

GFI's Form 990 (for the year 2021)

The Good Food Institute (GFI) is 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 2021 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 2021 made it possible for GFI to set its 2022 operating budget at \$28.4 million to fund the work of our global teams.

While our 2021 form 990 indicates total revenues of \$43.5 million, this includes total pledges and grants receivable of \$15.2 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 \$28.3 million. Not reflected in the form 990 are payments on grants from prior years that seeded a portion of our 2022 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.



Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No. 1545-0047

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.

Α	For tl	ne 20	021 calendar year, or tax year beginning	and	ending						
В	Check i app l ica	f b l e:	C Name of organization			D Employer identifie	cation number				
	Add char	ress	THE GOOD FOOD INSTITUTE, I	INC							
	Nam Char	ne nge	Doing business as	81-08405	78						
	Initia retu	al m	Number and street (or P.O. box if mail is not delivered t	Number and street (or P.O. box if mail is not delivered to street address) Room/suite E T							
	Fina retu	n/	2503D N HARRISON ST.		19	866-849-					
	term ated		City or town, state or province, country, and ZIP or	foreign postal code		G Gross receipts \$	53,890,715.				
	retu		ARLINGTON, VA 22207			H(a) Is this a group re					
	App tion pend		F Name and address of principal officer: ILYA SI	HEYMAN		for subordinates					
_			SAME AS C ABOVE			H(b) Are all subordinates in					
			ot status: $X = 501(c)(3) = 501(c)(6)$ (in	sert no.) 4947(a)(1)	or 527	1	list. See instructions				
			► GFI.ORG	Oth su	T. v	H(c) Group exemptio					
	orm art I		anization: X Corporation Trust Association ummary	on Other	L Year	of formation: ZUIS N	1 State of legal domicile: DE				
	$\overline{}$	_	<u> </u>	WF Л	ספ ספו	TELODING THE	DOYDMY D				
é	1	Brid	efly describe the organization's mission or most signific OR A SUSTAINABLE, SECURE, AN	cant activities: WE A.	KE DEV	PDIA ME LUE.	NULEA URE				
Activities & Governance			eck this box if the organization discontinued								
/err	3		mber of voting members of the governing body (Part V				5				
g G	4		mber of independent voting members of the governing				4				
ور در	5		al number of individuals employed in calendar year 20				103				
<u>ities</u>	6		al number of volunteers (estimate if necessary)				57				
cti∨	7 2	a Tot	al unrelated business revenue from Part VIII, column (0	C). line 12			0.				
Ă			t unrelated business taxable income from Form 990-T,				0.				
						Prior Year	Current Year				
ď	8	Co	ntributions and grants (Part VIII, line 1h)			18,736,534.	42,936,683.				
Revenue	9	Pro	gram service revenue (Part VIII, line 2g)			18,999.	322,997.				
eve	10	Inv	estment income (Part VIII, column (A), lines 3, 4, and 7	d)		122,409.	143,948.				
E	11	Oth	ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10	Oc, and 11e)		45,652.	65,207.				
_	12	Tot	al revenue - add lines 8 through 11 (must equal Part VI	III, column (A), line 12)		18,923,594.	43,468,835.				
	13	Gra	ants and similar amounts paid (Part IX, column (A), line	s 1-3)		4,601,209.	6,056,700.				
	14		nefits paid to or for members (Part IX, column (A), line	,		0.	0.				
S	15		aries, other compensation, employee benefits (Part IX,			6,137,861.	7,018,840.				
Expenses	16a	a Pro	fessional fundraising fees (Part IX, column (A), line 11e		<u> </u>	0.	0.				
ă	. 1		al fundraising expenses (Part IX, column (D), line 25)	1,474,0 ■		0.504.504	2 252 242				
ш	17		ner expenses (Part IX, column (A), lines 11a-11d, 11f-24			2,534,534.	3,959,049.				
	18		al expenses. Add lines 13-17 (must equal Part IX, colu			13,273,604.					
	19	Re	venue less expenses. Subtract line 18 from line 12			5,649,990.	17,034,589. 26,434,246.				
Net Assets or	1	- .	(5) (1			ginning of Current Year 29,918,594.	End of Year 59,697,609.				
SSE	20		al assets (Part X, line 16)			2,303,124.	5,198,111.				
let A	21 22		al liabilities (Part X, line 26) t assets or fund balances. Subtract line 21 from line 20		·····	27,615,470.	54,499,498.				
P	art I		i assets of fully balances. Subtract line 21 from line 20 Bignature Block			27,013,470	34,433,430.				
			s of perjury, I declare that I have examined this return, including	ng accompanying schedule	s and statem	ents, and to the hest of my	knowledge and helief it is				
			or complete Declaration of preparer (other than officer) is ba				Milowioago ana bonon, it io				
-	,	T	Ilya Sheyman			11/12/2	022				
Sig	n		Signature, of officers			Date					
Hei			ILYA SHEYMAN, CHIEF EXECUT	IVE OFFICER							
			Type or print name and title								
		Pr	int/Type preparer's name Prepar	rer's signature	I	Date Check	PTIN				
Pai	d			F PARKER	1	.1/10/22 self-employ	ed №00970069				
Pre	parer		m's name CLIFTONLARSONALLEN I			Firm's EIN ▶	41-0746749				
Use	Only	Fir	m's address 475 REGENCY PARK, SU	JITE 175							
_			O'FALLON, IL 62269			Phone no. (6					
Ma	y the	IRS (discuss this return with the preparer shown above? Se	e instructions			X Yes No				

	990 (2021) THE GOOD FOOD INSTITUTE, INC	81-0840578	Page 2
Pa	t 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	MAKE THE GLOB	\mathtt{AL}
	FOOD SYSTEM BETTER FOR THE PLANET, PEOPLE, AND ANIMALS	BY SUPPORTING	
	EFFORTS TO MAKE ALTERNATIVE PROTEINS ACCESSIBLE, AFFORD	DABLE, AND	
	DELICIOUS.	•	
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	s2 Vas	X No
3	If "Yes." describe these changes on Schedule O.	o:	110
4	Describe the organization's program service accomplishments for each of its three largest program services,	as mossured by expenses	
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot	• •	
		illers, trie total expenses, a	nu
	revenue, if any, for each program service reported. (Code:) (Expenses \$ 7,549,797. including grants of \$ 6,056,700.) (Re		0.)
4a	(Code:) (Expenses \$7,549,797. including grants of \$6,056,700.) (ReSCIENCE AND TECHNOLOGY - GFI'S SCIENCE AND TECHNOLOGY I)
	ACCELERATES THE SCIENCE OF ALTERNATIVE PROTEIN TECHNOLO		
	SCIENTISTS ARE THE GLOBAL EXPERTS IN THIS SECTOR AND WO		
	THAT A ROADMAP EXISTS FOR ALTERNATIVE PROTEIN INNOVATIO		EST
	,) THAT	
	SIGNIFICANT FUNDS ARE DIRECTED TOWARD THE HIGHEST IMPAC	T AREAS OF	
	ALTERNATIVE PROTEIN RESEARCH.		
	GFI'S SCITECH TEAM IS FOCUSED ON THREE PRINCIPAL ACTIVI		
	1. ANALYZING CURRENT AND FUTURE TECHNICAL CHALLENGES AN		
	THE MOST IMPORTANT RESEARCH AND COMMERCIALIZATION OPPOR	RTUNITIES FOR	
	ALTERNATIVE PROTEINS.		
	2. MOBILIZING FUNDING FOR OPEN-ACCESS RESEARCH AND EARI		
4b	(Code:) (Expenses \$2, 265, 610including grants of \$) (Re		<u> </u>
	POLICY - GFI'S POLICY DEPARTMENT IS FOCUSED ON REMOVING		
	ALTERNATIVE PROTEINS AND LEVERAGING GOVERNMENT RESOURCE		
	PROGRESS. THE POLICY TEAM DIRECTS TWO PRIMARY INITIATIVE		
	PUBLIC INSTITUTIONS, AND ENGAGING WITH NONPROFIT ORGANI		
	SUPPORT POLICY OBJECTIVES. THE POLICY DEPARTMENT ALSO	JSES IMPACT	
	LITIGATION AS A STRATEGIC TOOL WHERE WARRANTED.		
	1 640 501	200	007 .
4c	(Code:) (Expenses \$1,648,501. including grants of \$0. (Recommendation of the comment of the co		<u>997.</u>)
	COMMUNICATIONS - GFI'S COMMUNICATIONS DEPARTMENT WORKS		
	GFI'S WORK ACROSS THE OTHER PROGRAMMATIC DEPARTMENTS AC		
	IMPACT AND POSITIONS GFI AS A THOUGHT LEADER IN THE ALT		EIN_
	SPACE. THE COMMUNICATIONS TEAM SECURES MEDIA ATTENTION		
	MISSION-ALIGNED COMPANIES, FOR THE SCIENCE OF ALTERNATI		
	·	FOR GFI'S	
	CORPORATE ENGAGEMENT EFFORTS, THEREBY SUPPORTING THE WO		
	COMMUNICATIONS DRIVES THE CONVERSATION ABOUT INNOVATIVE		
	INDUSTRIAL ANIMAL AGRICULTURE ON SOCIAL MEDIA, INSERTS	GFI EXPERTS I	NTO
	THE CONVERSATION AT KEY CONFERENCES, AND MAINTAINS A WE	BSITE THAT	
	SERVES AS THE WEB'S CENTRAL HUB FOR INFORMATION RELATED	TO ALTERNATI	VE
	PROTEIN RESEARCH AND INNOVATION.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ 1,861,084 • including grants of \$ 0 •) (Revenue \$	0.)	
<u>4</u> e	Total program service expenses ► 13,324,992.	<u>,</u>	
		Form 9	90 (2021)

SEE SCHEDULE O FOR CONTINUATION(S)

Form 990 (2021)

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Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		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? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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? If "Yes," complete Schedule D, Part VII	11b		X
С	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? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
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? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
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? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			17
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			17
_	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X	

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Pai	rt 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? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
ZTU	last day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
h		24b		
b	Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
C		04-		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			7.7
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		<u> </u>
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? If "Yes," complete Schedule L, Part II	26		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? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		X
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
		200		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	00-		x
	"Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		.03	140
_				
b	Enter the humber of Forms W 24 moladed of mine fat. Enter of infect applicable			
С	(gambling) winnings to prize winners?	10		
10000		1c Form	990	(2021)
132004	4 12-09-21	i Offil		(L UC I)

Form 990 (2021) THE GOOD FOOD INSTITUTE, INC

Part V Statements Regarding Other IRS Filings and Tax Compliance

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rai	Statements negariting other ins runings and rax compliance (continued)			
	5. "		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 103			
	, , , , , , , , , , , , , , , , , , , ,	01	Х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Λ	
20	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. Did the organization have unrelated business gross income of \$1,000 or more during the year?	20		Х
3a		3a		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		\vdash
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	40		X
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	4a		
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a		5a		Х
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	-00		
ou	any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	<u>ou</u>		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	-		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders 11a			
р	Gross income from other sources. (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	10-		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note: See the instructions for additional information the organization must report on Schedule O.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			1
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

