Form **990**

(Rev. January 2020)

Return of Organization Exempt From Income Tax

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

201

OMB No. 1545-0047

Open to Public Inspection

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 the	2019 calen	dar year, or tax year begin	nıng	, 2019, a	and ending			,			
В	Check if ap	oplicable:	С				D	Employer iden	tification number			
	X Addre	ss change	FOOD LITERACY CE	NTER				45-3973	3268			
		change	170 SANDBURG DRI				E	Telephone num				
		return	SACRAMENTO, CA 9					916-476	5-4766			
		eturn/terminated						J10 470	7 4700			
								Gross receipts	¢ 674 444			
	—	nded return	F Name and address of universal	-#		l.	I(a) Is this a gro					
	Applic	cation pending		SARAH MODE	ESTE		.,	•				
_			SAME AS C ABOVE	\	10474 3443	1 1507	I(b) Are all subo	ch a list. (see ir	nstructions)			
<u> </u>		mpt status:	X 501(c)(3) 501(c) () ◀ (insert no.)	4947(a)(1) or	527						
J	Websi	ite: ► WW	W.FOODLITERACYCEN			ŀ	I(c) Group exem	ption number	<u> </u>			
K		organization:	X Corporation Trust	Association Other ►	LY	ear of formation	n: 2012	M State of	legal domicile: CA			
Pa		Summar										
	1 <u>B</u> r	riefly descri	be the organization's missi	on or most significant	activities:OUR	<u>MISSIO</u>	N IS TO	<u>INSPIRE</u>	KIDS TO EAT			
ě	<u>T</u>		GETABLES. WE TEAC									
Activities & Governance	<u>N</u>	NUTRITION, GARDENING, AND ACTIVE PLAY TO IMPROVE OUR HEALTH, ENVIRONMENT, AND										
ern	<u>E</u>	CONOMY.		· -,,, ·								
Š	2 Ch		ox ► if the organization						ssets.			
~જ	3 Nu 4 Nu		oting members of the gover dependent voting members						-			
es	5 To		of individuals employed in						14			
₹	6 To		of volunteers (estimate if						150			
Ç	7a To		ed business revenue from F						0.			
			business taxable income						0.			
				<u> </u>			Prior		Current Year			
_	8 Co	ontributions	and grants (Part VIII, line	1h)			6	09,663.	597,912.			
πe	9 Pr	ogram serv	rice revenue (Part VIII, line	2g)				10,222.	5,038.			
Revenue	10 In	vestment ir	ncome (Part VIII, column (A	A), lines 3, 4, and 7d).				109.	172.			
æ	11 Of	ther revenu	e (Part VIII, column (A), lir	nes 5, 6d, 8c, 9c, 10c, a	and 11e)			-3,096.	63,119.			
	12 To	otal revenue	e – add lines 8 through 11	(must equal Part VIII,	column (A), lin	ie 12)	6	16,898.	666,241.			
	13 Gr	rants and s	imilar amounts paid (Part I	X, column (A), lines 1-	3)							
	14 Be	enefits paid	to or for members (Part I)	(, column (A), line 4).								
	15 Sa	alaries, othe	er compensation, employee	5-10)	5	31,484.	337,742.					
ses	16a Pr	ofessional	fundraising fees (Part IX, c		,	,						
Expenses	h To		sing expenses (Part IX, col	7,139.								
Ä	17 0		es (Part IX, column (A), lir				1	1 4 170	140 256			
		•	es. Add lines 13-17 (must e	•				14,172.	142,356.			
		•	,	•				45,656.	480,098.			
. 0		evenue less	expenses. Subtract line 1	8 from line 12				28,758.	186,143.			
s or nces	20 Т	tal acceta	(Part X, line 16)				3 3	Current Year	End of Year			
sset 3ala	20 To		s (Part X, line 26)					51,118.	644,199.			
Net Assets Fund Balanc	21 10							29,122.	36,060.			
ŽŽ	22 No		fund balances. Subtract li	ne 21 from line 20			4	21,996.	608,139.			
Pa	rt II	Signatur	e Block									
Unde	er penalties	of perjury, I de	eclare that I have examined this retuirer (other than officer) is based on a	rn, including accompanying sc	hedules and statem	ents, and to th	e best of my kno	owledge and bel	lief, it is true, correct, and			
-	5.010. 500.0	I.	nor (carer anarr emeer) to bacca on t	an intermediate of milest proper	5ac any	90.						
٠.		Signatu	re of officer				Date					
Siç	jn											
He	re		ER K. STOTT				CEO					
			print name and title	In		D 1	1		DTIN			
		Print/Type p	reparer's name	Preparer's signature		Date	Che	ck if	PTIN			
Pa		JAMES H	. FRITZSCHE, CPA				self-	-employed	P00423351			
Pre	eparer	Firm's name										
Us	e Only	Firm's addre	ess 1511 CORPORATE W	Firm	Firm's EIN ► 320343346							
			SACRAMENTO, CA 9	95831-3890			Pho	ne no. 916-	422-2111			
May	the IRS	discuss th	is return with the preparer		structions)				. X Yes No			

 4e Total program service expenses
 ▶ 388,047.

