Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2017

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Α	For	the 2	2017 calend	ar year, or t	tax year begini	ning				, 2017, and e	nding			, 20
В	Chec	ck if ap	plicable:	C Name of or	ganization Equi t	table	e Food I	nitiative						D Employer identification no.
	Addr	ess ch	ange	Doing busir	ness as									47-3123271
	Nam	e char	nge	Number and	d street (or P.O. box	if mail is	s not delivered t	o street address)			Room	n/suite		E Telephone number
	Initia	l returi	า	1875 (Connecticu	ıt Av	enue NW				10	Fl.	L	(202)730-6672
	Final	l returr	/terminated	City or towr	n, state or province,	country,	and ZIP or fore	ign postal code						G Gross receipts
	Amei	nded r	eturn	Washi	ngton, DC	2000	9							\$ 2,149,444
	Appli	ication	pending		address of principal			O'Driscol	1		H(a	a) Is this a group	return f	for subordinates? Yes No
				Same a	as C above	<u>:</u>					H(I	b) Are all subo	ordinate	es included? Yes No
	Tax-e	exemp	t status:	501(c)(3)			nsert no.)	4947(a)(1) or	☐ 52	27		If "No,"	attach	a list. (see instructions)
J		site:			olefood.or		, .				H(c	c) Group exe		
K			ganization: X			ciation	Other ►		L	Year of formation:	-			gal domicile: CA
	art I		Summar											
	-			•	nization's missi	on or n	nost significa	ant activities:	To i	mprove the	safe	tv. eth	ics	and quality of
			•	•			•			ers, busine		_		
Se			communit		Jen Proce	-	01 0110 2	0110110 01	WOZ 11.	JID, DUDING	ББСБ	, сольа		<u> </u>
Activities & Governance			COMMUNIC	100.										
ver		2	Chack this h	ov ▶ ☐ if th	he organization	discon	ntinued its or	nerations or disr	nnsed n	f more than 25%	of its n	net accets		
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													7a	
		D	ivet unrelate	a business t	axable income	IIOIII F	OIII 990-1,	iine 34	• • • •				7b	
		•	0 (-1) (1		(D = =() (III E = = =	41.3						Prior Year		Current Year
Revenue				•	,									1,933,205
			-									207	,50	214,360
														0
œ								oc, and 11e) .					65	
	_							I, column (A), lii				211	,15	2,149,444
							. ,	s 1-3)						0
								1)						0
Ś	1			•			•	column (A), line	,			1,030	,07	1,098,268
Expenses	1	16a	Professional	fundraising	fees (Part IX, c	olumn	(A), line 11e	e)						0
<u>e</u>		b	Total fundrai	ising expens	es (Part IX, col	umn (D	0), line 25)	-		75,674				
ũ	1	17	Other expen	ses (Part IX,	, column (A), lin	es 11a	ı-11d, 11f-24	le)				935	,00	685,863
	1							mn (A), line 25)				1,965		
		19	Revenue les	s expenses.	Subtract line 1	8 from	line 12 .					(1,753	,92	365,313
ō	sez										Beginn	ing of Curren	t Year	End of Year
sets				,	,							1,951	.,50	2,320,233
Net Assets or	2			•	•							136	,22	139,636
					ces. Subtract I	ine 21	from line 20) <u>.</u>				1,815	,28	2,180,597
	art l			re Block										
								ing schedules and st mation of which prep		and to the best of my nv knowledge.	knowled	ge and belief, i	t is	
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Sig			Signatur	e of officer									Dat	ie
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			Type or	print name and	title									
			Print/Type pre	eparer's name		Prepare	er's signature			Date		Check	if	PTIN
Pa			Tim Abe	rcrombie	e :	Tim 7	Abercrom	bie		08-15-2018		self-employ	ed	P01254858
	•	rer	Firm's name	>	Abercrom	bie a	and Asso	ciates LLC	3		Firm's	s EIN 🕨		
Us	e O	nly	Firm's addres	s ►	8609 Sec	ond A	Avenue 5	607В			Phone	e no.		
					Silver S	pring	g MD 209	10				3	01-	585-5050
Ma	/ the	IRS	discuss this	retum with t	he preparer sho	own ab	ove? (see i	nstructions) .						🛛 Yes 🗌 No

7) Equitable Food Initiative Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			3.7
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more	441		37
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			3.5
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	44.1		37
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445	3 7	
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	ıza	Λ	
D	"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
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	140		- 71
D	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			- 22
	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