THE GOOD FOOD INSTITUTE, INC 81-0840578 Form 990 (2021) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 5 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a b Each committee with authority to act on behalf of the governing body? Х 8b 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.) Yes Nο Х 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, X and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х 12c on Schedule O how this was done Х Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? Х a The organization's CEO, Executive Director, or top management official 15a Х 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 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 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. X Upon request Own website Another's website Other (explain on Schedule O) 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. 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,

SEE SCHEDULE O FOR FULL LIST OF STATES

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Form 990 (2021) THE GOOD FOOD INSTITUTE, INC

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<u> Page</u> **7**

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 (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

(A)	(B)	related organization compensate (B) (C)						(D)	(E)	(F)
Name and title	Average		Position					Reportable	Reportable	Estimated
Name and the	hours per					than o		compensation	compensation	amount of
	week					r/trus		from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	ه ا			ited		organization	(W-2/1099-MISC/	from the
	related	stee	truste		ره	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tru	iona		ploye	t com	١	1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) BRUCE FRIEDRICH	40.00	Ť	 -		<u>×</u>	Τ 0	-			
PRESIDENT, TREASURER, CEO		Х		x				129,665.	0.	11,499.
(2) SARAH DAVID	40.00							·		
SECRETARY, GENERAL COUNSEL&VP-ADMIN				Х				125,995.	0.	6,242.
(3) SUSAN MCCAUSLAND-HALTEMAN	40.00									
VP - DEVELOPMENT						Х		113,770.	0.	11,022.
(4) JESSICA ALMY	40.00									
VP - POLICY						Х		117,204.	0.	4,045.
(5) ELIZABETH SPECHT	40.00							400 405		
VP - SCIENCE AND TECHNOLOGY	40.00	<u> </u>			_	Х		109,107.	0.	8,569.
(6) CAROLINE BUSHNELL	40.00					,,		100 004		10 050
VP - CORPORATE ENGAGEMENT	40.00	┢	_	-	_	Х		100,994.	0.	12,052
(7) SHEILA VOSS	40.00	ł				x		102 654	_	E 0.0
VP - COMMUNICATIONS (8) VANDHANA BALASUBRAMANIAN	2.00	┢	\vdash	⊢	\vdash	^	\vdash	103,654.	0.	508.
DIRECTOR	2.00	x						0.	0.	0.
(9) KATHLEEN FRESTON	2.00			\vdash		\vdash		0.	<u></u>	
DIRECTOR	200	х						0.	0.	ο.
(10) CAMERON ICARD	2.00									
DIRECTOR		Х						0.	0.	ο.
(11) STEWART DAVID	5.00									
CHAIR		Х						0.	0.	0.
			_	_	<u> </u>		<u> </u>			
		├	_	_	_		_			
		-								
		_	_	<u> </u>	_		_			
		-								
		-	\vdash	\vdash	\vdash		\vdash			
		J		l	l		l			1

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Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
	(A)	(B)	- 1						(D)	(E)			(F)	
	Name and title	Average	(do		Pos		າ than d	one	Reportable Reportable			Es	timate	ed
		hours per	. Dong annoon porcon to both an			n an	compensation	compensation	n	an	nount	of		
		week	_	ber an	la a a	recto	r/trus	ree)	from	from related	- 1		other	
		(list any	recto						the	organization			pensa	
		hours for related	or di	ee			ated		organization	(W-2/1099-MIS	- 1		om th	
		organizations	ustee	trust		, e	suadı		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		_	anizat d re l at	
		below	lual tr	tiona		yoldı	st con	_	1099-14EC)				anizati	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orge	ai iizati	0110
			_	_			1 0				\neg			
							┝				\longrightarrow			
											\neg			
							\vdash				-			
							$oxed{oxed}$							
							\vdash				-			
1b	Subtotal								800,389.		0.	5	3,9	37.
	Total from continuation sheets to Part VI								0.		0.			0.
	Total (add lines 1b and 1c)								800,389.		0.	5	3,9	37.
2	Total number of individuals (including but n							o re	eceived more than \$100,	000 of reportable				
	compensation from the organization													7
													Yes	No
3	Did the organization list any former officer,	director, truste	e, k	еу е	empl	oye	e, or	hig	hest compensated empl	oyee on				
	line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4	For any individual listed on line 1a, is the su													
	and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual			4		X
5	Did any person listed on line 1a receive or a													
	rendered to the organization? If "Yes." com	plete Schedule	Jf	or su	ıch į	oers	on .					5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	mpensated ind	epe	nder	nt co	ontra	actor	rs th	nat received more than \$	100,000 of comp	oensat	tion fro	om	
	the organization. Report compensation for	the calendar ye	ar e	ndir	ng w	ith c	or wi	<u>thiņ</u>	the organization's tax y	ear.				
	(A)								(B)	.	_	(C		
	Name and business address								Description of s	ervices	С	ompe	nsatio	n

(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	135,751.
VAN SCOYOC ASSOCIATES, 800 MAINE AVE SW, SUITE 800, WASHINGTON, DC 20024	LOBBYING SERVICES	125,000.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	

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Forn	n 990	(2021) THE GOOD FOOD	INSTITUT	E, INC		81-0840	578 Page 9
Pa	rt VI	II Statement of Revenue					
		Check if Schedule O contains a response o	r note to any line		(B)	(C)	(D)
				(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
S. S.	1 a	a Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	o Membership dues 1b					
وَ ق		Fundraising events 1c					
iifts ar A	c	d Related organizations 1d					
a,o ⊞	e	Government grants (contributions)	959,910.				
Sign	f	All other contributions, gifts, grants, and					
but		similar amounts not included above 1f	41,976,773.				
n de la	g	Noncash contributions included in lines 1a-1f 1g \$	1,333,910.				
<u>လ</u> မ်	<u> </u>	Total. Add lines 1a-1f	>	42,936,683.			
			Business Code				
မွ	2 a	CONFERENCES AND MEETINGS	900099	322,997.	322,997.		
ē Ķ	b						
) Si	c	·					
Program Service Revenue	c	·					
rog	€	•					
Δ.	Ι.	All other program service revenue		222 007			
		Total. Add lines 2a-2f		322,997.			
	3	Investment income (including dividends, interes	· .	148,210.			148,210.
	_	other similar amounts) Income from investment of tax-exempt bond pro		140,210.			140,210,
	4 5	Royalties	oceeus				
		(i) Real	(ii) Personal				
	6 a						
	b						
	٥	Rental income or (loss) 6c					
		Net rental income or (loss)					
	l	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 10,417,618.					
	b	Less: cost or other basis					
en		and sales expenses					
evenue	c	Gain or (loss) 7c					
ď	l	d Net gain or (loss)		-4,262.			-4,262.
Other	8 a	a Gross income from fundraising events (not					
ō		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses 8b					
	٥	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19 9a					
	l b						
		Net income or (loss) from gaming activities					
	l	a Gross sales of inventory, less returns					
		and allowances 10a					
	l b	Less: cost of goods sold 10b					
_	l	Net income or (loss) from sales of inventory					
			Business Code				
sno e	11 a	OTHER INCOME	900099	65,207.			65,207.
ane	b	·					
Miscellaneous Revenue	c						
Mis	c	d All other revenue					
_	e	e Total. Add lines 11a-11d		65,207.	225		
	12	Total revenue See instructions		43,468,835.	322,997.	0.	209,155,

Form 990 (2021) 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). X Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses (**D**) Fundraising expenses (A) Total expenses Do not include amounts reported on lines 6b. Program service expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 2,678,348. 2,678,348. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 3,378,352. 3,378,352. Benefits paid to or for members Compensation of current officers, directors, 273,402. 98,816. 139,295. 35,291. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 5,375,588. 3,643,595. 941,697. 790,296. Other salaries and wages 7 Pension plan accruals and contributions (include 77,776. 41,155. 22,591. 14,030. section 401(k) and 403(b) employer contributions) 775,886. 471,622. 194,732. 109,532. Other employee benefits 9 516,188. 341,558. 99,224. 75,406. 10 Payroll taxes Fees for services (nonemployees): 11 51,801. 42,537. 8,320. 944. a Management 32,847.32,847. Legal 124,410. 124,410. Accounting 325,000. 325,000. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, 2,682,109. 1,774,486. 553,244. 354,379. column (A), amount, list line 11g expenses on Sch O.) 1,745. 11,852. 9,479. 628. Advertising and promotion 12 127,998. 71,709. 34,311. 21,978. Office expenses 13 4,516. 2,303. 1,897. 316. Information technology 14 Royalties 15 133,227. 113,480. 12,750. 6,997. 16 Occupancy 52,544. 28,696. 20,580. 3,268. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... 156,199. 165,012. 4,559. 4,254. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 6,780. 5,765. 822. 193. Depreciation, depletion, and amortization 22 65,656. 45,449. 16,446. 3,761. 23 Other expenses. Itemize expenses not covered 24 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.) 79,527. 23,920. 44,376. 11,231. BANK, FILING AND OTHER 64,702. FOREIGN EXCHANGE GAIN/L 36,103. 9,138. 19,461. 2,329. 16,492. 9,202. 4,961. SUBSCRIPTIONS 13,941. 7,778. d MISCELLANEOUS EXPENSES 1,969. 4,194. 635. 354. 90. 191. e All other expenses _ 17,034,589. 13,324,992. 2,235,597. 1,474,000. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

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Check here

if following SOP 98-2 (ASC 958-720)

Form 990 (2021)
Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or no	te to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		2,235,533.	1	2,272,837.	
	2	Savings and temporary cash investments			4,515,220.	2	19,785,675.
	3	Pledges and grants receivable, net		6,408,998.	3	15,188,430.	
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current o					
		trustee, key employee, creator or founder, subs	tantia l (contributor, or 35%			
		controlled entity or family member of any of the	se pers	ons		5	
	6	Loans and other receivables from other disquali	ified pe	rsons (as defined			
ø		under section 4958(f)(1)), and persons described	d in sec	tion 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	B ::			231,650.	9	291,927.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	21,262.			
	b	Less: accumulated depreciation	10b	21,262. 12,684.	14,870. 16,512,323.	10c	8,578.
	11	Investments - publicly traded securities		16,512,323.	11	22,150,162.	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ			29,918,594.	16	59,697,609.
	17	Accounts payable and accrued expenses	687,761.	17	897,385.		
	18	Grants payable			1,615,363.	18	4,300,726.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
S	22	Loans and other payables to any current or form	ner offic	cer, director,			
Liabilities		trustee, key employee, creator or founder, subs	tantia l (contributor, or 35%			
iabi		controlled entity or family member of any of the	•			22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	s 17-24). Complete Part X			
		of Schedule D			0 202 104	25	F 100 111
	26	Total liabilities. Add lines 17 through 25		. 37	2,303,124.	26	5,198,111.
w		Organizations that follow FASB ASC 958, che	eck her	e ▶ <u>X</u>			
ce		and complete lines 27, 28, 32, and 33.			17 200 122		25 700 267
alar	27	Net assets without donor restrictions			17,209,123.	27	35,788,267. 18,711,231.
J B	28	Net assets with donor restrictions			10,406,347.	28	18,/11,231.
nu		Organizations that do not follow FASB ASC 9	958, ch	eck here L			
Jr F		and complete lines 29 through 33.					
ts (29	Capital stock or trust principal, or current funds				29	
SSe	30	Paid-in or capital surplus, or land, building, or ed				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in			27,615,470.	31	5/ /00 /00
ž	32				29,918,594.	32	54,499,498. 59,697,609.
	33	Total liabilities and net assets/fund balances			43,310,334.	33	Form 990 (2021)

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	990 (2021) THE GOOD FOOD INSTITUTE, INC	81-084	40578	Pag	ge 12
Pai	rt 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)		43,468		
2	Total expenses (must equal Part IX, column (A), line 25)		<u>17,034</u>		
3	Revenue less expenses. Subtract line 2 from line 1		26,434	_	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	27,615		
5	Net unrealized gains (losses) on investments	5	449	7,78	82.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	54,499	, 49	<u>98.</u>
Pai	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	\rightarrow	X
	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?		2b	Х	
	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 X Consolidated basis Both consolidated and separate basis				
С	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?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	gle Audit			
	Act and OMB Circular A-133?		. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

132012 12-09-21

SCHEDULE A

Internal Revenue Service

(Form 990)

Total

Department of the Treasury

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

2021

Open to Public Inspection

Employer identification number Name of the organization THE GOOD FOOD INSTITUTE, 81-0840578 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 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).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X 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.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12q. 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. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Schedule A (Form 990) 2021

THE GOOD FOOD INSTITUTE, INC

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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.)