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 Form 990 (2019)

) (Revenue \$

including grants of

4d Other program services (Describe on Schedule O.)

(Expenses

Form 990 (2019) FOOD LITERACY CENTER 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	Х	
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? <i>If 'Yes,' complete Schedule C, Part l</i>	3		Х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
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		Х
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		Х
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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Χ	
ł	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.	11 b		Χ
(c Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
C	I Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		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	11 f	Х	
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
ŀ	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
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
ŀ	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		Х
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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
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 domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х

Form 990 (2019) FOOD LITERACY CENTER Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? 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? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d 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 transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>	25b		Х
26	former officer, director, trusteé, key employee, créator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	26		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
i	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		X
	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 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	X	Λ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31		31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
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		Х
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
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		103	
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
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Form 990 (2019) FOOD LITERACY CENTER Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 a	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 14			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
k	1 If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
k	olf 'Yes,' enter the name of the foreign country►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			**
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	a 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?	7 a		Х
Ł	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			3.7
	Form 8282?	7с		Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year			V
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e 7 f		X
	a If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	/1		Λ
	as required?	7 g		
r	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
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		
	Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:	7.0		
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	of If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	10		
a	a 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.			
	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			
	Enter the amount of reserves on hand	14a		X
	a bid the organization receive any payments for indoor taining services during the tax year?	14a		77
		140		
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
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
10	If 'Yes,' complete Form 4720, Schedule O.	10		71

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a 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..... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?.... Χ 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 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? X a The organization's CEO, Executive Director, or top management official. SEE . SCHEDULE. . O. 15 a **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16 a X **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed \rightarrow CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records BOOKKEEPER 170 SANDBURG DRIVE SACRAMENTO CA 95819 916-476-4766

45-3973268

Page **7**

Form 990 (2019)

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

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

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

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

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

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Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.											
	(C)									_	
(A) Name and title		is	both	n an c	ot che unles officer /truste	,		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other	
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations	
(1) AMBER K. STOTT	40										
CEO	0			Χ				86,500.	0.	6,984.	
(2) STACEY KAUFFMAN	3										
BOARD CHAIR	0	Χ		Χ				0.	0.	0.	
(3) NICOLE ROGERS	2										
SERETARY	0	Χ		Χ				0.	0.	0.	
(4) ELISE BAUER	2										
TREASURER	0	Χ		Χ				0.	0.	0.	
(5) ERIK JOHNSON	1										
DIRECTOR	0	X						0.	0.	0.	
(6) LIZA_KIRKLAND	1										
DIRECTOR	0	X						0.	0.	0.	
_(7)_ERIN_ALDERSON	1										
DIRECTOR	0	Χ						0.	0.	0.	
(8) SARAH MODESTE	1	.,							0		
DIRECTOR	0	X						0.	0.	0.	
_(9)											
(10)											
<u>(11)</u>											
<u>(12)</u>											
<u>(13)</u>											
<u>(14)</u>											

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
	(B)			(0							
(A) Name and title	Average hours per week	box	, unle cer ar	theck ess pe nd a d	erson direct	than is both or/trus	n an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other	
	(list any hours for related organiza - tions below dotted line)	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	relatéd organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(15)											
(16)											
(17)											
<u>(18)</u>											
<u>(19)</u>											
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
1 b Subtotal							>	86,500.	0.	6,984.	
c Total from continuation sheets to Part VII, Section							>	0.	0.	0.	
d Total (add lines 1b and 1c).							<u> </u>	86,500.	0.	6,984.	
2 Total number of individuals (including but not limited from the organization ► 0	to those I	isted	abov	ve) v	who	recei	ved	more than \$100,00	of reportable comp		
Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for successions.										Yes No	
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportab r than \$1	le co 50,0	mpe 30?	nsa If 'Y	ition /es,	and com	oth iple:	er compensation te Schedule J for	from		
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? <i>If 'Yes</i>	e comper	nsatio	n fr	om :	anv	unre	late	d organization or	individual		
Section B. Independent Contractors									#100.000		
1 Complete this table for your five highest compensation from the organization. Report compen	sated indi sation for	epen the c	dent alen	cor dar <u>y</u>	ntrad year	ctors endii	tha ng w	t received more th vith or within the or	nan \$100,000 of ganization's tax year		
(A) Name and business addi	(A) Name and business address Descripti									(C) Compensation	
2 Total number of independent contractors (including b	out not lim	ited to	o the	se I	isted	d abo	ve) v	who received more	than		
\$100,000 of compensation from the organization	► 0										

