLES
CORPORATE ENGAGEMENT TO VIEW THE WHOLE GLOBAL ECOSYSTEM TO IDENTIFY
AREAS OF OPPORTUNITY AND GROWTH. ADDITIONALLY, CORPORATE ENGAGEMENT
PROMOTES EXISTING PLANT-BASED PRODUCTS AND THE CONCEPT OF CULTIVATED

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

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
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PRODUCTS TO RESTAURANTS, RETAILERS, AND FOODSERVICE COMPANIES TO INCREASE THEIR AVAILABILITY ON MENUS, ON SHELVES, AND IN CAFETERIAS.

CORPORATE ENGAGEMENT USES CONSUMER AND MARKET RESEARCH TO HELP COMPANIES MAKE AND MARKET PRODUCTS THAT WILL BE MOST APPEALING TO THE MAJORITY OF CONSUMERS. THE CROSS-FUNCTIONAL SUSTAINABLE SEAFOOD INITIATIVE ADVANCES THE MISSION OF HEALTHY, SUSTAINABLE, AND JUST SEAFOOD FOR A GROWING POPULATION.

EXPENSES \$ 1,081,275. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

INTERNATIONAL ENGAGEMENT - IN THE THIRD QUARTER OF 2019, GFI'S INTERNATIONAL ENGAGEMENT DEPARTMENT WAS RESTRUCTURED INTO THE EXECUTIVE DEPARTMENT. INTERNATIONAL ENGAGEMENT LEVERAGES THE EXPERTISE AND RESOURCES DEVELOPED BY GFI'S U.S. STAFF AND DEVELOPS NEW STRATEGIES AND MATERIALS FOR LOCAL MARKETS BY TAKING CULTURE, LANGUAGE, RELIGION, SYSTEMS, AND OPPORTUNITIES INTO ACCOUNT. THUS, ON A GLOBAL SCALE, MORE SCIENTISTS WILL FOCUS ON ALTERNATIVE PROTEIN; POLICY AND REGULATORY PROGRESS WILL BE ACCELERATED; MORE COMPANIES WILL BE GENERATED AND THOSE THAT ARE CREATED WILL BE MORE SUCCESSFUL; AND MORE MEDIA COVERAGE OF ALTERNATIVE PROTEIN INNOVATION WILL BE GENERATED.

EXPENSES \$ 644,736. INCLUDING GRANTS OF \$ 197,079. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:

SUBSTANTIVE SECTIONS OF THE FORM 990 WERE REVIEWED BY THE CEO, GENERAL COUNSEL AND VICE PRESIDENT, ADMINISTRATION, AND FINANCE MANAGER AS WELL AS OTHER KEY PERSONNEL. ADDITIONALLY, GFI'S AUDIT COMMITTEE ALSO REVIEWED THE 990. ALL MEMBERS OF THE BOARD OF DIRECTORS WERE PROVIDED A COMPLETE ELECTRONIC COPY OF THIS FORM 990 PRIOR TO IT BEING SUBMITTED TO THE IRS.

Name of the organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
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FORM 990, PART VI, SECTION B, LINE 12C:

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT AT THE TIME OF HIRE AND ANY TIME A POTENTIAL CONFLICT ARISES. THE EMPLOYEE MUST DISCLOSE THAT POTENTIAL CONFLICT TO HIS OR HER IMMEDIATE SUPERVISOR WHENEVER POSSIBLE, BEFORE ENGAGING IN ANY ACTIVITY, TRANSACTION OR RELATIONSHIP THAT MIGHT GIVE RISE TO A CONFLICT OF INTEREST, EMPLOYEES SHOULD CONSULT WITH THEIR IMMEDIATE SUPERVISOR(S) OR THE DIRECTOR OF OPERATIONS.

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

THE GFI COMPENSATION COMMITTEE, AN INDEPENDENT BODY, CONDUCTS AN ANNUAL REVIEW OF THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND OTHER SENIOR LEADERSHIP. THE COMMITTEE EVALUATES THE REASONABLENESS OF COMPENSATION AS IT COMPARES TO REMUNERATION FOR SIMILARLY QUALIFIED INDIVIDUALS WITH COMPARABLE BACKGROUND, EXPERIENCE, EDUCATION, ETC. THIS IS ACCOMPLISHED BY REVIEWING SALARY AND BENEFITS DATA OF VARIOUS NONPROFIT ORGANIZATIONS, FOCUSING, WHEN POSSIBLE, ON THOSE WITH SIMILAR MISSIONS AND OF SIMILAR BUDGET SIZE. THE COMMITTEE USES A VARIETY OF SOURCES, INCLUDING SALARY AND BENEFIT SURVEYS PREPARED BY INDEPENDENT SOURCES, IRS 990'S POSTED ON WEBSITES THAT MONITOR/EVALUATE CHARITIES, ETC. THE COMMITTEE CONTEMPORANEOUSLY DOCUMENTS ITS REVIEW PROCEDURES AND PRESENTS THE FINDINGS TO THE BOARD OF DIRECTORS. THIS PROCESS WAS LAST COMPLETED IN 2020.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NM, NY, OR, PA, RI, SC, TN, UT
VA, WI, WV

Name of the organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
--	--

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

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE ON REQUEST AS DETERMINED BY THE CHIEF EXECUTIVE OFFICER.