800	talls to quality under the tests	listed below, pleas	se complete Fait i				
	ction A. Public Support			I	ı	I	
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	5005604	E022E42	00451100	10006504	40006600	05262550
	include any "unusual grants.")	5285624.	/933/43.	204/1188.	18/36534.	<u>42936683.</u>	95363772.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	E00E604	7022742	00471100	10726524	40026602	0.5.2.6.2.7.7.0
	Total. Add lines 1 through 3	5285624.	/933/43.	204/1188.	18/36534.	42936683.	95363772.
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,						00005706
_	column (f)						22825726.
	Public support. Subtract line 5 from line 4.						72538046.
	• • • • • • • • • • • • • • • • • • • •						T
	ndar year (or fiscal year beginning in)	(a) 2017 5285624.	(b) 2018	(c) 2019	(d) 2020 18736534.	(e) 2021	(f) Total
	Amounts from line 4	3203024.	/933/43.	204/1100.	10/30334.	42930003.	95363774.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	1 070	40 260	06 417	107 152	140 010	112 114
_	and income from similar sources	1,072.	40,260.	96,417.	127,155.	148,212.	413,114.
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			17 252	45,652.	65 207	150 010
	assets (Explain in Part VI.)			47,353.	45,652.		158,212. 95935098.
	Total support. Add lines 7 through 10		`				,630,406.
	Gross receipts from related activities,			f			,030,400.
13	First 5 years. If the Form 990 is for the	=	st, second, third,	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
Sec	organization, check this box and stop ction C. Computation of Publi		centage				
	Public support percentage for 2021 (I			column (f))		14	75.61 %
	Public support percentage from 2020					15	79.15 %
	33 1/3% support test - 2021. If the c						
ioa	stop here. The organization qualifies	-					
h	33 1/3% support test - 2020. If the o						
D	and stop here. The organization qual	•					
17~	10% -facts-and-circumstances test						
11 d	and if the organization meets the fact						
	meets the facts-and-circumstances te			=	raanization	_	
h	10% -facts-and-circumstances test	•	•				
D	more, and if the organization meets the	•					1070 01
	organization meets the facts-and-circu						
19	•			, ,			
10	Private foundation. If the organization	n did not check a f	JOA OIT HITE TO, TO	a, 100, 17a, 01 170	, check this box a		(Farm 000) 0004

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INC 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.)

	Public Support	iow, picase comp	note i art ii.j				
Calendar yeaı	r (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
-	rants, contributions, and						
membe	rship fees received. (Do not	ļ					
inc l ude	any "unusual grants.")	ļ					
2 Gross r	eceipts from admissions,						
	ndise sold or services per-						
	or facilities furnished in ivity that is related to the						
	ation's tax-exempt purpose	ļ					
3 Gross r	eceipts from activities that						
	an unrelated trade or bus-						
iness ui	nder section 513	ļ					
4 Tax rev	enues levied for the organ-						
	s benefit and either paid to						
	nded on its behalf	ļ					
5 The val	ue of services or facilities						
-	ed by a governmental unit to						
	anization without charge	ļ					
ū	Add lines 1 through 5						
	ts included on lines 1, 2, and						
3 receiv	ved from disqualified persons	ļ					
b Amounts i	ncluded on lines 2 and 3 received						
	than disqualified persons that	ļ					
	e greater of \$5,000 or 1% of the n line 13 for the year						
	es 7a and 7b						
	support. (Subtract line 7c from line 6.)						
	Total Support			•		•	
Calendar yeai	r (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amoun	ts from line 6						
	ncome from interest,						
	ds, payments received on es loans, rents, royalties,						
and inc	ome from similar sources						
	d business taxable income						
(less sec	ction 511 taxes) from businesses						
acquired	after June 30, 1975						
c Add l ine	es 10a and 10b						
11 Net inco	ome from unrelated business						
	es not included on line 10b, r or not the business is						
	y carried on						
	ncome. Do not include gain						
	from the sale of capital (Explain in Part VI.)						
	pport. (Add lines 9, 10c, 11, and 12.)						
14 First 5	years. If the Form 990 is for the	organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organizatio	on,
check t	his box and stop here						>
Section C	. Computation of Public	Support Per	centage				
15 Public s	support percentage for 2021 (lin	ne 8, co l umn (f), d	ivided by line 13, o	co l umn (f))		15	%
	support percentage from 2020 S					16	%
	. Computation of Invest						
	nent income percentage for 202					17	%
	nent income percentage from 20					18	%
	6 support tests - 2021. If the c						7 is not
	an 33 1/3%, check this box and						
	6 support tests - 2020. If the c	•					
	is not more than 33 1/3%, check						
20 Private	foundation. If the organization	did not check a '	box on line 14 19:	a or 19b check th	us box and see ins	structions	

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Schedule A (Form 990) 2021

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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer 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).
- **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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
Зс		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
- 5-		
9b		
9c		
10a		
10h		
 10b		

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of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b | Schedule A (Form 990) 2021

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? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

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THE GOOD FOOD INSTITUTE, 81-0840578 Page 6 Schedule A (Form 990) 2021 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 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. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 Depreciation and depletion 5 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 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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 (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. 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. 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, column A) 1 1 Enter 0.85 of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, column A) 3 Enter greater of line 2 or line 3. 4 Income tax imposed in prior year 5 5

Schedule A (Form 990) 2021

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Schedule A (Form 990) 2021 THE GOOD FOOD INSTITUTE, INC 81-0840578 Page 7

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

Section D - Distributions Current Year

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 2021 from Section C, line 6	9	
lo Line 8 amount divided by line 9 amount	10	

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
b	From 2017			
c	From 2018			
d	From 2019			
e	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
<u>i</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2017			
b	Excess from 2018			
С	Excess from 2019			
d	Excess from 2020			
е	Excess from 2021			

Schedule A	(Form 990) 2021	THE	GOOD	FOOD	INSTITUTE	INC	81-0840578 Page 8
Part VI	Supplemental Part IV, Section A, line 1; Part IV, Sect	Information. lines 1, 2, 3b, 3d ion D, lines 2 an	Provide , 4b, 4c, d 3; Part	the expla 5a, 6, 9a, IV, Sectio	nations required by l 9b, 9c, 11a, 11b, an n E, lines 1c, 2a, 2b,	Part II, line 10; Pa d 11c; Part IV, Se 3a, and 3b; Part	rt II, line 17a or 17b; Part III, line 12; ction B, lines 1 and 2; Part IV, Section C, V, line 1; Part V, Section B, line 1e; Part V, for any additional information.
-							

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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) organizat	tions: Complete Part III.			
Nar	ne of organization			Emp	loyer identification number
	THE GOO	D FOOD INSTITUTE	, INC		81-0840578
Pa	art I-A Complete if the org	janization is exempt unde	er section 501(c) o	or is a section 527 or	ganization .
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		> \$	
Pa	art I-B Complete if the org	janization is exempt und	er section 501(c)(3	3).	
1	Enter the amount of any excise tax	incurred by the organization und	er section 4955	▶ \$	0.
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955		0.
	If the organization incurred a sectio		•		
	a Was a correction made?				Yes No
	b If "Yes," describe in Part IV.				1/0)
		janization is exempt und			
	Enter the amount directly expended		•		S
2	Enter the amount of the filing organ		•		
2	exempt function activities Total exempt function expenditures				
3	!		,		
4	line 17b Did the filing organization file Form				
5					
·	made payments. For each organiza			_	
	contributions received that were pro-	omptly and directly delivered to a	a separate political orga	nization, such as a separat	e segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	ide information in Part I	V.	
	(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) 2021

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Schedule C (Form 990) 2021 TH Part II-A Complete if the organ section 501(h)).	E GOOD FO	OD INSTITUTE	E , INC 501(c)(3) and file	81-0 ed Form 5768 (ele	840578 Page 2 ction under
A Check ▶ if the filing organization expenses, and share or B Check ▶ if the filing organization	f excess lobbying e	expenditures).		group member's name	e, address, EIN,
	n Lobbying Exper	nditures	voiche apply.	(a) Filing organization's totals	(b) Affiliated group totals
 Total lobbying expenditures to influence Total lobbying expenditures to influence Total lobbying expenditures (add linested Other exempt purpose expenditures) 	ce a legislative bod	ly (direct lobbying)		3,295. 469,971. 473,266. 12,851,726.	
e Total exempt purpose expenditures (a				13,324,992.	
f Lobbying nontaxable amount. Enter th	ne amount from the	following table in both	columns.	816,250.	
If the amount on line 1e, column (a) or (b Not over \$500,000	20% of 1	bying nontaxable amount on line 1e.			
Over \$500,000 but not over \$1,000,00 Over \$1,000,000 but not over \$1,500,		00 plus 15% of the exce 00 plus 10% of the exce			
Over \$1,500,000 but not over \$17,000		00 plus 5% of the exces			
Over \$17,000,000	\$1,000,	•	, , , , , , , , , , , , , , , , , , ,		
g Grassroots nontaxable amount (enter	25% of line 1f)			204,063.	
h Subtract line 1g from line 1a. If zero or	less, enter -0			0.	
i Subtract line 1f from line 1c. If zero or				0.	
j If there is an amount other than zero or reporting section 4911 tax for this yea		line 1i, did the organiza	tion file Form 4720		Yes No
(Some organizations that	made a section 50	eraging Period Under 01(h) election do not h ate instructions for lin	nave to complete all o	of the five columns be	elow.
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount		498,266.	661,263.	816,250.	1,975,779.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,963,669.
c Total lobbying expenditures		247,345.	399,658.	473,266.	1,120,269.
d Grassroots nontaxable amount		124,567.	165,316.	204,063.	493,946.
e Grassroots ceiling amount (150% of line 2d, column (e))				= 11,000	740,919.
f Grassroots lobbying expenditures		9,635.	9,921.	3,295.	22,851.