		Check if Schedule O contains a response or note to ar	ny line in this Part V	TIL		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns				
ontri Id O	3	lines 1a-1f				
<u>ဗ</u>	h	Total. Add lines 1a-1f	597,912.			
anus	2.	Business Code	4 020	4.020		
Program Service Revenue	2 a b	PROGRAM FEES 900099 PRESENTATIONS 519100	4,038. 1,000.	4,038. 1,000.		
ce F	C		1,000.	1,000.		
ervi	d					
mS	е					
ogra	f	All other program service revenue				
Pro	g	Total. Add lines 2a-2f ▶	5,038.			
	3	Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds	172.			172.
	5	Royalties				
		(i) Real (ii) Personal				
	6 a	Gross rents 6a	-			
	b	Less: rental expenses 6b				
		Rental income or (loss) 6c				
	d	Net rental income or (loss)	•			
	7 a	Gross amount from (i) Securities (ii) Other				
		sales of assets other than inventory 7a				
	b	Less: cost or other basis and sales expenses 7b				
	c	Gain or (loss) 7c	-			
		Net gain or (loss)				
Other Revenue	8 a	Gross income from fundraising events (not including \$ 71,500. of contributions reported on line 1c).				
Re		See Part IV, line 18				
er	b	Less: direct expenses 8b 8,203.	+			
중	С	Net income or (loss) from fundraising events ▶	6,125.			6,125.
	9 a	Gross income from gaming activities. See Part IV, line 19				
		Less: direct expenses 9b				
	С	Net income or (loss) from gaming activities ▶	•			
		Gross sales of inventory, less returns and allowances	-			
		Less: cost of goods sold 10b Net income or (loss) from sales of inventory				
10	C	Business Code				
) 한	11 a		56,994.			56,994.
Miscellaneous Revenue	b		30,334.			55,554.
	С					
SC R	-	All other revenue				
Σ		Total. Add lines 11a-11d	56,994.			
	12	Total revenue. See instructions	666,241.	5,038.	0.	63,291.

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).

Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			3	·
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	93,484.	65,439.	9,348.	18,697.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	204,582.	188,761.	10,473.	5,348.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)		200,702	20, 27.00	0,0101
9	Other employee benefits	16,518.	15,790.	595.	133.
10	Payroll taxes	23,158.	19,835.	1,521.	1,802.
11	Fees for services (nonemployees):				
á	Management				
ŀ) Legal				
(Accounting	17,593.		17,593.	
(d Lobbying				
•	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)	9,524.	5,804.	227.	3,493.
13	Office expenses	2,978.	2,570.	173.	235.
14	Information technology		=/0.01		
15	Royalties				
16	Occupancy	20,077.	17,318.	1,263.	1,496.
17	Travel	3,159.	3,138.		21.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	.,	2, 22		•
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,755.	3,713.	559.	483.
23	Insurance	2,591.	2,219.	170.	202.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	IN-KIND EXPENSE	25,291.	18,988.	2,195.	4,108.
ŀ	PROGRAM EXPENSES	23,642.	23,642.		
	SOFTWARE AND WEBSITE	10,176.	6,789.	336.	3,051.
(PRINTING AND PUBLICATIONS	6,025.	3,043.	39.	2,943.
•	All other expenses	16,545.	10,998.	420.	5,127.
25	Total functional expenses. Add lines 1 through 24e	480,098.	388,047.	44,912.	47,139.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

		Check if Schedule O contains a response or note to	any iine	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			182,319.	1	295,965.
	2	Savings and temporary cash investments			175,475.	2	251,746.
	3	Pledges and grants receivable, net				3	80,723.
	4	Accounts receivable, net			71,909.	4	·
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	l contribu	tor. or 35%		5	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net		7			
Ø	8	Inventories for sale or use		<u> </u>		8	
set	9	Prepaid expenses and deferred charges	3,650.	9	4,710.		
Assets				3,630.	9	4,710.	
3		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		29,089.			
	b	Less: accumulated depreciation		20,234.	13,610.	10 c	8,855.
	11	Investments — publicly traded securities		-		11	
	12	Investments – other securities. See Part IV, line 11		-		12	
	13	Investments – program-related. See Part IV, line 11.		-		13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		-	4,155.	15	2,200.
	16	Total assets. Add lines 1 through 15 (must equal line	451,118.	16	644,199.		
	17	Accounts payable and accrued expenses			28,709.	17	36,060.
	18	Grants payable				18 19	
	19	Deferred revenue		l-			
'n	20	Tax-exempt bond liabilities		<u> </u>		20	
ţį	21	Escrow or custodial account liability. Complete Part I		<u></u>		21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per	ncer, aire utor, or 3 rsons	5% 		22	
_	23	Secured mortgages and notes payable to unrelated th				23	
	24	Unsecured notes and loans payable to unrelated third	parties.			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to rela	ted third parties, 't X of Schedule D.	413.	25	
	26	Total liabilities. Add lines 17 through 25			29,122.	26	36,060.
es		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	, ►	X	<u> </u>		·
ă	27	Net assets without donor restrictions			270 (20	27	444 005
33	27	Net assets with donor restrictions		<u> </u>	378,639.	27	444,895.
핕	28				43,357.	28	163,244.
Net Assets or Fund Balanc		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck nere				
ō	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equipment of the surplus of the	nent fund			30	
155	31	Retained earnings, endowment, accumulated income,	, or other	funds		31	
) t /	32	Total net assets or fund balances		L	421,996.	32	608,139.
ž	33	Total liabilities and net assets/fund balances			451,118.	33	644,199.