FORM 990, PAGE 7, PART VII, SECTION A

STEWART DAVID (BOARD MEMBER) AND SARAH DAVID (GENERAL COUNSEL AND VICE PRESIDENT, ADMINISTRATION) ARE NOT RELATED.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING/CONTRACTUAL:

PROGRAM SERVICE EXPENSES	471,256.
MANAGEMENT AND GENERAL EXPENSES	99,783.
FUNDRAISING EXPENSES	121,248.
TOTAL EXPENSES	692,287.

GRAPHIC & WEB DESIGN VIDEO PRODUCTION AND WRITING/EDITING:

PROGRAM SERVICE EXPENSES	178,245.
MANAGEMENT AND GENERAL EXPENSES	13,253.
FUNDRAISING EXPENSES	23,819.
TOTAL EXPENSES	215,317.

MARKET RESEARCH:

PROGRAM SERVICE EXPENSES	129,313.
MANAGEMENT AND GENERAL EXPENSES	778.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	130,091.

Name of the organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
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SOFTWARE AS SERVICE AND OTHER:

PROGRAM SERVICE EXPENSES	174,863.
MANAGEMENT AND GENERAL EXPENSES	67,129.
FUNDRAISING EXPENSES	171,389.
TOTAL EXPENSES	413,381.

INTERNATIONAL CONTRACTORS:

PROGRAM SERVICE EXPENSES	223,145.
MANAGEMENT AND GENERAL EXPENSES	48,899.
FUNDRAISING EXPENSES	9,549.
TOTAL EXPENSES	281,593.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 1,732,669.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

UNFULFILLED PLEDGE -125,000.

FORM 990, PART XII, LINE 2C:

THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2020
Open to Public Inspection

Name of the organization: **THE GOOD FOOD INSTITUTE, INC** Employer identification number: **81-0840578**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes No
THE GOOD FOOD INSTITUTE ASIA PACIFIC ROOM 503-9, YU TO SAN BLDG 37 QUEEN'S ROAD C HONG KONG, HONG KONG	FOOD INNOVATION	HONG KONG	675,869.	79,487.	THE GOOD FOOD INSTITUTE, INC.	
ASSOCIACAO THE GOOD FOOD INST DO BRASILL AVENIDA PAULISTA 807 23 ANDAR CONJUNTO 2315 SAU PAULO, BRAZIL	FOOD INNOVATION	BRAZIL	366,625.	97,394.	THE GOOD FOOD INSTITUTE, INC.	
THE GOOD FOOD INSTITUTE EUROPE ASBL DREVE DU PRESSOIR 38 1190 FOREST, BELGIUM	FOOD INNOVATION	BELGIUM	277,238.	113,502.	THE GOOD FOOD INSTITUTE, INC.	
ALTERNATIVE PROTEIN SOLUTIONS PRIVATE LIMITED, 505, FLOOR 5TH, 123, OM CHAMBERS, AUGUST KRANTI MARG, KEMPS CORNER, MUMBAI, INDIA	FOOD INNOVATION	INDIA	414,030.	83,626.	THE GOOD FOOD INSTITUTE, INC.	

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes No
GOOD FOOD LEGISLATIVE FUND, INC. - 84-3138225, 2503 N. HARRISON ST., #19, ARLINGTON, VA 22207	WORK WITH LEGISLATORS TO TRANSFORM FOOD SYSTEMS AWAY FROM CONVENTIONAL	VIRGINIA	501(C)(4)			X

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
 - a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
 - b Gift, grant, or capital contribution to related organization(s)
 - c Gift, grant, or capital contribution from related organization(s)
 - d Loans or loan guarantees to or for related organization(s)
 - e Loans or loan guarantees by related organization(s)

	1a	1b	1c	1d	1e	1f	1g	1h	1i	1j	1k	1l	1m	1n	1o	1p	1q	1r	1s	Yes	No
f Dividends from related organization(s)																					
g Sale of assets to related organization(s)																					
h Purchase of assets from related organization(s)																					
i Exchange of assets with related organization(s)																					
j Lease of facilities, equipment, or other assets to related organization(s)																					
k Lease of facilities, equipment, or other assets from related organization(s)																					
l Performance of services or membership or fundraising solicitations for related organization(s)																					
m Performance of services or membership or fundraising solicitations by related organization(s)																					
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)																					
o Sharing of paid employees with related organization(s)																					
p Reimbursement paid to related organization(s) for expenses																					
q Reimbursement paid by related organization(s) for expenses																					
r Other transfer of cash or property to related organization(s)																					
s Other transfer of cash or property from related organization(s)																					

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART I, IDENTIFICATION OF DISREGARDED ENTITIES:

NAME AND ADDRESS OF DISREGARDED ENTITY:

ALTERNATIVE PROTEIN SOLUTIONS PRIVATE LIMITED

505, FLOOR 5TH, 123, OM CHAMBERS, AUGUST KRANTI MARG, KEMPS CORNER

MUMBAI, INDIA

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

GOOD FOOD LEGISLATIVE FUND, INC.

PRIMARY ACTIVITY: WORK WITH LEGISLATORS TO TRANSFORM FOOD SYSTEMS AWAY FROM CONVENTIONAL MEANS