Schedule C (Form 990) 2021

Schedule C (Form 990) 2021

THE GOOD FOOD INSTITUTE, INC

81-0840578 Page 3

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)).

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:	I			o)
local legislation, including any attempt to influence public opinion on a legislative matter	es	No	Amo	ount
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
Media advertisements?				
d Mailings to members, legislators, or the public?				
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				
a 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?	1(0)(5)	or sec	ction	
501(c)(6).	1(0)(5),	or sec	HOH	
			Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
	r vear?	I -	l	
Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior in III-B Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."	1(c)(5),			3, is
rt III-B Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5), OR (b)	or sec		3, is
rt III-B Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."	1(c)(5), OR (b)	or sec		3, is
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members	1(c)(5), OR (b)	or sec		3, is
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	1(c)(5), OR (b)	or sec		3, is
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	1(c)(5), OR (b)	or sec		3, is
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	1(c)(5), OR (b)	or sec Part I		3, is
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	1(c)(5), OR (b)	or sec Part I		3, is
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	1(c)(5), OR (b)	or sec Part I		3, is
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	1(c)(5), OR (b)	or sec Part I		3, is
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	1(c)(5), OR (b)	or sec Part I		3, is

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

Inspection

Employer identification number

Name of the organization

THE GOOD FOOD INSTITUTE, INC 81-0840578

Pai	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ccounts. Complete if the
	organization answered Tes on Torm 550, Fart IV, inte	(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 w	riting that the assets held in donor advised fur	nde
0	are the organization's property, subject to the organization's ex	_	
6	Did the organization inform all grantees, donors, and donor ad		
U	for charitable purposes and not for the benefit of the donor or		-
			Yes No
Pai		anization answered "Yes" on Form 990. Part N	
1	Purpose(s) of conservation easements held by the organization		
·	Preservation of land for public use (for example, recreation		torically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form of a co	onservation easement on the last
_	day of the tax year.		Held at the End of the Tax Year
а	= . 1		2a
b			2b
c	Number of conservation easements on a certified historic structure.		2c
d	Number of conservation easements included in (c) acquired aff		
-	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release		
	vear ▶	acca, crangalonea, cr terrimated by the crgan	
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	<u> </u>	
-	violations, and enforcement of the conservation easements it h		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
	>		G ,
7	Amount of expenses incurred in monitoring, inspecting, handlin	ng of violations, and enforcing conservation ea	asements during the year
	> \$, ,	g ,
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(4)(E	3)(i)
	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expense stater	ment and
	balance sheet, and include, if applicable, the text of the footno	te to the organization's financial statements th	nat describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of A	Art, Historical Treasures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	, not to report in its revenue statement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for publi	ic exhibition, education, or research in furthera	ance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958	, to report in its revenue statement and balanc	ce sheet works of
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research in furtheranc	e of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		• \$
2	If the organization received or held works of art, historical treas		
	the following amounts required to be reported under FASB AS	_	
а	Revenue included on Form 990, Part VIII, line 1		• \$
	Assets included in Form 990, Part X		
	For December 1. Deduction Act Notice and the Instructions of		0 1 1 5 5 600 0004

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

	dule D (Form 990) 2021 THE GOOD t III Organizations Maintaining Co	FOOD INS				r Othor (Page 2
Pai									(continu	ued)
3	Using the organization's acquisition, accession	n, and other record	ls, check	any of the f	following that	t make sigr	nificant u	ise of its		
	collection items (check all that apply):									
а	Public exhibition	(hange progra					
b	Scholarly research	•	• 🔲	Other						
С	Preservation for future generations									
4	Provide a description of the organization's col							se in Part	XIII.	
5	During the year, did the organization solicit or								7	
Do	to be sold to raise funds rather than to be mai	.							Yes	No
Par	t IV Escrow and Custodial Arrang		ete if the	e organizatio	n answered '	'Yes" on F	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Part	•								
1a	Is the organization an agent, trustee, custodia		-						7	
	on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in Part XIII a	and comp l ete the fo	llowing t	able:						
							\vdash		Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on Fo	,	,			•	?	L	Yes	No
	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds. Complete if									
		(a) Current year	(b) F	Prior year	(c) Two year	rs back (c	1) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre	ent year end ba l anc	e (line 1g	g, column (a)) he l d as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment	6								
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.								
За	Are there endowment funds not in the posses	sion of the organiz	ation tha	t are he l d ar	nd administer	ed for the	organiza	ation	_	
	by:									Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizat								3b	
4	Describe in Part XIII the intended uses of the	organization's endo	wment f	unds.						
Par	t VI Land, Buildings, and Equipme	ent.								
	Complete if the organization answered	l "Yes" on Form 990	D, Part I V	/, l ine 11a. S	ee Form 990	, Part X, I ir	ne 10.			
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Acc	cumulate	ed	(d) Book	value
	,	basis (invest	ment)	basis	(other)		eciation		. ,	
1a	Land		-							
	Buildings									
	Leasehold improvements									
	Equipment			2	1,262.		12,68	34.	8	,578.
	Other	I		_	, =		, _,			,
	. Add lines 1a through 1e. (Column (d) must ed		X colun	n (R) line 1:	Oc.)				8	,578.
	2 (Octainin tai illiati CC									

Schedu l e D	(Form 990) 2021	THE	GOOD	FOOD	INSTITUTE,	INC		81-0840578	Page 3
Part VII	Investments - C	Other Se	curities	i_					
	Complete if the orga	anization a	nswered "	Yes" on F	orm 990, Part IV, line	11b. See F	Form 990, Part X, line 12.		
(a) Descrip	tion of security or catego	Ory (including	g name of secu	urity)	(b) Book value	(c) M	lethod of valuation: Cost of	or end-of-year market va	alue
1) Financia	l derivatives								
	held equity interests								
(3) Other									
(A)									
(B)									
(C)									
(D)									
(E)									
(F)				_					
(G)				_					
(H))	D 11/ 1	(D) II 40	<u>, </u>					
Dort VIII	o) must equal Form 990, Investments - F	Part X, col	. (B) line 12	<u>.) 🏲 </u>					
Part VIII	J	_			000 Dart IV line	11- 0 [000 Dart V Era 10		
				Yes" on F			Form 990, Part X, line 13.		
	(a) Description of i	nvestmen	t		(b) Book value	(c) N	lethod of valuation: Cost	or end-of-year market va	ılue
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
Total. (Col. (b	o) must equal Form 990,	Part X, col	. (B) line 13.	_) ▶					
Part IX	Other Assets.								
	Complete if the orga	anization a	nswered "	Yes" on F	orm 990, Part IV, line	11d. See F	Form 990, Part X, line 15.		
				(a) Des	cription			(b) Book val	ue
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
	(/a)at a1 [[000 D		D) // 15	1				
Part X	Other Liabilities	<u>m 990, Pa</u>	ert X, COI. (E	<u> 3) IINE 15.</u>)				
Turk			newored "	Vec" on F	Form 900 Part IV line	110 or 11f	. See Form 990, Part X, lir	ne 25	
		scription of		163 0111	Offit 990, Fait IV, Illie	116 01 111	. Gee i Gilli 990, i ait X, iii	(b) Book val	luo
<u>1. </u>	. , ,	Scription	of flability					(b) Book vai	<u></u>
	eral income taxes								
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
Γotal. (Colu	mn (b) must eaual Foi	rm 990. Pa	art X. col. (l	B) <i>line 25.</i>)			▶	
							ization's financial stateme	ents that reports the	
-	•					_	ext of the footnote has been	•	X

132053 10-28-21

	dule D (Form 990) 2021 THE GOOD FOOD INSTITUTE,		81-084057	8 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Stater	ments With Revenue per	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.		
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:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities		_	
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		_	
b	Other (Describe in Part XIII.)	4b	_	
С	Add lines 4a and 4b			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			
Pa	t XII Reconciliation of Expenses per Audited Financial State	-	er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1			
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:	1 1		
а	Donated services and use of facilities		_	
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	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:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)		5	
Pa	t XIII Supplemental Information.			
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P	art IV, lines 1b and 2b; Part V, lir	ne 4; Part X, l ine 2; Pa	rt XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	additional information.		
PAI	T X, LINE 2:			
THE	GOOD FOOD INSTITUTE, INC. REQUIRES THAT	A TAX POSITION	BE RECOGNIZ	ED
ΛP	DERECOGNIZED BASED ON A "MORE-LIKELY-THA	א_אַריי האַסבּפּטרויט	יים אם אדים אם אדים.	TEC
<u>OIC</u>	DERECOGNIZED BASED ON A MORE-BIREBI-INA	M-NOI IIIKESIIODD	· IIIIS AFFI	1110
TO	POSITIONS TAKEN OR EXPECTED TO BE TAKEN	IN A TAX RETURN.	GFI DOES N	OT
BEI	IEVE ITS CONSOLIDATED FINANCIAL STATEMEN	TS INCLUDE, OR R	EFLECT, ANY	,
UNC	ERTAIN 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.

Open to Public Inspection

Name of the organization

Employer identification number

_						
THE GOOD FOOD II	NSTITUTE	INC			81-084057	8
Part I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "Y	es" on
Form 990, Part IV			one and one of the original	ete ii tile organ	ization answered T	63 011
		maintain record	ds to substantiate the amount of its gra	ints and other	assistance	
•	•		he selection criteria used to award the			Yes No
and granteded diigibility re	ino granto or o	ioorotarroo, arra t	no colocitori cinteria acca to awara tire	grante or accid		
2 For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	arants and ot	ner assistance outsi	de the
United States.	ingo in r dir v ino	organization o	srededures for mornicaling the dec of its	grante and et	ior addictariod dator	40 1110
	ne following Part	I. line 3 table ca	n be duplicated if additional space is n	eeded.)		
(a) Region		(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-	is a pro	gram service,	expenditures
	in the region	independent	gram services, investments, grants to		specific type	for and investments
		contractors in the region	recipients located in the region)	of service	(s) in the region	in the region
				HARNESS THE	POWER OF	
				FOOD INNOVA	TION AND	
EAST ASIA & THE				MARKETS TO	ACCELERATE	
PACIFIC	2		OTHER	ALTERNATIVE	PROTEINS TO	749,073.
				HARNESS THE	POWER OF	
				FOOD INNOVA	TION AND	
				MARKETS TO	ACCELERATE	
SOUTH AMERICA	1		OTHER	ALTERNATIVE	PROTEINS TO	602,593.
				HARNESS THE	POWER OF	
				FOOD INNOVA	TION AND	
				MARKETS TO	ACCELERATE	
SOUTH ASIA	1		OTHER	ALTERNATIVE	PROTEINS TO	517,426.
				HARNESS THE	POWER OF	
				FOOD INNOVA	TION AND	
MIDDLE EAST & NORTH				MARKETS TO	ACCELERATE	
AFRICA	1		OTHER	ALTERNATIVE	PROTEINS TO	970,050.
				HARNESS THE	POWER OF	
				FOOD INNOVA	TION AND	
				MARKETS TO	ACCELERATE	
EUROPE	1		OTHER		PROTEINS TO	1,268,768.
					ODUCTION OF	
				PRECISION-E		
EAST ASIA & THE					PROTEIN WITH	
PACIFIC	0		GRANTS		PPEARANCE AND	748,950.
				SEAFOOD SPE		
				CHARACTERIZ		
					OCESSES FOR	
SOUTH AMERICA	0		GRANTS		D STRUCTURED	994,988.
				GOSWANI - I		
				DIFFERENTIA		
NOTIFIE AGEN			GDANIEG.		ATION OF FISH	120 440
SOUTH ASIA	0	^	GRANTS	MUSCLE AND	OPTIMIZATION	130,449.
3 a Subtotal	6	0				5,982,297.
b Total from continuation		_				1 502 065
sheets to Part I	0	0				1,503,965.
c Totals (add lines 3a		^				7 496 262