Pa	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)	1		666	,24	1.			
2	Total expenses (must equal Part IX, column (A), line 25)	2			,09				
3	Revenue less expenses. Subtract line 2 from line 1	3			,14				
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))								
5	5 Net unrealized gains (losses) on investments. 5								
6	6 Donated services and use of facilities								
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									
	column (B))	10		608	,13	<u>9.</u>			
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII								
				Ye	es N	lo_			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
If the organization changed its method of accounting from a prior year or checked 'Other,' explain									
	in Schedule O.								
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2	2 a 2	X				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed	ed on a	a						
	separate basis, consolidated basis, or both:								
	X Separate basis Consolidated basis Both consolidated and separate basis								
	b Were the organization's financial statements audited by an independent accountant?		2	2 b		<u>X</u>			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	ite							
	Separate basis Consolidated basis Both consolidated and separate basis								
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?								
	If the organization changed either its oversight process or selection process during the tax year, explain								
2	on Schedule O. 3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single								
3	Audit Act and OMB Circular A-133?			3 a		Χ			
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit								
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3 b					
2 A /	Λ TEEA0112L 01/21/20			rm Q) () ()	1101			

Form **990** (2019)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

lame of t	he organization					Employer ident	ification number				
FOOD	LITERACY CENTER		45-3973	268							
Part I	Reason for Public Cha	arity Status (All or	rganizations must o	comple	te this	part.) See instr	uctions.				
he org	panization is not a private found		_			•					
1	A church, convention of church	nes, or association of cl	hurches described in sect	tion 170(b)(1)(A)(i).					
2	A school described in section	170(b)(1)(A)(ii). (Attach	Schedule E (Form 990 or	990-EZ).)						
3	A hospital or a cooperative h	nospital service organ	ization described in sec	tion 17	0(b)(1)(A	۸)(iii).					
4	A medical research organiza	ation operated in conju	unction with a hospital of	describe	d in sec	tion 170(b)(1)(A)(iii)	. Enter the hospital	's			
L	name, city, and state:	·	·				·				
5	An organization operated for section 170(b)(1)(A)(iv). (Co	r the benefit of a colle	ege or university owned	or oper	ated by	a governmental unit	described in				
6	A federal, state, or local gov		ental unit described in s	ection 1	70(b)(1))(A)(v).					
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) . (Complete Part II.)										
8	A community trust described	l in section 170(b)(1)(A)(vi). (Complete Part I	l.)							
9	An agricultural research organi			-	oniunctio	on with a land-grant c	ollege				
L	or university or a non-land-gra										
	university:										
10	An organization that normally from activities related to its investment income and unre June 30, 1975. See section	exempt functions—sub lated business taxabl	oject to certain exception e income (less section	ns, and	(2) no i	more than 33-1/3%	of its support from	gross after			
11	An organization organized a	nd operated exclusive	ely to test for public safe	ety. See	section	n 509(a)(4).					
12	An organization organized a	nd operated exclusive	ely for the benefit of, to	perform	the fun	ctions of, or to carry	out the purposes	of one			
L	or more publicly supported of	organizations describe	ed in section 509(a)(1) c	r sectio	n 509(a)(2). See section 50	9(a)(3). Check the b	ox in			
а	Type I. A supporting organizati										
a L	organization(s) the power to re complete Part IV, Sections A	egularly appoint or elect	t a majority of the directo	rs or trus	stees of t	the supporting organiz	ration. You must				
b	Type II. A supporting organiz management of the supporting must complete Part IV, Sect	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), the supported organi	oy having control or zation(s). You	r			
С	Type III functionally integrated organization(s) (see instruction	. A supporting organizations). You must com	tion operated in connection plete Part IV, Sections	n with, a	nd functio	onally integrated with,	its supported				
d	Type III non-functionally integ	rated. A supporting org	janization operated in cor must satisfy a distribu	nection	with its s	supported organization	n(s) that is not	е			
e	instructions). You must com Check this box if the organiz	ation received a writt	en determination from	the IRS	that it is	a Type I, Type II, T	ype III functionally				
f F	integrated, or Type III non-fu Enter the number of supported										
	Provide the following information	•									
	Name of supported organization	(ii) EIN	(iii) Type of organization	(iv)	s the	(v) Amount of monetar	y (vi) Amount of	other			
(7)		(.,, =	(described on lines 1-10 above (see instructions))	organizat	ion listed overning nent?	support (see instruction	. ,				
				Yes	No						
A)											
В)											
C)											
D)											
E)											
[otal											

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.)