7) Equitable Food Initiative Checklist of Required Schedules (continued) Part IV

20a bit the organization operate one or more hospital facilities? If "Yes." complete Schedule If 20b bit bit very time 20, did the organization attach and profit is sudded faminated statements to this neturn? 20b bit the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic operation and the complete schedule It and the complete schedule It and It 21 bit the organization report more than \$5,000 of grants or other assistance to or for domestic organization or domestic operation (A) into 21 If It (%2) complete Schedule It Parts It and III 22 If It (%2) bit the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 21 If It (%2) complete Schedule It Parts I and III 18 If It (%3) bit the organization have a transverse (%3) because It (%4) is a state of the organization have a transverse (%4) is a state of the organization have a transverse (%4) bit the organization have a transverse organization have that the parts (%4) bit the organization have that the granged in an excess benefit transaction with a disqualified person during the year? If Yes, complete Schedule It, Part II 25a X is the organization aware that it angaged in an excess benefit transaction with a disqualified person of the organizations. Did the organization provide a grant or other assistance to an officer director, trustee, key employee? If Yes, complete Schedule It, Part II 25b X is the organization aware that the angaged in an excess bene				Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic powerment on Part IX, column (A), line 21 if 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Χ
domestic government on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
22 March the organization report more than \$5,000 of grants or other assistance to not for domestic individuals on Part IX, column (A), the 22 if "Yes," complete Schedule I, Parts I and III 22 X 3 3 3 3 3 3 3 3 3	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX, column (A), the 27 H° Yes, "complete Schedule I, Parts I and III Did the organization answer Yes* to Part IVI, Scient A, Inc. 34, or 35 abud compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Jan 24 Did the organization tower size exempt bord 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 24 and complete Schedule K. If "No", go to line 258 Did the organization invest any proceeds of tax-exempt bords beyond a temporary period exception? 24a X Did the organization makes an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 25a Section 591(3), 501(2/4), and 501(2/3) organizations. Did the organization engage in an excess benefit transaction with a disqualified person did in the view of the organization engage in an excess benefit transaction with a disqualified person did in the view of the organization engage in an excess benefit transaction with a disqualified person did in a person during the year? If "vas," complete Schedule I, Part I 25b X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 980-E2? If "Yes," complete Schedule I, Part II 25b X Z Did the organization provide a grant or other assistance to an officer, director, trustee, key emptyee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part IV 27c X Did the organization provide a grant or other assistance to an officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV 28c A C Indian deprecation or officer, director, tru		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
23 Did the organization answer "Yes" to Part VII, Section A, Inie 3.4, or 5 about compensation of the organization's current and former officions, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
organization's current and former officers, directors, furstesses, key employees, and highest compensated employees; If "Yes," completes Schedule J. S. A. S. 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 fines 24b through 24d and complete Schedule K. If "No.", for to line 25d through 24d and complete Schedule K. If "No.", for to line 25d through 24d and complete Schedule K. If "No.", for to line 25d through 24d and complete Schedule K. If "No.", for to line 25d through 24d and complete Schedule K. If "No.", complete Schedule K. If "No." (24d 24d 24d 24d 24d 24d 24d 24d 24d 24d		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Χ
employees? If "Yes," complete Schedule J A Did the organization have as tax-exempt bords 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 258 Did the organization maintain an escrow account other than a refunding service was any time during the year to defease any trace-exempt profess beyond a temporary period exception? 24c Did the organization and as an "on behalf of" issuer for bords outstanding at any time during the year? 24d Did the organization act as an "on behalf of" issuer for bords outstanding at any time during the year? 24d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior yest, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I Yes," complete Schedule L, Part I 25b X Did the organization provide a grant or other assistance to an officer, director, fusites, key employee, or disqualified persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, fusites, key employee, substantial contributor or employee thereof, a grant selection committee emerker or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV 29 A nemity of which a current or former officer, director, fusites, or key employee? If "Yes," complete Schedule L, Part IV 29 A nemity of which a current or former officer, director, fusites, or key employee? If "Yes," complete Schedul	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
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or IV, and Part V, line 1	34				
Did the organization have a controlled entity within the meaning of section 512(b)(13)?			34		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35a				
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related organization? If "Yes," complete Schedule R, Part V, line 2	36				
 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			36		Х
and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R</i> , Part VI	37				
Part VI					
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			37		Х
	38				
			38	Х	

Part V

17) Equitable Food Initiative Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return		3.7	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	0-		37
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	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	40		v
L	account)?	4a		X
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
ъа b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		27
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
ou	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Ou		21
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	46		
а	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.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
C 140	Enter the amount of reserves on hand	14-		v
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u> b </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI

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

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 14			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	. 2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	. 6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	. 7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	. 7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	. 8a	X	
b	Each committee with authority to act on behalf of the governing body?	. 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	. 9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	. 10a		X
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	. 12c	X	
13	Did the organization have a written whistleblower policy?	. 13	X	
14	Did the organization have a written document retention and destruction policy?	. 14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	. 15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
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?	. 16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	. 16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed California, District of Columbia California, District of Columbia			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply.			
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			