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

Schedule F (Form 990) 2021

SEE PART V FOR COLUMN (E) DESCRIPTIONS

THE GOOD FOOD INSTITUTE, INC 81-0840578 Schedule F (Form 990) Page 1 Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) Part I (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total (a) Region offices is a program service, expenditures employees or (by type) (i.e., fundraising, in the region agents in program services, grants to describe specific type for region recipients located in the region) region of service(s) in region STUDY THE GENETIC BASIS OF PROLIFERATION IN CULTURED MEAT. MIDDLE EAST & NORTH GRANTS DEVELOPMENT OF 650,912. AFRICA UNCOVERING THE SECRETOME OF EVOLVING PRIMARY MUSCLE CELLS FOR IN EUROPE 0 GRANTS VITRO MEAT PRODUCTION. 680,013. MULTIOMIC CHARACTERIZATION OF FISH NORTH AMERICA (NON STEM CELL CULTURE MEDIA. 0 GRANTS PROTEIN EXTRACTION AND US) 173,040.

Totals

1,503,965.

81-0840578

GOOD FOOD INSTITUTE, INC

THE

Schedule F (Form 990) 2021

Page 2

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. Part II

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)
			SCALABLE PRODUCTION OF					
		EAST ASIA AND THE	PRECISION-ENGINEERED	002 676		c	K / IN	FAIR MARKET
		FACIFIC	THOOMEDING THE	.000,740	ATENTANSER		W/W	Aprop
		EUROPE (INCLUDING	SECRETOME OF EVOLVING					
			PRIMARY MUSCLE CELLS					FAIR MARKET
		GREENLAND)	FOR IN VITRO MEAT	98,816.	WIRE TRANSFER	0.N	N/A	VALUE
		SMT dii 15MT / Bd odiid						
		ICELAND &	POLICY AND					FAIR MARKET
		GREENLAND)	COMMUNICATIONS WORK	33,911.	911, WIRE TRANSFER	0	N/A	VALUE
			STUDY THE GENETIC					
			BASIS OF					
		MIDDLE EAST AND	PROLIFERATION IN					FAIR MARKET
		NORTH AFRICA	CULTURED MEAT	50,000.	WIRE TRANSFER	0	N/A	VALUE
		ENTCILITY / RECAILE						
		ICELAND &	POLICY AND					FAIR MARKET
		GREENLAND)	COMMUNICATIONS WORK	11,078.	11,078. WIRE TRANSFER	0	N/A	VALUE
		EUROPE (INCLUDING						
		ICELAND &	CULTIVATED MEAT	1		,	,	FAIR MARKET
		GREENLAND)	LIFECYCLE ANALYSIS	13,065.	13,065.WIRE TRANSFER	0.0	N/A	VALUE
			MULTIOMIC					
			~					
		NORTH AMERICA	FISH STEM CELL	;		,		FAIR MARKET
		(NON US)	CULTURE MEDIA	50,500.	WIRE TRANSFER	0	N/A	VALUE
		OMEGII IOME / EGOGIIE						
		FOICE LINCTOLING						
		ICELAND &		0			,	FAIK MAKKET
		GREENLAND)	FULLCY WORK	44,390.	22,390. WIRE TRANSFER	0	N/A	VALUE

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

Schedule F (Form 990) 2021

Enter total number of other organizations or entities

က

Q

Page 2		(i) Method of valuation (book, FMV, appraisal, other)			FAIR MARKET	VALUE			FAIR MARKET	VALUE	FAIR MARKET	VALUE			FAIR MARKET	VALUE			FAIR MARKET	VALUE			FAIR MARKET	VALUE			FAIR MARKET	VALUE			FAIR MARKET	VALUE			FAIR MARKET	VALUE
	1)	(h) Description of non-cash assistance				N/A				N/A		N/A				N/A				N/A				N/A				N/A				N/A				N/A
81-0840578	Part II, line	(g) Amount of non-cash assistance				0				0		0.				0				0				0.				0.				0				0
81-08	(Schedule F (Form 990),	(f) Manner of cash disbursement				WIRE TRANSFER				WIRE TRANSFER		985, WIRE TRANSFER				WIRE TRANSFER				177,000. WIRE TRANSFER				,850. WIRE TRANSFER				WIRE TRANSFER				WIRE TRANSFER				WIRE TRANSFER
	Jnited States.	(e) Amount of cash grant				250,000.				51,800.		61,985.				200,000.				177,000.				57,850.				152,738.				248,415.				97,000.
INSTITUTE, INC	tions or Entities Outside the United States	(d) Purpose of grant	UNDERSTANDING AND	CONTROLING THE	TEXTURE OF	FILAMENTOUS FUNGI TO	TESTING EFFICIENT	METHODS FOR ENHANCED	STABILITY, SUSTAINED	RELEASE AND EASE OF	SEAFOOD SPECIES	CHARACTERIZATION	SCALABLE PROCESSES	FOR OBTAINING 3D	STRUCTURED WHOLE-CUTS	OF FISH	WHOLE CUT CHICKEN	ANALOGS FROM MASSIVE	DYNAMIC COCOON-LIKE	BACTERIAL CELLULOSE	BIOMIMIC OF FISH	FILLETS USING FUNGAL	PROTEINS BY ENZYMATIC	TREATMENT OR WITH	ELECTROSPINNING OF	PLANT PROTEINS TO	PRODUCE 3D MEAT	ANALOGUES	PRODUCE WHOLE CUTS OF	CHICKEN MEAT WITH THE	TASTE EXPERIENCE	THROUGH COMBINATION	DERIVATION OF	EMBRYONIC SOMATIC	CELLS AND	TRANSGENE-FREE IPSCS
GOOD FOOD INST	Continuation of Grants and Other Assistance to Organizations	(c) Region		EUROPE (INCLUDING	ICELAND &	GREENLAND)			EAST ASIA AND THE	PACIFIC		SOUTH AMERICA				SOUTH AMERICA				SOUTH AMERICA				SOUTH AMERICA				SOUTH AMERICA				SOUTH AMERICA				SOUTH AMERICA
THE	Grants and Other	(b) IRS code section and EIN (if applicable)																																		
Schedule F (Form 990)	Part II Continuation of	1 (a) Name of organization																																		

Fart II Continuation o	of Grants and Other ≠	Continuation of Grants and Other Assistance to Organizations or	itions or Entities Outside the United States,		(Schedule F (Form 990), Part II, line 1)	90), Part II, line 1	<u>-</u>	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region			(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)
			I III I					
		MIDDLE EAST AND NORTH AFRICA	STEAK, COST-EFFECTIVE EXTRACTION OF	250,000.	250,000. WIRE TRANSFER	0	N/A	FAIR MARKET VALUE
			DEVELOPMENT OF					
		THE TAST AND	INJECTION-MOLDED					наякын макен
		NORTH AFRICA		70,769.	WIRE TRANSFER	0	N/A	VALUE
			GOSWANI - IN VITRO					
			DIFFERENTIATION AND					
		SOUTH ASIA	CHARACTERIZATION OF FISH MUSCLE AND	000,06	90,000, WIRE TRANSFER	0	N/A	FAIR MARKET VALUE
		EUROPE (INCLUDING						HEWGEN CIKE
		ICELAND &	ALGAR 2 FISH	250 000	WIRE TRANSFER	0	K/N	FAIR MARREI VALIIE
			- 1	,				
			SORGHUM, PEARL MILLET					
			AND FINGER MILLET					FAIR MARKET
		SOUTH ASIA	TOWARDS PROMOTING	40,449.	40,449. WIRE TRANSFER	0	N/A	VALUE
			ENGINEERING					
			CONNECTIVE LAYER					
		EAST ASIA AND THE PACTETC	CONSTRUCTED BY PLANT PROTEIN FIBRILS FOR	000 050	AHARMARHER WAREE	C	4 / N	FAIR MARKET
			реопети вупраснтом					
		NORTH AMERICA	AND SCALE UP FROM					FAIR MARKET
		(NON US)	BROSIMUM ALICASTRUM	22,550.	550, WIRE TRANSFER	0	N/A	VALUE
			DEVELOPING A					
			FERMENTATION PROCESS					
		MIDDLE EAST AND	FOR RECOMBINANT					FAIR MARKET
		NORTH AFRICA	POTATO PATATIN	50,000.WIRE	WIRE TRANSFER	0.	N/A	VALUE
			ASSEMBLY AND					
		die Boed Biddin	MATURATION OF					HEWGARM OF AN
		MIDDLE EAST AND	SAELETAL MUSCLE					FAIR MARNET

Page 2	(i) Method of valuation (book, FMV, appraisal, other)	FAIR MARKET VALUE	FAIR MARKET VALUE	FAIR MARKET VALUE			
	(h) Description of non-cash assistance	N/A	N/A	N/A			
40578	(g) Amount of non-cash assistance	0	0	0			
81-0840578	(f) Manner of non-cash cash disbursement assistance	30,143. WIRE TRANSFER	WIRE TRANSFER	99,990. WIRE TRANSFER			
Inited Ototoo		30,143.	.095,66	.066,66			
INSTITUTE, INC	(d) Purpose of (e) Amount grant grant	GRANT FOR ISRAEL AFFILIATE TO FUND SCITECH GRANTS	UTILIZATION OF MICROALGAL FERMENTATION PRODUCT TO PRODUCE STRUCTURED	ENZYMATIC CONVERSION OF IOLS INTO FUNCTIONAL FATS USING GLYCEROLYSIS			
GOOD FOOD INST	of organization and EIN (if applicable) (c) Region and EIN (if applicable)	MIDDLE EAST AND V	EAST ASIA AND THE PACIFIC	NORTH AMERICA (NON US)			
THE G	(b) IRS code section and EIN (if applicable)						
Schedule F (Form 990)	ле						

INC THE GOOD FOOD INSTITUTE,

Schedule F (Form 990) 2021 THE GOOD FOOD INSTITUTE, INC 81-0840578

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.