Sec	tion A. Public Support										
begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')										
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf										
3	The value of services or facilities furnished by a governmental unit to the organization without charge										
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)										
6	Public support. Subtract line 5 from line 4										
Sec	tion B. Total Support										
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total				
7	Amounts from line 4										
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources										
9	Net income from unrelated business activities, whether or not the business is regularly carried on										
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).										
	Total support. Add lines 7 through 10										
12	Gross receipts from related activ	rities, etc. (see in:	structions)			12	_				
	First five years. If the Form 990 is organization, check this box and	stop here		nird, fourth, or fifth t	tax year as a section	on 501(c)(3)	>				
Sec	tion C. Computation of Pul Public support percentage for 20	blic Support P	ercentage	44 1 (0)							
	Public support percentage for 20 Public support percentage from 3						<u>%</u> %				
	33-1/3% support test—2019. If t and stop here. The organization	he organization d	id not check the b	oox on line 13, an	d line 14 is 33-1/3	3% or more, chec	k this box				
b	33-1/3% support test—2018. If the and stop here. The organization	e organization die	d not check a box	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more,	check this box				
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	e. Explain in Par	t VI how				
	b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization										
ıg	rivate ioundation. If the organi	Zaliori did not che	eck a box on line	13, 10a, 10b, 1/a	, or 17b, check th	is box and see in	SUUCUONS				

BAA

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support									
Calend	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
ı	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	313,679.	557,361.	757,367.	585,456.	597,912.	2,811,775.		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.	23,839.	11,949.	3,110.	25,964.	5,038.	69,900.		
3	Gross receipts from activities that are not an unrelated trade or business under section 513.	23,037.	11,545.	3,110.	23, 304.	14,328.	14,328.		
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					14,320.	0.		
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.		
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	337,518.	569,310.	760,477.	611,420.	617,278.	2,896,003.		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.	0.	0.	0.	0.	0.	0.		
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.		
	Public support. (Subtract line 7c from line 6.)	0.	0.	0.	0.	0.	2,896,003.		
Sec	tion B. Total Support						2,030,003.		
Calen	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
	Amounts from line 6	337,518.	569,310.	760,477.	611,420.	617,278.	2,896,003.		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	,	·	,	,	,			
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.	70.	22.	22.	109.	172.	395.		
	Add lines 10a and 10b	70.	22.	22.	109.	172.	395.		
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.		
	Total support. (Add lines 9, 10c, 11, and 12.)	337,588.	569,332.	760,499.	611,529.	617,450.	2,896,398.		
	First five years. If the Form 990 organization, check this box and	stop here	· · · · · · · · · · · · · · · · · · ·						
	tion C. Computation of Pul								
	Public support percentage for 20	•	•			<u> </u>	99.99 %		
	Public support percentage from 2						99.99 %		
	tion D. Computation of Inv				(0)	T 1	0		
	Investment income percentage for	•		-			0.01 %		
	Investment income percentage fr					<u> </u>	0.01 %		
	33-1/3% support tests—2019. If t is not more than 33-1/3%, check 33.1/3% support tests— 2018 . If t	this box and stop	here. The organi	zation qualifies a	s a publicly suppo	orted organization	ı ► <u>X</u>		
	33-1/3% support tests—2018. If t line 18 is not more than 33-1/3%	, check this box a	nd stop here. The	e organization qua	alifies as a publicl	y supported orgai	nization ►		
20	Private foundation. If the organiz	cation did not ched	ck a box on line 1	4, 19a, or 19b, cl	neck this box and	see instructions.	····· - L		

Page 4

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	11 3 3		V	NI.
			Yes	No
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.	1		
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).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b)	_		
	and (c) below.	3a		
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.	3b		
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.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
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.	4b		
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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
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?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5 c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9с		
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 10b below.	10-		
		10a		
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.)	10b		

	edule A (Form 990 or 990-EZ) 2019 FOOD LITERACY CENTER 45-39732	68	F	age 5
Pai	rt IV Supporting Organizations (continued)		Vac	No
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
á	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
ŀ	b A family member of a person described in (a) above?	11b		
(A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported examinations have the newer to regularly appoint		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations		ı	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
<u> </u>	in this regard.	3		
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
ä	The organization satisfied the Activities Test. Complete line 2 below.			
ŀ	The organization is the parent of each of its supported organizations. Complete line 3 below.			
(The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instruc	tions)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
ć	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted			
	substantially all of its activities.	2a		
ŀ	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
ŀ	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If 'Yes,' describe in Part VI the role played by the organization in this regard.</i>	3b		

Pa	$\mathbf{r}(\mathbf{v} + \mathbf{r})$ type iii Non-Functionally integrated 509(3)(3) Supporting Orga	ınızat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain ir st complete Sections A	n Part VI). See through E.
Sec	(B) Current Year (optional)			
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
ā	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	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	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% 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 .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2019

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Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion D – Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2019 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

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Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019

FOOD LITERACY CENTER

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection
Employer identification number