Peter O'Driscoll (202)730-6672, 1875 Connecticut Avenue NW, Washington, DC 20009

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
- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title (B) Average hours per wook (star) per wook	Check this box if neither the organization nor any related	d organizatio	n comp	ensa	ated	any	curren	nt of	ficer, director, or tr	ustee.	
Control check more than one share one share one share one some than one share one sh											
Average Aver	40	(D)			Pos	sition			(5)	(E)	(E)
			,								
Week (list and part of related organizations below defined in no) Perish Nicholson South Perish Nicholson Nichols	Name and Title	_							•	· ·	
Comparizations Comp		week (list any	Onic	er ariu	i a uii	GGIGIA	ii usice)		•	related	other
Delow dotated the property Comparison		1	의 회	=	o	2	φд	7			•
(1) Erik Nicholson			divid	stitu	ffice	ey er	ghea	orme	•	(VV-2/1099-WIGC)	
(1) Erik Nicholson			ual t	lione	Ì	힣	st co yee	٦			
(1) Erik Nicholson		line)	ruste	trug		yee	mpe				organizations
Second Chair			ĕ	stee			nsat				
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Board Chair											
(2) Maisie Ganzler	(1) Erik Nicholson	5.00									
Vice Chair X X X 0 0 0 (3) Preston Witt 2.00 X X 0 0 0 Secretary X X 0 0 0 0 (4) Ernie Farley 2.00 X X 0 0 0 0 Treasurer X X 0 <td>Board Chair</td> <td></td> <td>X</td> <td></td> <td>X</td> <td></td> <td></td> <td></td> <td>O</td> <td>0</td> <td>0</td>	Board Chair		X		X				O	0	0
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Secretary			Х		Χ				0	0	0
(4) Ernie Farley 2.00 Treasurer X X 0 0 0 (5) Adrian Almeida 2.00 X 0 0 0 Director X 0 0 0 0 (6) Ramon Ramirez 2.00 X 0 0 0 Director X 0 0 0 0 (7) Carol Schrader 2.00 X 0 0 0 Director X 0 0 0 0 (8) Baldemar Velazquez 2.00 X 0 0 0 (9) Margaret Reeves 2.00 X 0 0 0 Director X 0 0 0 0 (10)Bruce Goldstein 2.00 X 0 0 0 Director X 0 0 0 0 (11)Thomas Gremillion 2.00 X 0 0 0 Director X 0 0 0 0 (12)Minor Sinclair 2.00 <t< td=""><td>(3) Preston Witt</td><td>2.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	(3) Preston Witt	2.00									
Treasurer	Secretary		Х		Χ				0	0	0
Samon Ramirez Samon Ramire	(4) Ernie Farley	2.00									
Director	Treasurer		Х		Χ				0	0	0
(6) Ramon Ramirez	(5) Adrian Almeida	2.00									
Director	Director		Х						0	0	0
The content of the	(6) Ramon Ramirez	2.00									
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Director	Director		Х						0	0	0
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Director X 0 0 0	(14)Michael Conroy	2.00									
			X						0	0	0

Form 990 (2017)

Part '	VII Section A. Officers, Directors, Trustees,	Key Emplo	yees,	and	Hig	hes	t Com	pen	sated Employees	(continued)			
	a .	(5)			(C Posit				(5)	(-)		(=)	
	(A) Name and title	(B) Average	١, ١		eck mo	ore tha	an one		(D) Reportable	(E) Reportable		(F)	
	rano ano allo	hours per					both an rustee)		compensation	compensation from		nount of	
		week (list any hours for	or c	nst	Officer	Key	Hig	For	from the	related organizations	con	other pensatio	on
		related	directo	titutio	icer	/ emp	hest i ploye	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		rom the	n
		organizations below dotted	Individual trustee or director	Institutional truste		Key employee	e		(** 2/1000 141100)		ar	d related	t
		line)	tee	ıstee			Highest compensated employee				org	anization	iS
							ed						
	er O'Driscoll	40.00											
_	ecutive Director				X				108,153	0		23,0	000
(10)													
(17)													
<u>(18)</u>													
(1 <u>a</u>)													
(20)													
<u>(21)</u>													
(22)													
(22)													
(23)													
(24)													
(25)													
<u></u>													
1b	Sub-total					'		•					
	Total from continuation sheets to Part VII, Sectio							· 1					
d 2	Total (add lines 1b and 1c)								108,153			23,0)00
2	reportable compensation from the organization	1 10 111056 1150	eu abc	ive)	WIIO	1606	eiveu i	11016	: than \$100,000 or	1			
										_		Yes	No
3	Did the organization list any former officer, director		-		-		-						
	employee on line 1a? If "Yes," complete Schedule										3		X
4	For any individual listed on line 1a, is the sum of reportant organization and related organizations greater than												
	individual										4		Х
5	Did any person listed on line 1a receive or accrue co												
	for services rendered to the organization? If "Yes,"	complete So	chedul	e J f	or su	ıch _l	persor	η.			5		X
	on B. Independent Contractors Complete this table for your five highest compensated	d :n don on dor	at aanti	t-	ara th			d	are then \$100,000	of.			
1	compensation from the organization. Report compensate												
	year.				,		9						
	(A)								(B)			(C)	
	Name and business address								Description of s	services	Com	ensation	1
2	Total number of independent contractors (including I				listed	d ab	ove) w	vho					
	received more than \$100,000 of compensation from	uie organiza	uUH	•									