Page 3

81-0840578

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2021
(g) Description of noncash assistance					Schedt
(f) Amount of noncash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
(b) Region					
(a) Type of grant or assistance					

Schedule F (Form 990) 2021 THE GOOD FOOD INSTITUTE, INC Part IV Foreign Forms

81-0840578

Page 4

	1 oreign rolling		
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	X 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		77
	U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X 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)	X 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	X 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	X 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	X No
		Schedule F (Fori	m 990) 2021

132074 12-20-21

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

SUSTAINABLE, REALTHY, AND JUST FOOD SYSTEM

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: SCALABLE PRODUCTION OF

PRECISION-ENGINEERED ALTERNATIVE PROTEIN WITH MEAT-LIKE APPEARANCE AND

TEXTURE; CHICKEN AND SHEEP TAG PRODUCTION FROM FOOD WASTE STREAMS WITH

YEAST. TESTING EFFICIENT METHODS FOR ENHANCED STABILITY, SUSTAINED

RELEASE AND EASE OF DELIVERY OF GROWTH FACTORS IN THE MEDIUM: LIPID

COCHLEATE-BASED FORMULATION OF BASIC FIBROBLAST GROWTH FACTOR.

ENGINEERING CONNECTIVE LAYER CONSTRUCTED BY PLANT PROTEIN FIBRILS FOR

CREATING WHOLE-CUT MEAT SUBSTITUTES. UTILIZATION OF MICROALGAL

FERMENTATION PRODUCT TO PRODUCE STRUCTURED PLANT-BASED FAT FOR MEAT

ANALOGUE.

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: SEAFOOD SPECIES

CHARACTERIZATION. SCALABLE PROCESSES FOR OBTAINING 3D STRUCTURED

WHOLE-CUTS OF FISH. WHOLE CUT CHICKEN ANALOGS FROM MASSIVE DYNAMIC

COCOON-LIKE BACTERIAL CELLULOSE TISSUE-ENGINEERING CONSTRUCTS. BIOMIMIC

OF FISH FILLETS USING FUNGAL PROTEINS BY ENZYMATIC TREATMENT OR WITH

EXOPOLYSACCHARIDES PRODUCED BY LACTOBACILLUS SPP.. ELECTROSPINNING OF

PLANT PROTEINS TO PRODUCE 3D MEAT ANALOGUES. PRODUCE WHOLE CUTS OF

CHICKEN MEAT WITH THE TASTE EXPERIENCE THROUGH COMBINATION OF CULTIVATED

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.

MEAT AND PLANT-BASED TECHNIQUES. DERIVATION OF EMBRYONIC SOMATIC CELLS AND TRANSGENE-FREE IPSCS FROM TWO IMPORTANT NEOTROPICAL FISH SPECIES.

REGION: SOUTH ASIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: GOSWANI - IN VITRO DIFFERENTIATION AND CHARACTERIZATION OF FISH MUSCLE AND OPTIMIZATION ON PLANT-BASED SCAFFOLDING TOWARDS WHOLE CUT SEAFOOD PRODUCTION. SELECT VARIETIES OF SORGHUM, PEARL MILLET AND FINGER MILLET TOWARDS PROMOTING NUTRITIONALLY SUPERIOR, SENSORY ACCEPTABLE AND COST EFFECTIVE INDIAN FLATBREAD BISCUITS.

REGION: MIDDLE EAST & NORTH AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: STUDY THE GENETIC BASIS OF PROLIFERATION IN CULTURED MEAT. DEVELOPMENT OF INJECTION-MOLDED STEAK. COST-EFFECTIVE EXTRACTION OF HIGH-QUALITY RUBISCO PROTEIN FROM A GREEN WASTE OF COMMON CROPS. DEVELOPING A FERMENTATION PROCESS FOR RECOMBINANT POTATO PATATIN. ASSEMBLY AND MATURATION OF SKELETAL MUSCLE ORGANOID BUILDING BLOCKS INTO THICK WHOLE-CUT. GRANT FOR ISRAEL AFFILIATE TO FUND SCITECH GRANTS.

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: UNCOVERING THE SECRETOME OF EVOLVING PRIMARY MUSCLE CELLS FOR IN VITRO MEAT PRODUCTION. POLICY AND COMMUNICATIONS WORK. UNIVERSITY OF NOVI SAD ALT PROTEIN CLUB SUPPORT. CULTIVATED MEAT LIFECYCLE ANALYSIS. UNDERSTANDING AND CONTROLLING THE TEXTURE OF FILAMENTOUS FUNGI TO PATH THE WAY FOR MYCELIUM-BASED MEAT AND SEAFOOD ALTERNATIVES. ALGAE 2 FISH. UNIVERSITY OF LEUVEN ALT PROTEIN CLUB 132075 12-20-21

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.

SUPPORT.

REGION: NORTH AMERICA (NON US)

(E) SPECIFIC TYPES OF SERVICES IN REGION: MULTIOMIC CHARACTERIZATION OF

FISH STEM CELL CULTURE MEDIA. PROTEIN EXTRACTION AND SCALE UP FROM

BROSIMUM ALICASTRUM. ENZYMATIC CONVERSION OF OILS INTO FUNCTIONAL FATS

USING GLYCEROLYSIS.

PART II, COLUMN (D):

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: SCALABLE PRODUCTION OF PRECISION-ENGINEERED

ALTERNATIVE PROTEIN WITH MEAT-LIKE APPEARANCE AND TEXTURE; CHICKEN AND

SHEEP TAG PRODUCTION FROM FOOD WASTE STREAMS WITH YEAST

REGION: EUROPE (INCLUDING ICELAND & GREENLAND)

(D) PURPOSE OF GRANT: UNCOVERING THE SECRETOME OF EVOLVING PRIMARY

MUSCLE CELLS FOR IN VITRO MEAT PRODUCTION

REGION: EUROPE (INCLUDING ICELAND & GREENLAND)

(D) PURPOSE OF GRANT: UNDERSTANDING AND CONTROLING THE TEXTURE OF

FILAMENTOUS FUNGI TO PATH THE WAY FOR MYCELIUM-BASED MEAT AND SEAFOOD

ALTERNATIVES

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: TESTING EFFICIENT METHODS FOR ENHANCED STABILITY,
SUSTAINED RELEASE AND EASE OF DELIVERY OF GROWTH FACTORS IN THE MEDIUM:

LIPID COCHLEATE-BASED FORMULATION OF BASIC FIBROBLAST GROWTH FACTOR

132075 12-20-21

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: SOUTH AMERICA

(D) PURPOSE OF GRANT: WHOLE CUT CHICKEN ANALOGS FROM MASSIVE DYNAMIC

COCOON-LIKE BACTERIAL CELLULOSE TISSUE-ENGINEERING CONSTRUCTS

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: BIOMIMIC OF FISH FILLETS USING FUNGAL PROTEINS BY
ENZYMATIC TREATMENT OR WITH EXOPOLYSACCHARIDES PRODUCED BY LACTOBACILLUS

SPP.

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: PRODUCE WHOLE CUTS OF CHICKEN MEAT WITH THE TASTE

EXPERIENCE THROUGH COMBINATION OF CULTIVATED MEAT AND PLANT-BASED

TECHNIQUES

REGION: SOUTH AMERICA

(D) PURPOSE OF GRANT: DERIVATION OF EMBRYONIC SOMATIC CELLS AND

TRANSGENE-FREE IPSCS FROM TWO IMPORTANT NEOTROPICAL FISH SPECIES

REGION: MIDDLE EAST AND NORTH AFRICA

(D) PURPOSE OF GRANT: DEVELOPMENT OF INJECTION-MOLDED STEAK.

COST-EFFECTIVE EXTRACTION OF HIGH-QUALITY RUBISCO PROTEIN FROM A GREEN

WASTE OF COMMON CROPS

REGION: MIDDLE EAST AND NORTH AFRICA

(D) PURPOSE OF GRANT: DEVELOPMENT OF INJECTION-MOLDED STEAK.

COST-EFFECTIVE EXTRACTION OF HIGH-QUALITY RUBISCO PROTEIN FROM A GREEN

132075 12-20-21

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.

WASTE OF COMMON CROPS

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: GOSWANI - IN VITRO DIFFERENTIATION AND

CHARACTERIZATION OF FISH MUSCLE AND OPTIMIZATION ON PLANT-BASED

SCAFFOLDING TOWARDS WHOLE CUT SEAFOOD PRODUCTION

REGION: SOUTH ASIA

(D) PURPOSE OF GRANT: SELECT VARIETIES OF SORGHUM, PEARL MILLET AND

FINGER MILLET TOWARDS PROMOTING NUTRITIONALLY SUPERIOR, SENSORY

ACCEPTABLE AND COST EFFECTIVE INDIAN FLATBREAD BISCUITS

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: ENGINEERING CONNECTIVE LAYER CONSTRUCTED BY PLANT

PROTEIN FIBRILS FOR CREATING WHOLE-CUT MEAT SUBSTITUTES

REGION: MIDDLE EAST AND NORTH AFRICA

(D) PURPOSE OF GRANT: ASSEMBLY AND MATURATION OF SKELETAL MUSCLE

ORGANOID BUILDING BLOCKS INTO THICK WHOLE-CUT

REGION: EAST ASIA AND THE PACIFIC

(D) PURPOSE OF GRANT: UTILIZATION OF MICROALGAL FERMENTATION PRODUCT TO

PRODUCE STRUCTURED PLANT-BASED FAT FOR MEAT ANALOGUE

PART II, LINE 1 (ACCOUNTING METHOD):

THE ORGANIZATION USES THE ACCRUAL METHOD OF ACCOUNTING TO ACCOUNT FOR

CASH GRANTS.

132075 12-20-21

Schedule F (Form 990) 2021 THE GOOD FOOD INSTITUTE, INC	81-0840578	Page 5
Part V Supplemental Information		, age e
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (account	ting method: amounts of	
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method)		
(estimated number of recipients), as applicable. Also complete this part to provide any additional information of the complete this part to provide any additional information.		
(estimated number of recipients), as applicable. Also complete this part to provide any additional information	nation. See instructions.	