	FOOD LITERACY CENTER			45-3	3973268	
Par	FI Organizations Maintaining Donor Advis	ed Funds or Other	Similar Fur	nds or Account		
	Complete if the organization answered '	es' on Form 990, l	Part IV, line	6.		
		(a) Donor advised fur	nds	(b) Funds a	and other acco	ounts
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 advisorare the organization's property, subject to the organization	ors in writing that the astion's exclusive legal co	ssets held in do	onor advised funds	Yes	No
6	Did the organization inform all grantees, donors, and do for charitable purposes and not for the benefit of the do impermissible private benefit?	onor advisors in writing onor or donor advisor, o	that grant fund or for any other	ds can be used only purpose conferring	/ Yes	No
Par	Conservation Easements. Complete if the organization answered	Yes' on Form 990	Part IV line	7		
1	Purpose(s) of conservation easements held by the organization			,		
•	Preservation of land for public use (for example, recrea	•		on of a historically	important lan	ıd area
	Protection of natural habitat	and it of daddation,		on of a certified his		
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qua	lified conservation contrib	oution in the forr	m of a conservation e	easement on th	he
	last day of the tax year.					
					the End of th	e Tax Year
	Total number of conservation easements					
	Total acreage restricted by conservation easements					
(Number of conservation easements on a certified histor	ric structure included in	(a)	2с		
(Number of conservation easements included in (c) acquistructure listed in the National Register	uired after 7/25/06, and	not on a histor	ric 2 d		
3	Number of conservation easements modified, transferred, re				ig the	
4	tax year •	account in Innated N				
4	Number of states where property subject to conservation ear Does the organization have a written policy regarding the		increation has	_ adling of violations		
5	and enforcement of the conservation easements it hold				Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting				s during the ye	ear
7	Amount of expenses incurred in monitoring, inspecting, har ▶\$	ndling of violations, and e	nforcing conserv	vation easements du	ring the year	
8	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?) above satisfy the requ	irements of se	ction 170(h)(4)(B)(i	Yes	No
9	In Part XIII, describe how the organization reports consinclude, if applicable, the text of the footnote to the org conservation easements.	ervation easements in anization's financial sta	its revenue and atements that d	d expense statement lescribes the organ	nt and balanc ization's acco	e sheet, and ounting for
Par					Assets.	_
1 a	If the organization elected, as permitted under FASB A historical treasures, or other similar assets held for pub Part XIII the text of the footnote to its financial stateme	dic exhibition, education	n, or research i	atement and balan n furtherance of pu	ce sheet work blic service, p	ks of art, provide in
ŀ	If the organization elected, as permitted under FASB A historical treasures, or other similar assets held for public e following amounts relating to these items:	xhibition, education, or re	esearch in furthe	erance of public serv	ice, provide the	f art, e
	(i) Revenue included on Form 990, Part VIII, line 1					
	(ii) Assets included in Form 990, Part X				► \$	
	If the organization received or held works of art, historical tramounts required to be reported under FASB ASC 958	relating to these items:	•			
	Revenue included on Form 990, Part VIII, line 1				►\$	
	Assets included in Form 990 Part X				≻ \$	

Part III Organizations Maintaining Coll	ections of Art, Histo	ricai i reasures, or	Otner Similar Ass	ets (continuea)					
3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):									
a Public exhibition	d Loan o	or exchange program							
b Scholarly research	e Other								
c Preservation for future generations									
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?									
line 9, or reported an amount or	nents. Complete if the Form 990, Part X,	he organization ans line 21.	swered 'Yes' on Fo	rm 990, Part IV,					
1 a Is the organization an agent, trustee, custodi on Form 990, Part X?	an or other intermediary	for contributions or othe	r assets not included	Yes No					
b If 'Yes,' explain the arrangement in Part XIII and complete the following table:									
				Amount					
c Beginning balance			1c						
d Additions during the year									
e Distributions during the year									
f Ending balance									
2 a Did the organization include an amount on Fo			-	Yes No					
b If 'Yes,' explain the arrangement in Part XIII.	Check here if the explan	ation has been provided	d on Part XIII						
Deat V Fordermond Founds Occupation 16	The constant of the second		000 Deat IV II	- 10					
Part V Endowment Funds. Complete if									
(a) Currer	t year (b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back					
1 a Beginning of year balance									
b Contributions									
c Net investment earnings, gains,									
and losses									
'									
e 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 balance (line	e 1g, column (a)) held a	as:						
a Board designated or quasi-endowment ▶	%								
) 6								
c Term endowment ► %									
The percentages on lines 2a, 2b, and 2c should	equal 100%.								
3a Are there endowment funds not in the possessio	n of the organization that a	re held and administered	for the						
organization by:				Yes No					
(i) Unrelated organizations				3a(i)					
(ii) Related organizations				3a(ii)					
b If 'Yes' on line 3a(ii), are the related organization	·			. 3b					
4 Describe in Part XIII the intended uses of the		ent funds.							
Part VI Land, Buildings, and Equipmer Complete if the organization ans		n 990 Part IV lina	11a Soo Form 90	0 Part V lina 10					
		· · · · · · · · · · · · · · · · · · ·							
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value					
1 a Land		. ,		_					
b Buildings									
c Leasehold improvements									
d Equipment		24,066.	16,861.	7,205.					
e Other		5,023.	3,373.	1,650.					
Total. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part X, c			8,855.					
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Part VII		Other Securities.		N/A	
		•		, Part IV, line 11b. See Form 9	
(a) Desci	ription of security or cate	gory (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financ	ial derivatives				
	held equity interes	ts			
(3) Other					
(A)					
(B)					
(C)					
(D) (E)					
(<u>E)</u>					
(F)					
$\frac{(G)}{(H)}$					
(l)					
		90, Part X, column (B) line 12.) •		27 / 2	
Part VIII	Investments – Complete if the	Program Related. organization answered	'Yes' on Form 990	N/A), Part IV, line 11c. See Form 9	990 Part X line 13
	(a) Description of		(b) Book value	(c) Method of valuation: Cost or end	
(1)				•	
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Colun		90, Part X, column (B) line 13.) 🕨			
Part IX	Other Assets.	o organization answered	N/A), Part IV, line 11d. See Form 9	000 Dort V line 15
-	Complete ii the		scription	o, Fart IV, line Tru. See Forms	(b) Book value
(1)		(a) DC.	зеприоп		(b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8) (9)					
(10)					
	lumn (h) must egua	l Form 990. Part X. column (F	3) line 15)		•
Part X	Other Liabilitie		<i>y mie 10.y.</i>		
I alt A	Complete if the org	ganization answered 'Yes' on F	orm 990, Part IV, line 1	le or 11f. See Form 990, Part X, line 25).
1.			ption of liability	, ,	(b) Book value
	ral income taxes				
(2)					
(3)					
(4)					
(5) (6)					
(7)					
(8)					
(9)					
(10)					
(11)					
		90, Part X, column (B) line 25.)			·
				nancial statements that reports the organization's	
	under FACD ACC 740 Ch	eck here if the text of the footnote has	boon provided in Part VIII	12	EE PART XIII X