Statement of Revenue

itiative 47-3123271

Check if Schedule O contains a response or note to any line in this Part VIII (A) (B) (C) (D) Total revenue Related or Unrelated Revenue exempt function excluded from tax business under sections 512-514 revenue Federated campaigns 1a Contributions, Gifts, Grants and Other Similar Amounts Membership dues 1b **c** Fundraising events 1c **d** Related organizations 1d e Government grants (contributions) . . 1e f All other contributions, gifts, grants, and similar amounts not included above 1,933,205 1f g Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f 1,933,205 **Business Code** Revenue 2a Program income- Grower 900099 214,360 214,360 b Program Service **f** All other program service revenue 214,360 Investment income (including dividends, interest, and other similar amounts) ▶ Income from investment of tax-exempt bond proceeds (i) Real 6a Gross rents **b** Less: rental expenses **c** Rental income or (loss) . . . (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory **b** Less: cost or other basis and sales expenses **c** Gain or (loss) 8a Gross income from fundraising Other Revenue events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a **b** Less: direct expenses b c Net income or (loss) from fundraising events ▶ 9a Gross income from gaming activities. **b** Less: direct expenses b c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances a ${f b}$ Less: cost of goods sold ${f b}$ c Net income or (loss) from sales of inventory . . . Miscellaneous Revenue **Business Code** 1,879 11a Miscellaneous Incom 900099 1,879 b 1,879 2,149,444 214,360 1,879

Part IX **Statement of Functional Expenses** Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b. 7b. Management and 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 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 Compensation of current officers, directors, 5<u>,</u>408 108,153 84,359 18,386 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 780,803 616,864 128,930 35,009 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 134,387 106,004 22,268 6,115 10 74,925 59,101 12,415 3,409 11 Fees for services (non-employees): b Legal...... 51,127 12,084 3,318 66,529 d Professional fundraising services. See Part IV, line 17 . Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 191,328 181,719 4,793 4,816 12 13 12,954 10,397 2,297 260 14 7,948 2,874 5,074 15 16 11,587 9,153 2,018 416 17 187,340 170,304 3,948 13,088 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 98,550 87,170 9,105 2,275 20 21 22 Depreciation, depletion, and amortization 23 Insurance 1,161 25,522 20,132 4,229 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Memberships, subscriptions 19,740 399 33,426 13,287 b Bad debt 14,750 14,750 303 Printing 35,929 35,626 С d e All other expenses Total functional expenses. Add lines 1 through 24e 25 1,784,131 1,469,320 239,137 75,674 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)

Part X **Balance Sheet**

		Check if Schedule O contains a response or note to any line in this Part X		<u></u>	<u> </u>
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	1,602,142	1	313,913
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	334,032	3	1,988,346
	4	Accounts receivable, net	•	4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
ets	8	Inventories for sale or use		8	
Assets	9	Prepaid expenses and deferred charges	6,954	9	9,599
	10a	Land, buildings, and equipment: cost or	0,334	9	9,099
	IUa				
		other basis. Complete Part VI of Schedule D 10a		40-	
	b	Less: accumulated depreciation		10c	
	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	8,375	15	8,375
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,951,503	16	2,320,233
	17	Accounts payable and accrued expenses	136,220	17	132,040
	18	Grants payable		18	
	19	Deferred revenue		19	7,596
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
<u>ia</u>		disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	136,220	26	139,636
		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗓 and			
S		complete lines 27 through 29, and lines 33 and 34.			
2	27	Unrestricted net assets	273,760	27	250,892
sala	28	Temporarily restricted net assets	1,541,523	28	1,929,705
<u>B</u>	29	Permanently restricted net assets		29	
Ξ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
ō		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
٩ss	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
2	33	Total net assets or fund balances	1,815,283	33	2,180,597
	34	Total liabilities and net assets/fund balances	1,951,503	34	2,320,233

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u>.</u>			. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,3	149,4	144
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	784,1	131
3	Revenue less expenses. Subtract line 2 from line 1	3		365,3	313
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,8	315,2	283
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			1
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	2,3	180,5	597
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🗌
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		Х
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 in Schedule O and describe any steps taken to undergo such audits		3b		
EEA			Form	990 (2	2017)

SCHEDULE A

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.