DocuSign Envelope ID: 44738FA1-24F1-4C7E-83E6-A2F901D5C927

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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

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

Open to Public OMB No. 1545-0047 Inspection

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

≗ Employer identification number 81-0840578 X Yes 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 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. INC THE GOOD FOOD INSTITUTE, General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Part Part II

1 (a) Name and address of organization or government	(a)	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
							REDUCING THE
UNIVERSITY OF MASSACHUSETTS							ENVIRONMENTAL IMPACT OF
100 VENTURE WAY, ST. 201							PB MEAT EXTRUSION
HADLEY, MA 01035-9450	04-3167352		248,726.	0.	0.N/A	N/A	PROCESSES BY
							SPIN PLANT-BASED PROTEIN
UNIVERSITY OF MASSACHUSETTS AT							FORMULATION FOLLOWED BY
LOWELL - 600 SUFFOLK STREET, SUITE							TISSUE ASSEMBLY
212 - LOWELL, MA 01854	04-3167352		249,688.	0.	N/A	N/A	STRATEGIES
							IMPROVING PLANT PROTEIN
CORNELL UNIVERSITY							FUNCTIONALITY BY
616 THURSTON AVENUE							GERMINATION AND
ITHACA, NY 14853	15-0532082		50,000.	0.	N/A	N/A	ULTRAFILTRATION: A CASE
UC REGENTS - UC DAVIS							PRODUCTION OF ANIMAL FAT
1850 RESEARCH PARK DRIVE							SUBSTITUTES BY OLEAGINOUS
DAVIS, CA 95618	94-6036494		85,000.	0.	0.N/A	N/A	YEASTS
							PRODUCTION OF OMEGA-3
UNIVERSITY OF MASSACHUSETTS							ENRICHED PLANT-BASED
100 VENTURE WAY, ST. 201							ADIPOSE TISSUE USING
HADLEY, MA 01035-9450	04-3167352		98,563.	0	N/A	N/A	ADVANCED EMULSION
							COMPUTATIONAL MODELING OF
BROWN UNIVERSITY							FLUID DYNAMICS AND
69 BROWN STREET, BOX 1822							TRANSPORT PROCESSES IN
PROVIDENCE, RI 02912	05-0258809		50,000.	0.	N/A	N/A	WAVE BIOREACTORS
2 Enter total number of section 501(c)(3) and government organizations lis	d government orga	anizations listed in the	ted in the line 1 table				▶ 16.
3 Enter total number of other organizations listed in the line 1 table	listed in the line 1	table					2.

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

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

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(a) Name and address of contract (b) EN (c) IFO section (d) Amount of cash grant assistance organization or government (d) EN (e) IFO section (d) Amount of cash grant assistance organization or government (a) Mathebod organization org	Schedule I (Form 990) THE GOOD F	FOOD INST.	INSTITUTE, INC	and Domestic Go		(Schodula I (Form 990) Pa	8	81-0840578 Page 1
ANCELES, CA 90124 WISSENMODD BLVD. ANCELES, CA 90124 FOR BLOMEDICAL M. LARE SHORE SHIPE M. LARE SHORE BLILLS ANO. IL SGILL M. LARE SHORE M. LARE	(a) Name and address of organization or government	(d)	(c) IRC section if applicable	(d) Amount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HRESTERN UNIVERSITY N. LAKE SHORE DRIVE, FLOOR 7 N. LAKE SHORE SHORE 7 N. LAKE SHORE THE SHORE 7 N. LAKE SHORE 7 N.	TERASAKI INSTITUTE FOR BIOMEDICAL INNOVATION - 1018 WESTWOOD BLVD -			c c			;	
REDERVES, INC. RECENTS RD #113-238 84-4059430 DIEGO, CA 92122 84-4059430 250,000. 0 N/A N/A N/A N/A N/A N/A N/A N/A	CA 50024 UNIVERSITY SHORE DRIVE, FLOOR 60611	36-2167817		250,000.	o o	N/A N/A	N/A	AND DIFFERENTIATION OF LOW COST CHEMICALLY DEFINED, GWO-FREE ANIMAL IPSC GENERATION, CULTURE AND SKELETAL MUSCLE
NEST, INC. NA GA 30602 NS, GA 30602 NS, GA 30602 NA M/A GH UNIVERSITY BRODHEAD AVENUE, 23B LEHEM, PA 18015 SYLVANIA STATE UNIVERSITY TECHNOLOGY CENTER BUILDING ERSITY OF CONNECTICUT HEALTH ER - 263 FARMINGTON AVENUE - INGTON, CT 06030-5335 NIVA NUS OF THE UNIVERSITY OF SOLUTION AVENUE - SOLUTION AVEN	DEFINED BIOSCIENCE, INC. 7770 REGENTS RD #113-238 SAN DIEGO, CA 92122	84-4059430		250,000.		N/A	N/A	MULTIPLE MEDIA FORMULATIONS FOR CELL IDENTITY WITH APPLICABILITY ACROSS
GH UNIVERSITY BRODHEAD AVENUE, 23B BRODHEAD AVENUE, 23B SYLVANIA STATE UNIVERSITY TECHNOLOGY CENTER BUILDING ERSITY OF CONNECTICUT HEALTH ER - 263 FARMINGTON AVENUE - INGTON, CT 06030-5335 NUTS OF THE UNIVERSITY OF FORMIA, LOS ANGELES - 111 KKIN STREET, STH FLOOR - AND, CA 94607-5200 BESSITY OF CALIFORNIA, IRVINE ERSITY OF CALIFORNIA, IRVINE ERSTRANCE ERSTRAN	CYTONEST, INC. 111 RIVERBEND ROAD STE 270 ATHENS, GA 30602	85-1998996		200,000.		N/A	N/A	DEVELOP TAILORED, EDIBLE, AND SCALABLE 3D FIBER SCAFFOLDS FOR SHRIMP CELL EXPANSION - PMT 1
SYLVANIA STATE UNIVERSITY TECHNOLOGY CENTER BUILDING ERSITY PARK, PA 16802 24-6000376 249,976. 0, N/A N/A N/A N/A N/A N/A N/A N/A	VERSITY AD AVENUE, PA 18015	24-0795445				N/A	N/A	DIVERSIFYING CULTIVATED MEATS THROUGH CONVERGENCE OF CELL SCAFFOLD DESIGN, SENSING, AND SCALABILITY
ERSITY OF CONNECTICUT HEALTH ER - 263 FARMINGTON AVENUE - INGTON, CT 06030-5335	PENNSYLVANIA STATE UNIVERSITY 110 TECHNOLOGY CENTER BUILDING UNIVERSITY PARK, PA 16802	24-6000376		249,976.		N/A	N/A	
NTS OF THE UNIVERSITY OF FORNIA, LOS ANGELES - 1111 KLIN STREET, 8TH FLOOR - AND, CA 94607-5200 0. N/A N/A AND, CA 94607-5200 0. N/A N/A BESITY OF CALIFORNIA, IRVINE ALDRICH HALL ALDRICH HALL	UNIVERSITY OF CONNECTICUT HEALTH CENTER - 263 FARMINGTON AVENUE - FARMINGTON, CT 06030-5335	52-1725543				N/A	N/A	HIGH THROUGHPUT PRODUCTION OF HIGHLY-ORGANIZED THICK MEAT CONSTRUCTS THROUGH
ERSITY OF CALIFORNIA, IRVINE ALDRICH HALL ALDRICH TALL ALDRICH TALL	전 - 60	95-6006143		.000,000		N/A	N/A	DYNAMIC ORGANOLEPTIC SCAFFOLDS
, CA 3203/-7000 54-300/700 53-337. U.N.A N/A	ERSITY OF CALIFORNIA, ALDRICH HALL NE, CA 92697-7600	94-3067788		95,397.	0.	N/A	N/A	A PLATFORM FOR THE GENERATION OF IMMORTALIZED MYOBLASTS

Page 1		ŧ	CELL					orm 990)
81-0840578		(h) Purpose of grant or assistance	ADVANCING CULTIVATED SEAFOOD DEVELOPMENT: CELL CHARACTERIZATION, MYOGENESIS AND CELL					Schedule I (Form 990)
	irt II.)	(g) Description of non-cash assistance	N/A					
	edule I (Form 990), Pa	(f) Method of valuation (book, FMV, appraisal, other)	N/A					
	vernments (Sch	(e) Amount of noncash assistance	0					
s and Domestic Gov	and Domestic Go	(d) Amount of cash grant	.000,000					
TUTE, INC	nestic Organizations	(c) IRC section if applicable						
FOOD INSTI	Assistance to Don	(a)	59-0756643					
Schedule I (Form 990) THE GOOD FOOD INSTITUTE,	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	MOTE MARINE LABORATORY, INC. 1600 KEN THOMPSN PARKWAY SARASOTA, FL 34232					

Page 2

81-0840578

LNC

THE GOOD FOOD INSTITUTE,

Schedule I (Form 990) 2021

Part III

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) BE OF F Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. **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. H ΟĽ THE COMPLETION BUDGET PROPOSAL AND ONCE AN AGREED UPON BUDGET FUNDS THE GRANTEE SUBMITS A FINAL REPORT THAT CONTAINS NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF MASSACHUSETTS (d) Amount of non-cash assistance OF. SENDS THE GRANTEE A LETTER STATING THE AMOUNT ΑT THE USE OF THE FUNDS. (c) Amount of cash grant (b) Number of recipients DISBURSED AND A DESCRIPTION OF LINE 1, COLUMN (H): THE USE OF FUNDS. (a) Type of grant or assistance ď SUBMITS THE AWARD PERIOD, EACH GRANTEE GFI LINE SUMMARY OF PART II, REACHED, PART I, Part IV

81-0840578 Page 2 THE GOOD FOOD INSTITUTE, INC Schedule I (Form 990) Part IV | Supplemental Information (H) PURPOSE OF GRANT OR ASSISTANCE: REDUCING THE ENVIRONMENTAL IMPACT OF PB MEAT EXTRUSION PROCESSES BY SELF-AGGREGATING PROTEINS NAME OF ORGANIZATION OR GOVERNMENT: CORNELL UNIVERSITY (H) PURPOSE OF GRANT OR ASSISTANCE: IMPROVING PLANT PROTEIN FUNCTIONALITY BY GERMINATION AND ULTRAFILTRATION: A CASE STUDY ON HEMP SEED PROTEIN NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF MASSACHUSETTS (H) PURPOSE OF GRANT OR ASSISTANCE: PRODUCTION OF OMEGA-3 ENRICHED PLANT-BASED ADIPOSE TISSUE USING ADVANCED EMULSION TECHNOLOGY NAME OF ORGANIZATION OR GOVERNMENT: TERASAKI INSTITUTE FOR BIOMEDICAL INNOVATION (H) PURPOSE OF GRANT OR ASSISTANCE: MICROGROOVED ZEIN MACRO-WHISKERS FOR LARGE-SCALE PROLIFERATION AND DIFFERENTIATION OF LAMB MUSCLE CELLS NAME OF ORGANIZATION OR GOVERNMENT: NORTHWESTERN UNIVERSITY (H) PURPOSE OF GRANT OR ASSISTANCE: LOW COST CHEMICALLY DEFINED, GMO-FREE ANIMAL IPSC GENERATION, CULTURE AND SKELETAL MUSCLE DIFFERENTIATION NAME OF ORGANIZATION OR GOVERNMENT: DEFINED BIOSCIENCE, INC. (H) PURPOSE OF GRANT OR ASSISTANCE: MULTIPLE MEDIA FORMULATIONS FOR CELL IDENTITY WITH APPLICABILITY ACROSS SEAFOOD CULTURE SPACE NAME OF ORGANIZATION OR GOVERNMENT: PENNSYLVANIA STATE UNIVERSITY (H) PURPOSE OF GRANT OR ASSISTANCE: INTEGRATED SOLUTION FOR Schedule I (Form 990)