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	Ctaiiii 11/ 11
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d.	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	1
1 Total expenses and losses per audited financial statements	
 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 	
1 Total expenses and losses per audited financial statements	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a b Prior year adjustments 2b	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. 2 b	
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1 2 e
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities.	1 2 e
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 2 e
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) c Add lines 4a and 4b	2e 3
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 b Other (Describe in Part XIII.)	2e 3

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

PART X - FASB ASC 740 FOOTNOTE

WE HAVE EVALUATED THE TAX POSITIONS AND RELATED INCOME TAX CONTINGENCIES AND DO NOT BELIEVE THAT ANY MATERIAL UNCERTAIN TAX POSITIONS EXIST THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

BAA Schedule D (Form 990) 2019

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

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2019

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FOOD LITERACY CENTER						45-397326		
Fundraising Activities. Comple	te if the organiza	ation answe	ered 'Yes'	on Form 990, Part IV, line	e 17.		<u>-</u>	_
1 Indicate whether the organization a Mail solicitations	<u> </u>							
b Internet and email solicitations	5		f	Solicitation of gove	ernment	grants		
c Phone solicitations			g	Special fundraising	g events			
d In-person solicitations								
 2 a Did the organization have a written of employees listed in Form 990, Particle bill If 'Yes,' list the 10 highest paid incompensated at least \$5,000 by the 	t VII) or entity i dividuals or enti	in connéct ties (fund	tion with p	rofessional fundraising	service	s?		О
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did have custo of contr	fundraiser dy or control ributions?	(iv) Gross receipts from activity	(or fundr	nount paid to retained by) aiser listed in olumn (i)	(vi) Amount paid to (or retained by) organization)
		Yes	No					
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
Fotal			▶				().
3 List all states in which the organization or licensing.				contributions or has been	notified	it is exempt from		<u>-</u> - -
								_

Page 2

Par		Fundraising Events. Complete if the more than \$15,000 of fundraising List events with gross receipts great the state of th	the organization ar	nswered 'Yes' on Fo s and gross income	orm 990, Part IV, li on Form 990-EZ,	ne 18, or reported
R E		3 , 3	(a) Event #1 FOOD FILM FEST (event type)	(b) Event #2 OTHER EVENTS (event type)	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))
REVENUE	1	Gross receipts	42,487.	38,510.		80,997.
E	2	Less: Contributions	32,990.	38,510.		71,500.
	3	Gross income (line 1 minus line 2)	9,497.			9,497.
	4	Cash prizes				
	5	Noncash prizes				
D I R E C T	6	Rent/facility costs				
C T	7	Food and beverages				
E X P	8	Entertainment				
EXPENSES	9	Other direct expenses	8,203.			8,203.
S		Direct expense summary. Add lines 4 thr Net income summary. Subtract line 10 fro				
Par	t III	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered 'Yes			
REVENUE		\$13,000 OHT OHN 330 EZ, IIIIC Od.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
U E	1	Gross revenue				
F	2	Cash prizes				
D X I P R E	3	Noncash prizes				
D I RECT	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes 8	Yes %	Yes 8	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)		▶	
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	nn (d)		
а	Is th	er the state(s) in which the organization co be organization licensed to conduct gaming o,' explain:			······	Yes No
		e any of the organization's gaming license	s revoked, suspended,	or terminated during the	e tax year?	Yes No