2017 Open to Public

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

(Form 990 or 990-EZ)

Department of the Treasury

Employer identification number

Equ	ita	ble Food Initiative					47-31232	71	
Pa	rt I	Reason for Public Charity	/ Status (All or	ganizations must co	omplete	this part	.) See instruction	ns.	
The	orgai	nization is not a private foundation bec	ause it is: (For lines	s 1 through 12, check only	y one box.)			
1		A church, convention of churches, or	association of chu	ırches described in secti	ion 170(b)	(1)(A)(i).			
2		A school described in section 170(b)(1)(A)(ii). (Attach	Schedule E (Form 990 o	or 990-EZ).	.)			
3	П	A hospital or a cooperative hospital s	,,,,,,	•	,	,			
4	П	A medical research organization ope	•				(1)(A)(iii) Enter the		
7	Ш	hospital's name, city, and state:	rated in conjunctio	iii wiiii a nospital acsonb	ca iii scci	1011 17 0(B)	(I)(A)(III). LIIIOI IIIO		
_		· · · · · · · · · · · · · · · · · · ·	ofit of a college or .	university owned or energ	tod by a m		tal unit departhed in		
5	Ш	An organization operated for the bene	_	university owned or opera	ated by a g	governmen	tal unit described in		
		section 170(b)(1)(A)(iv). (Complete	,						
6	Н	A federal, state, or local government	· ·			. , , ,			
7	X	An organization that normally receive	s a substantial part	of its support from a gov	ernmental	unit or fro	m the general public		
		described in section 170(b)(1)(A)(vi). (Complete Part I	l.)					
8	Ш	A community trust described in secti	on 170(b)(1)(A)(vi	i). (Complete Part II.)					
9		An agricultural research organization	described in secti	ion 170(b)(1)(A)(ix) ope	rated in co	onjunction	with a land-grant coll	ege	
		or university or a non-land-grant colle	ge of agriculture (s	see instructions). Enter the	e name, cit	ty, and stat	e of the college or		
		university:							
10		An organization that normally receive	s: (1) more than 33	3 1/3% of its support from	contributi	ons, memb	ership fees, and gros	iS	
		receipts from activities related to its e	xempt functions - s	subject to certain exception	ons, and (2	2) no more	than 33 1/3% of its		
		support from gross investment income	e and unrelated but	siness taxable income (le	ess section	້າ 511 tax) f	rom businesses		
		acquired by the organization after Ju		•		•			
11	П	An organization organized and opera				,			
12	П	An organization organized and operat	•			. , , ,	carry out the numos	es	
-	ш	of one or more publicly supported org	•	•					
		Check the box in lines 12a through 12	-	` ` ` `			,		
	_	_						•	
	а	Type I. A supporting organization		•		•		virig	
		the supported organization(s) the			ity of the c	arectors or	trustees of the		
		supporting organization. You mu	•						
	b	Type II. A supporting organization	•			_	. , ,	-	
		control or management of the sup		•	rsons that o	control or r	nanage the supporte	d	
		organization(s). You must comp	olete Part IV, Sect	ions A and C.					
	С		 A supporting orga 	anization operated in cor	nection w	ith, and fu	nctionally integrated	with,	
		its supported organization(s) (see	e instructions). You	u must complete Part I\	V, Section	ıs A, D, ar	nd E.		
	d	Type III non-functionally integr	rated. A supporting	g organization operated i	n connecti	ion with its	supported organizat	ion(s)	
		that is not functionally integrated.	The organization g	generally must satisfy a di	istribution i	requiremer	nt and an attentivenes	S	
		requirement (see instructions). Y	ou must complete	e Part IV, Sections A ar	nd D, and	Part V.			
	е	Check this box if the organization	received a written	determination from the IF	RS that it is	a Type I,	Type II, Type III		
		functionally integrated, or Type III	non-functionally in	ntegrated supporting orga	anization.				
	f	Enter the number of supported organ	-						
	g	Provide the following information about	ut the supported or	ganization(s).					
	(i	Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amo	ount of
			.,	(described on lines 1-10		ır governing	support (see	other sup	
				above (see instructions))	docum	ent?	instructions)	instruc	ctions)
					Yes	No			
(A)									
(B)									
(C)									
(Ο)									
(D)									
. ,									
(E)									
Tota	ı								