Schedule I (Form 990) THE GOOD FOOD INSTITUTE, INC Part IV Supplemental Information	81-0840578 Page 2
Part IV Supplemental information	
BIOMANUFACTURING LARGE-VOLUME CELL-CULTURED MEAT - INSTALLMEN	т 2
NAME OF ORGANIZATION OR GOVERNMENT:	
UNIVERSITY OF CONNECTICUT HEALTH CENTER	
(H) PURPOSE OF GRANT OR ASSISTANCE: HIGH THROUGHPUT PRODUCTIO	N OF
HIGHLY-ORGANIZED THICK MEAT CONSTRUCTS THROUGH MULTICOMPARTME	NTAL
BIOPRINTING	
NAME OF ODGANIZATION OF COVERNMENT, MORE MADINE LARORATION I	N.C.
NAME OF ORGANIZATION OR GOVERNMENT: MOTE MARINE LABORATORY, I	
(H) PURPOSE OF GRANT OR ASSISTANCE: ADVANCING CULTIVATED SEAF	OOD
DEVELOPMENT: CELL CHARACTERIZATION, MYOGENESIS AND CELL EXPAN	SION

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization THE COOD FOOD INCULTIVE TNIC Employer identification number 81-08/0578

	THE GOOD FOO.	D TNOT	TIOIE, IN	<u> </u>	1 91-0	040	3/0	
Par	t 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 de noncash contribu	etermin		3
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	Х	15	1,323,880.	MARKET VALU	E		
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 (VIRTUAL CURRE)	X	2	10,030.	MARKET VALU	Έ		
26	Other							
27	Other							
28	Other ()							
29	Number of Forms 8283 received by the organiz	zation during	the tax year for co	ontributions				
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date	of the initia	l contribution, and	which isn't required to be us	sed for			
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	equires the review of	of any nonstandard contribut	ions?	31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to so l ic	cit, process, or sell noncash			i T	
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	o l umn (c) foi	r a type of property	for which column (a) is chec	ked,			
	describe in Part II.							
–		_	_	·			_	· ·

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

Schedule M	(Form 990) 2021	THE	GOOD	FOOD	INS	STITUTE	Ξ,	INC			8	31-	-0840578	Page 2
Part II	Supplemental is reporting in Part this part for any ac	Inform	nation. nn (b), the	Provide the	ne infoi of contr	rmation required	uired e num	by Part I, nber of ite	, lines 30k ems recei	o, 32b, and ved, or a c	d 33, and combinat	l wh	nether the organ of both. A l so co	zation mplete

Schedule M (Form 990) 2021

132142 11-17-21

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or Form 990-EZ.

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

2021
Open to Public Inspection

OMB No. 1545-0047

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 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

COMMERCIALIZATION OF ALTERNATIVE PROTEINS.

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

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 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

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

Schedule O (Form 990) 2021 Page **2**

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

INITIATIVE ADVANCES THE MISSION OF HEALTHY, SUSTAINABLE, AND JUST

SEAFOOD FOR A GROWING POPULATION.

EXPENSES \$ 1,225,050. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

INTERNATIONAL - GFI'S INTERNATIONAL PROGRAM IS COMPRISED OF THE WORK OF

ITS FOREIGN AFFILIATES AND US MANAGEMENT TEAM. THE FOREIGN AFFILIATES

SHARE THE SAME MISSION AS GFI IN THE US. 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. (THE EXPENSES ARE

AFTER FUNCTIONAL ALLOCATION.)

EXPENSES \$ 636,034. INCLUDING GRANTS OF \$ 0. 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, OPERATIONS, DIRECTOR OF FINANCE AND OPERATIONS,

AND SENIOR FINANCE MANAGER AS WELL AS OTHER KEY PERSONNEL. 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.

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,

Schedule O (Form 990) 2021 Page 2

Name of the organization THE GOOD FOOD INSTITUTE, INC

Employer identification number 81-0840578

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 GENERAL COUNSEL AND VICE PRESIDENT,

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 CHIEF EXECUTIVE OFFICER AND OTHER SENIOR
LEADERSHIP. THE COMMITTEE EVALUATES THE REASONABLENESS OF COMPENSATION AS
IT COMPARES TO REMUNERATION FOR SIMILARLY QUALIFIED INDIVDUALS 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 2022.

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

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.

Schedule O (Form 990) 2021 Name of the organization	Page 2 Employer identification number
THE GOOD FOOD INSTITUTE, INC	81-0840578
FORM 990, PAGE 7, PART VII, SECTION A	
STEWART DAVID (BOARD MEMBER) AND SARAH DAVID (GENERAL COUN	SEL AND VICE
PRESIDENT, OPERATIONS) ARE NOT RELATED.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING/CONTRACTUAL:	
PROGRAM SERVICE EXPENSES	1,249,051.
MANAGEMENT AND GENERAL EXPENSES	389,425.
FUNDRAISING EXPENSES	249,446.
TOTAL EXPENSES	1,887,922.
GRAPHIC & WEB DESIGN VIDEO PRODUCTION AND WRITING/EDITING:	
PROGRAM SERVICE EXPENSES	71,858.
MANAGEMENT AND GENERAL EXPENSES	22,404.
FUNDRAISING EXPENSES	14,351.
TOTAL EXPENSES	108,613.
	_
MARKET RESEARCH:	_
PROGRAM SERVICE EXPENSES	94,643.
MANAGEMENT AND GENERAL EXPENSES	29,508.
FUNDRAISING EXPENSES	18,901.
TOTAL EXPENSES	143,052.
	_
SOFTWARE AS SERVICE AND OTHER:	
PROGRAM SERVICE EXPENSES	270,318.
MANAGEMENT AND GENERAL EXPENSES	84,279.
FUNDRAISING EXPENSES	53,985.
TOTAL EXPENSES	408,582.
132212 11-11-21	Schedule O (Form 990) 2021

Schedule O (Form 990) 2021	Page 2
Name of the organization THE GOOD FOOD INSTITUTE, INC	Employer identification number 81-0840578
INTERNATIONAL CONTRACTORS:	
PROGRAM SERVICE EXPENSES	88,616.
MANAGEMENT AND GENERAL EXPENSES	27,628.
FUNDRAISING EXPENSES	17,696.
TOTAL EXPENSES	133,940.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	2,682,109.
FORM 990, PART XII, LINE 2C:	
THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	

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SCHEDULE R (Form 990)

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. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

Open to Public Inspection 2021

OMB No. 1545-0047

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

Employer identification number 81-0840578

> THE GOOD FOOD INSTITUTE, INC Name of the organization

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

(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
THE GOOD FOOD INSTITUTE ASIA PACIFIC					
ROOM 503-9, YU TO SAN BLDG 37 QUEEN'S ROAD C					THE GOOD FOOD
HONG KONG, HONG KONG	FOOD INNOVATION	HONG KONG	911,813.	312,804.	312,804. INSTITUTE, INC.
ASSOCIACAO THE GOOD FOOD INST DO BRASIL					
AVENIDA PAULISTA 807 23 ANDAR CONJUNTO 2315					THE GOOD FOOD
SAU PAULO, BRAZIL	FOOD INNOVATION	BRAZIL	949,346.	659,781.	659,781. INSTITUTE, INC.
THE GOOD FOOD INSTITUTE EUROPE ASBL					
DREVE DU PRESSOIR 38 1190					THE GOOD FOOD
FOREST, BELGIUM	FOOD INNOVATION	BELGIUM	1,355,802.	309,801.	309,801. INSTITUTE, INC.
ALTERNATIVE PROTEIN SOLUTIONS PRIVATE					
LIMITED, 505, FLOOR 5TH, 123, OM CHAMBERS,					THE GOOD FOOD
AUGUST KRANTI MARG, KEMPS CORNER, MUMBAI,	FOOD INNOVATION	INDIA	673,597.	201,509.	201,509. INSTITUTE, INC.
Identification of Related Tax-Exempt Organizations Complete	tions Complete if the organization and	if the organization answered "Ves" on Form 990. Part IV. line 34. herause it had one or more related tax-exemnt	+ IV line 34 hecause	it had one or more	related tax-exempt

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. Part II

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) THE GOOD FOOD INSTITUTE,	INSTITUTE, INC				81-0840578
Part I Continuation of Identification of Disregarded Entities	ntities				
(a) Name, address, and EIN 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
THE GOOD FOOD INSTITUTE ISRAEL HATOR 12 RAANANA ISRAEL 4372530 RAANANA, ISRAEL	FOOD INNOVATION	ISRAEL	958,328.	356,890	THE GOOD FOOD 356,890. INSTITUTE, INC.
THE GOOD PROTEIN NETWORK LIMITED 6 RAFFLES QUAY, #11-07 SINGAPORE, SINGAPORE	FOOD INNOVATION	SINGAPORE	323,887.	234,403.	THE GOOD FOOD INSTITUTE, INC.

THE GOOD FOOD

Schedule R (Form 990) 2021

Page 2 81-0840578 INC INSTITUTE,

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.

(K)	General or Percentage managing ownership partner? Yes No									
_	ow Ow									_
9	General or managing partner? Yes No					H				\dashv
(E)	Code V-UBI amount in box m 20 of Schedule E K-1 (Form 1065)									
(h)	Disproportionate allocations?									
(6)	Share of end-of-year assets									
(£)	Share of total income									
(e)	Predominant income (related, unrelated, excluded from tax under sections 512-514)									
(b)	Direct controlling entity									
(၁)	Legal domicile (state or foreign country)									
(q)	Primary activity									
(a)	Name, address, and EIN of related organization									

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.

,
Primary activity
(many)

81-0840578

Page 3

Schedule R (Form 990) 2021 THE GOOD FOOD INSTITUTE, INC

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.					Yes No
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?	s with one or more re	ated organizations listed i	n Parts II-IV?		\blacksquare
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	,			1a	×
b Gift, grant, or capital contribution to related organization(s)				9	×
c Gift, grant, or capital contribution from related organization(s)				9	×
d Loans or loan quarantees to or for related organization(s)				19	×
Loans or loan quarantees by related organization(s)				1e	×
f Dividends from related organization(s)				#	×
				10	×
Purchase of assets from related organization(s)				÷	×
				÷	×
				÷	×
				-	
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×
	nization(s)			=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			<u>=</u>	×
	on(s)			£	×
Sharing of paid employees with related organization(s)				£	×
				2	
p Reimbursement paid to related organization(s) for expenses				9	×
				10	×
r Other transfer of cash or property to related organization(s)				+	×
(s)				18	×
2 If the answer to any of the above is "Yes," see the instructions for information on w	ho must complete th	s line, including covered r	ormation 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	volved	
(1)					
(2)					
(3)					
(4)					
(5)					
(9)					
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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(k) centage nership				
Perc				
(j) General or managing partner?				Į.
Gen Dar				L .
(h)				:
(h) Disproportionate allocations?				
(g) Share of end-of-year assets				
(f) Share of total income				
(e) Are all Are all 501(c)(3) 0195.? Yes No				
(d) Predominant income (related, unrelated, excluded from tax unc sections 512-514)				
(c) Legal domicile (state or foreign country)				
(b) Primary activity				
(a) Name, address, and EIN of entity				

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Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.
PART I, IDENTIFICATION OF DISREGARDED ENTITIES:
TAKI I, IDENTIFICATION OF DIDKEGARDED 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