Sch	edule G (Form 990 or 990-EZ) 2019 FOOD LITERACY CENTER	45-39732	68	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:	1 1		
	a The organization's facility	13a		%
	b An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	ds:		
	Name ►			
	Address ►			
	a Does the organization have a contract with a third party from whom the organization receives gaming reve b If 'Yes,' enter the amount of gaming revenue received by the organization► \$ and of gaming revenue retained by the third party► \$ c If 'Yes,' enter name and address of the third party:	enue?	Yes	No
	Name •			. – – – ,
	Address ►			i
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of services provided ►			
	□ Director/officer □ Employee □ Independent contractor			
17	Mandatory distributions:			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
	$\textbf{b} \ Enter \ the \ amount \ of \ distributions \ required \ under \ state \ law \ to \ be \ distributed \ to \ other \ exempt \ organizations \ or \ spent$	in the	_	_
	organization's own exempt activities during the tax year ► \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, c and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide a information. See instructions.	olumns (iii any additio	i) and (nal	v);

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service ► Go to www.irs

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
FOOD LITERACY CENTER
45-3973268
Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) od of detern contribution	
1	Art — Works of art						
2	Art — Historical treasures						
3	Art — Fractional interests.						
4	Books and publications.						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded						
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or trust interests .						
12	Securities - Miscellaneous						
13	Qualified conservation contribution – Historic structures						
14	Qualified conservation contribution — Other						
15	Real estate – Residential						
16	Real estate – Commercial						
17	Real estate – Other						_
18	Collectibles						
19	Food inventory	X	33	28,209.	FAIR '	VALUE	_
20	Drugs and medical supplies			,			_
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						_
25	Other ► (SPORTING EVENTS)	Х	2	2,175.	FACE '	VALUE	
26	Other ► ()			,			_
27	Other ► ()						_
28	Other ► ()						_
29	Number of Forms 8283 received by the organization d	uring the tax	year for contributions for	r which the			
	organization completed Form 8283, Part IV, Done				29		
						Yes	No
302	During the year, did the organization receive by contri	hution any ni	ronerty reported in Part I	lines 1 through 28 that			
Jua	it must hold for at least three years from the date	of the initial	contribution, and which	th isn't required to be u	sed		
	for exempt purposes for the entire holding period?					30 a	X
b	If 'Yes,' describe the arrangement in Part II.						
31	Does the organization have a gift acceptance police	cy that requi	res the review of any r	nonstandard contribution	ns?	31	X
32a	Does the organization hire or use third parties or r	elated orgai	nizations to solicit, prod	cess, or sell			
	noncash contributions?					32 a	X
b	If 'Yes,' describe in Part II.						
33	If the organization didn't report an amount in coludescribe in Part II.	mn (c) for a	type of property for wh	nich column (a) is chec	ked,		

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

Schedule M (Form 990) 2019

45-3973268

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

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

FOOD LITERACY CENTER 45-3973268

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

WHAT WE DO: WE TEACH BASIC COOKING SKILLS, NUTRITION, FRUIT AND VEGETABLE

APPRECIATION, AND WHERE FOOD COMES FROM. WE FEED, WE INTRODUCE HEALTHY SNACKS AND

INTRODUCE KIDS TO FRUITS AND VEGETABLES SO THEY'LL MAKE SMART CHOICES.

OUR APPROACH: WE BELIEVE GOOD FOOD SHOULD BE FUN! WE FOCUS ON THE POSITIVE SIDE OF FOOD, SHARING PRACTICAL, AFFORDABLE, AND APPROACHABLE WAYS TO EAT WELL. WE AIM TO ENGAGE RATHER THAN FRIGHTEN RESULTS. WE DON'T RELY ON ANECDOTES TO KNOW THAT OUR PROGRAMS ARE WORKING, WE TEST AND MEASURE OUR PROGRAMS. 92% OF KIDS SAY HEALTHY FOOD TASTES GOOD 75% SAY IT MTTERS WHERE THEIR FOOD COMES FROM. 70% ASK THEIR FAMILIES FOR THE FOODS THEY'VE TASTED IN CLASS, INCLUDING BROCCOLI AND ORANGES.

HOW YOU CAN HELP BE PART OF THE SOLUTION: CONTACT US TO MAKE A DONATION AND TO VOLUNTEER. AMBER STOTT, FOUNDING EXECUTIVE DIRECTOR, EMAIL AT AMBER@FOODLITERACYCENTER.ORG

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

990 IS EMAILED TO BOARD OF DIRECTORS FOR REVIEW AND APPROVAL PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY THE BOARD OF DIRECTORS

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

THE BOARD OF DIRECTORS USES COMPENSATION INFORMATION FROM NONPROFIT RESOURCE CENTER ON LOCAL NONPROFIT SALARIES AS WELL AS ONLINE RESOURCES TO DETERMINE COMPENSATION FOR EXECUTIVE DIRECTOR

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. OUR