47-3123271 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

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

Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			4,860,177		1,933,205	6,793,382
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3			4,860,177		1,933,205	6,793,382
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						5,907,317
6	Public support. Subtract line 5 from line 4						886,065
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4			4,860,177		1,933,205	6,793,382
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.)						
11	Total support. Add lines 7 through 10 .						6,793,382
12	Gross receipts from related activities, etc. (see instructions)				12	474,860
13	First five years. If the Form 990 is for the organization, check this box and stop here	organization's first	, second, third, for	urth, or fifth tax year	as a section 501		_
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2017 (line 6,	column (f) divided l	oy line 11, column	(f))		14	%
15	Public support percentage from 2016 Scheo					15	%
16a	33 1/3% support test - 2017. If the organize	zation did not ched	k the box on line	13, and line 14 is 33	3 1/3% or more, ch	neck this	
	box and stop here. The organization quali	fies as a publicly s	upported organiza	ation			▶ □
b	33 1/3% support test - 2016. If the organize	zation did not ched	ck a box on line 13	3 or 16a, and line 15	is 33 1/3% or mo	re, check	
	this box and stop here. The organization of	qualifies as a publi	cly supported orga	anization			▶ □
17a	10%-facts-and-circumstances test - 201	7. If the organizati	on did not check a	box on line 13, 16a	a, or 16b, and line	14 is	
	10% or more, and if the organization meets	s the "facts-and-ci	cumstances" test	, check this box and	stop here. Expla	in in	
	Part VI how the organization meets the "fac	ts-and-circumstan	ces" test. The orga	anization qualifies as	a publicly suppor	ted	
	organization						▶ □
b	10%-facts-and-circumstances test - 201	6. If the organizati	on did not check a	box on line 13, 16a	a, 16b, or 17a, and	lline	
	15 is 10% or more, and if the organization	meets the "facts-a	nd-circumstances	" test, check this bo	x and stop here.		
	Explain in Part VI how the organization mee	ets the "facts-and-o	circumstances" tes	t. The organization o	qualifies as a publi	cly	
							▶ 🗌
18	Private foundation. If the organization did	not check a box of	on line 13, 16a, 16	b, 17a, or 17b, chec	ck this box and see	е	_
	instructions						▶ 🔲

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

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

Se	ction A. Public Support			· •	•	,	
Cal	endar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513 .						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the o organization, check this box and stop here						▶ □
Se	ction C. Computation of Public Su	pport Percer	ntage				
15	Public support percentage for 2017 (line 8, co	olumn (f) divided b	oy line 13, column (f))		. 15	%
16	Public support percentage from 2016 Schedu					. 16	%
Se	ction D. Computation of Investme						
17	Investment income percentage for 2017 (line						%
18	Investment income percentage from 2016 S	chedule A, Part I	II, line 17			. 18	%
	33 1/3% support tests - 2017. If the organia 17 is not more than 33 1/3%, check this box	and stop here.	The organization q	ualifies as a public	cly supported orga	nization	▶ □
b	33 1/3% support tests - 2016. If the organization 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did	not check a box o	on line 14, 19a, or 1	9b, check this box	and see instructi	ons	▶ 🗌

Part IV Support

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

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- **c** Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).
- **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).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," provide detail in **Part VI**.
- **c** Did a disqualified person (as defined 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**.
- **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.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	JU		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	J		
	7		
	-		
	8		
	9a		
	9b		
	9с		
	40		
	10a		
	10b		
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Par	t IV Supporting Organizations (continued)			9-
	oupporting organizations (continuou)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	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		
h	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		
	tion B. Type I Supporting Organizations			
	2. 1)po 1 cuppo ig c. gui		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			
		4		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
•	Did the agreementing an exete feather howefit of any arrangement an other than the arrangement			
	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		
Sect	tion C. Type II Supporting Organizations		1	
			Yes	No
	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		
Sect	tion D. All Type III Supporting Organizations			
			Yes	No
	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how</i>			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	the organization maintained a close and continuous working relationship with the supported organization(s).			
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 in this regard.	3		
Sect	tion 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 in	struc	tions)).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	tions
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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		
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? <i>If "Yes," explain in Part VI the</i>			
	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>			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	adotoso of odori of the supported organizations: I rovide details in I dit VI.	Ju		

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in Part VI the role played by the organization in this regard.*

Scried	die A (1 dilli 990 di 990-12) 2017 Equitable FOOd Initiative		±7-312	IJZ/I rago	
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	ganiza	ations		
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying	trust o	n Nov. 20, 1970 (expla	in in Part VI). See	
	instructions. All other Type III non-functionally integrated supporting organization	zations	must complete Section	ns A through E.	
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		, , ,	
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
СО	llection of gross income or for management, conservation, or				
	aintenance 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				
ins	structions for short tax year or assets held for part of year):				
	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other				
fa	ctors (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,				
se	e 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			
	Income tax imposed in prior year	5			
6	Distributable Amount Subtract line 5 from line 4 uplace subject to				

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

6

EEA

emergency temporary reduction (see instructions).

Schedu	lle A (Form 990 or 990-EZ) 2017 Equitable Food Initiativ		47-312	23271 Page 7				
Par	Part 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 exer	mpt purposes						
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported						
	organizations, in excess of income from activity							
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizat	ions					
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 th	e organization is respons	sive					
_	(provide details in Part VI). See instructions.	g						
9	Distributable amount for 2017 from Section C, line 6							
	Line 8 amount divided by Line 9 amount							
<u> </u>	Elifo o almount arriada by Elifo o almount		(ii)	(iii)				
S	ection E - Distribution Allocations (see instructions)	(i)	Underdistributions	Distributable				
Ĭ		Excess Distributions	Pre-2017	Amount for 2017				
1	Distributable amount for 2017 from Section C, line 6		110 2011	, din 10. 2011				
	Underdistributions, if any, for years prior to 2017							
_	(reasonable cause required - explain in Part VI). See							
	instructions.							
3	Excess distributions carryover, if any, to 2017							
a	Excess distributions carryover, if any, to 2017							
	From 2013							
	Fram 2044							
	Fram 2045							
	From 2015							
	From 2016							
	Total of lines 3a through e							
	Applied to underdistributions of prior years							
	Applied to 2017 distributable amount							
<u> </u>	Carryover from 2012 not applied (see instructions)							
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.							
4	Distributions for 2017 from							
	Section D, line 7: \$							
	Applied to underdistributions of prior years							
	Applied to 2017 distributable amount							
	Remainder. Subtract lines 4a and 4b from 4.							
5	Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2018. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
а	Excess from 2013							
b	Excess from 2014							

c Excess from 2015d Excess from 2016e Excess from 2017

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

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

Department of the Treasury

Name of the organization

Equitable Food Initiative

Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2017

Employer identification number

47-3123271

Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
Equitable Food Initiative

Employer identification number

47-3123271

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is r	ieeaea.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Costco 999 Lake Drive Issaquah, WA 98029	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

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.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name	of the organization	Employer identification number
Εqι	uitable Food Initiative	47-3123271
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year) .	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advisors	vised
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be	pe used
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other pu	rpose
	conferring impermissible private benefit?	
Pa	rt II Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	historically important land area
	Protection of natural habitat Preservation of a c	certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form	m of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by	the organization during the
	tax year •	
4	Number of states where property subject to conservation easement is located	_
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	of
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing cor	nservation easements during the year
	<u> </u>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservations	vation easements during the year
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 1	
	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expension	nse statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial staten	nents that describes the
_	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures	s, or Other Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	7	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or rese	
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statem	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or rese	earch in furtherance of
	public service, provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · · · · ·
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial	cial gain, provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	

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Pai	t III Organizations Maintaining Col							ets (coi	านทน	<u>ea)</u>
3	Using the organization's acquisition, accession, and	l other records, c	heck any o	f the follow	ing that are a	signific	ant use of its			
	collection items (check all that apply):	_								
а	Public exhibition	d Loa	an or excha	nge progra	ams					
b	Scholarly research	e 🗌 Oth	ner							
С	Preservation for future generations									
4	Provide a description of the organization's collection	ns and explain ho	ow they furt	her the org	ganization's e	xempt p	urpose in Part			
	XIII.									
5	During the year, did the organization solicit or recei	ve donations of a	rt, historica	treasures	, or other sim	ilar				
	assets to be sold to raise funds rather than to be m							. D	es	No
Pai	t IV Escrow and Custodial Arrange		<u> </u>							
	Complete if the organization answ 990, Part X, line 21.		n Form 9	90, Part	: IV, line 9,	or rep	orted an amour	nt on Fo	orm	
1a	Is the organization an agent, trustee, custodian or o	ther intermediary	for contribu	utions or of	ther assets no	ot				
	included on Form 990, Part X?							. 🗆 Y	es/	☐ No
b	If "Yes," explain the arrangement in Part XIII and co	omplete the follow	ving table:							
			Ü				Amo	unt		
С	Beginning balance					1c	:			
d	Additions during the year									
e	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Form 99								/oc	No
_	If "Yes," explain the arrangement in Part XIII. Chec									
b Date	rt V Endowment Funds.	K Here ii the expi	analionnas	been prov	nueu on Fait	AIII .			<u>· · · · </u>	Ш
Fai		varad "Vaa" a	n Form C	OO Dor	· I\ / Iino 1(,				
	Complete if the organization ansv									
		(a) Current year	(b) Pri	or year	(c) Two years	back	(d) Three years back	(e) Fou	r years b	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current year	ar and halanca (li	ne 1a colu	mn (a)) he	ld as.					
a	Board designated or quasi-endowment	% « « « « « « « « « « « « « « « « « « «	ric 1g, colu	11111 (a)) 11C	iu as.					
_										
b	Permanent endowment	0/								
С	Temporarily restricted endowment	<u></u> %								
_	The percentages on lines 2a, 2b, and 2c should equ									
3a	Are there endowment funds not in the possession	of the organization	n that are r	ield and ac	iministered fo	or the				T
	organization by:								Yes	No
	(i) unrelated organizations							3a(i)		<u> </u>
	(ii) related organizations							3a(ii)		
b	If "Yes" on 3a(ii), are the related organizations liste	d as required on	Schedule F	₹?				3b		
4	Describe in Part XIII the intended uses of the organ	nization's endowr	ment funds.							
Pai	t VI Land, Buildings, and Equipmer	ıt.								
	Complete if the organization ansv		n Form 9	90, Part	: IV, line 11	la. Se	e Form 990, Pai	rt X, lin	e 10.	
-	Description of property	(a) Cost or oth			r other basis		Accumulated	(d) Boo		
	1	(investm		` ′	other)		epreciation	,., _50		
1a	Land	_		`						
	Buildings	•								
b		•								
C	Leasehold improvements	•								
d	Equipment	•								
<u>e</u>	Other	<u>. </u>		<u></u>						
Tota	I. Add lines 1a through 1e. (Column (d) must equal	Form 990, Part	X, column	(B), line 10	Oc.)					

Schedule D (Form		Initiative	47-312	23271 Page
Part VII	Investments - Other Securities.	-1 \		Dart V. P. 40
	Complete if the organization answere	d "Yes" on Form 990, Pa	art IV, line 11b. See Form 990	, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1) Financial	derivatives			
	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.	d "Voo" on Form 000 Do	ort IV/ line 11e See Form 000	Dort V line 12
	Complete if the organization answere	u 165 on Form 990, Fa		Fait A, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.	d "Voo" on Form 000 De	art IV/ line 11d Coe Form 000	Dort V line 15
	Complete if the organization answere		art IV, line 11d. See Form 990	
(4)	(a) D	escription		(b) Book value
(1) (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 15	 5.)		
Part X	Other Liabilities.	, , , , , , , , , , , , , , , , , , , ,	-	
	Complete if the organization answere	d "Yes" on Form 990, Pa	art IV, line 11e or 11f. See For	m 990, Part X,
	line 25.	,		

1.	(a) Description of liability		(b) Book value
(1) Federa	al income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25.)	•	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. 🗵

Pa	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements	1	2,231,697			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments					
b	Donated services and use of facilities					
С	Recoveries of prior year grants					
d	Other (Describe in Part XIII.) 2d					
е	Add lines 2a through 2d	2e	82,253			
3	Subtract line 2e from line 1	3	2,149,444			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a					
b	Other (Describe in Part XIII.)					
С	Add lines 4a and 4b	4c				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,149,444			
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Re	turn.			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements	1	1,866,383			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities					
b	Prior year adjustments					
С	Other losses					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d	2e	82,252			
3	Subtract line 2e from line 1	3	1,784,131			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a					
b	Other (Describe in Part XIII.)					
С	Add lines 4a and 4b	4c				
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,784,131			
Pa	rt XIII Supplemental Information.					
Prov	ide 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	t X, line)			
2; Pa	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.					
01	. Footnote for uncertain tax position under FIN 48 (Part X)				
Unc	ertain tax positions					
The	Financial Accounting Standards Board (FASB) has released FASB ASC 740-10, In	come				
Tax	es, that provides guidance for reporting uncertainty in income taxes. For th	e yea	ır			
end	ed December 31, 2017, EFI has documented its consideration of FASB ASC 740-10	and				
det	ermined that no material uncertain tax positions qualify for either recogniti	on or	?			
dis	closure in the financial statements. The Federal Form 990, Return of Organiza	tion				
Exe	mpt from Income Tax, is subject to examination by the Internal Revenue Servic	е				
gen	erally for three years after it is filed. Tax year ending December 31, 2016	and 2	2015			
rem	ain open with both Federal and state taxing authorities.					

EEA Schedule D (Form 990) 2017

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Equitable Food Initiative 47-3123271 01. Form 990 governing body review (Part VI, line 11) The 990 is distributed to the entire board for review and approval prior to filing. 02. Conflict of interest policy compliance (Part VI, line 12c) EFI board members and staff review the conflict of interest policy at each annual board and staff retreat. 03. CEO, executive director, top management comp (Part VI, line 15a) EFI commissioned a comparative study which served as the basis for establishing salary bands for all staff positions. The policy was approved by the full board, after which the executive director was tasked with negotiating staff salaries while the chair and vice-chair negotiated the executive director's salary. 04. Other officer or key employee compensation (Part VI, line 15b EFI commissioned a comparative study which served as the basis for establishing salary bands for all staff positions. The policy was approved by the full board, after which the executive director was tasked with negotiating staff salaries while the chair and vice-chair negotiated the executive director's salary. 05. Governing documents, etc, available to public (Part VI, line 19) The annual report will be posted online. The 990 will be available to the public through Guidestar or by request. The other documents are available to the public upon request. 06. List of other fees for services expenses (Part IX, line 11g)

Trainers: 101,024 program

Form 990 Worksheet	Schedule A, Line 5 - Excess 2% Limitation Contributors		
	(Keep for your records)	2017	
Name(s) as shown on return		Tax ID Number	
Equitable Food Initiative		47-3123271	

	(a)	(b)	(c)	(d)	(e)	(f)	(g)
Name	2013	2014	2015	2016	2017	Total	Excess contributions
							(col. (f) minus
							the 2% limitation)
Oxfam America, Inc.		358,393		·	358,393	222,525	
MacArthur Foundation			1,000,000			1,000,000	864,132
The Atlantic Philanthropies			2,000,000			2,000,000	1,864,132
Disney Worldwide Services, Inc.			900,000			900,000	764,132
Tides Foundation			400,000			400,000	264,132
Cedar Tree Foundation			200,000			200,000	64,132
Costco					2,000,000	2,000,000	1,864,132