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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

| A | or the | 2023 calend | lar year, or tax year begir | nning | | , 2023, a | and end | ling | | , 20 | | |
|-------------------------|-----------------------|---|--------------------------------------|-----------------------------|------------------------------|---------------------|----------------|----------------|--------------|-----------------------------|--|--|
| | | applicable: | | vil Eats | | | | - T | D Emp | loyer identification number | | |
| 57 | Address o | | Doing business as | | | | | | · | 84-4826419 | | |
| \Box | Name cha | - | Number and street (or P.O. bo | ox if mail is not delivered | to street address) | | Room/sı | ıite | F Teler | phone number | | |
| 一 | nitial retu | • | 502 E Cotati A | | | | | 7014 | 0.0 | (917)539-3924 | | |
| 一 | | rn/terminated | City or town, state or province | | uian nostal code | | <u> </u> | 7011 | G Gros | ss receipts | | |
| 一 | Amended | | Cotati, CA 949 | | ngri postai code | | | | \$ | 1,288,262 | | |
| 一 | | n pending | F Name and address of principa | | | | | H(a) la this a | | for subordinates? Yes X No | | |
| ш <i>′</i> | Applicatio | in pending | F Maine and address of principa | ii onicer. | | | | | | tes included? | | |
| | | t atatus. Y | 501(c)(3) 501(c) (| \ (incort no \ | 4947(a)(1) or | F07 | | ∃ `′ | | | | |
| | | | |) (insert no.) | 4947(a)(1) 01 | 527 | | | | ist. See instructions | | |
| | Vebsite: | | rileats.com | · | | | - 20 | H(c) Group | | | | |
| Pa | | rganization: X | | ociation Other | | L Year of formati | on: ∠ 0 | ∠U M : | state of le | gal domicile: CA | | |
| ı a | _ | | • | : | | | | | | | | |
| | 1 | - | ibe the organization's miss | - | | | | | | ource for critical | | |
| 9 | | thought about the American food system. We publish stories that shift the conversation arou | | | | | | | | | | |
| Activities & Governance | | sustainable agriculture in an effort to build economically and socially just communities. | | | | | | | | | | |
| err | | | | | | | | | | | | |
| Š | 2 | | ox if the organization of | • | • | | | | 1 | 1 | | |
| ø | 3 | | oting members of the gove | | | | | | 3 | 5 | | |
| es | 4 | | ndependent voting member | | • ` | | | | 4 | 4 | | |
| ξ | 5 | Total number | r of individuals employed ir | n calendar year 202 | 23 (Part V, line 2a) | | | | 5 | 11 | | |
| Vcti | 6 | | r of volunteers (estimate if | • , | | | | | 6 | 4 | | |
| • | 7a | Total unrelate | ed business revenue from | Part VIII, column (0 | C), line 12 • • • • • | | | | 7a | 0 | | |
| | b | Net unrelated | d business taxable income | from Form 990-T, | Part I, line 11 · · · · | | <u></u> | | 7b | 0 | | |
| | | | | | | | | Prior Year | | Current Year | | |
| | 8 | Contributions | s and grants (Part VIII, line | 1h) | | | | 712 | ,591 | 1,251,678 | | |
| ne | 9 | Program ser | vice revenue (Part VIII, line | e 2g) | | | | 4 | ,950 | 3,250 | | |
| Revenue | 10 | Investment in | ncome (Part VIII, column (A | A), lines 3, 4, and 7 | 'd) | | | | | 33,334 | | |
| æ | 11 | 1 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | | | | | | ,343 | 0_ | | |
| | 12 | Total revenue | e - add lines 8 through 11 (| (must equal Part VI | II, column (A), line 12 |) | | 720 | ,884 | 1,288,262 | | |
| | 13 | Grants and s | similar amounts paid (Part | IX, column (A), line | s 1-3) | | | | | 1,213 | | |
| | 14 | 4 Benefits paid to or for members (Part IX, column (A), line 4) | | | | | | | | 0 | | |
| | 15 | | | | | | | | ,088 | 662,031 | | |
| Expenses | 16a | ia Professional fundraising fees (Part IX, column (A), line 11e) | | | | | | | | 0 | | |
| en | | | sing expenses (Part IX, col | | , | 101,193 | | | | | | |
| ᄶ | 17 | Other expens | ses (Part IX, column (A), lii | nes 11a-11d, 11f-24 | 1e) | | | 280 | ,607 | 291,173 | | |
| _ | 18 | | ses. Add lines 13-17 (must | | | | | | ,695 | 954,417 | | |
| | 19 | | s expenses. Subtract line | | | | | | ,811) | , | | |
| | | | | | | | Bea | inning of Curr | | End of Year | | |
| ts o | 20 | Total assets | (Part X, line 16) | | | | 1 209 | 1,289 | | 1,628,254 | | |
| ASSE | 21 | | es (Part X, line 26) | | | | | | ,619 | 12,544 | | |
| Net Assets or | 22 | | r fund balances. Subtract l | | | | | 1,281 | | 1,615,710 | | |
| | rt II | | re Block | 2 | | | | 1,201 | ,,005 | 1,013,710 | | |
| | | | clare that I have examined this retu | urn, including accompany | ring schedules and statemer | nts, and to the bes | st of my kn | owledge and b | elief, it is | | | |
| true, | correct, a | and complete. De | claration of preparer (other than of | ficer) is based on all info | rmation of which preparer ha | s any knowledge. | | | | | | |
| | | Naom | i Starkman | | | | | | | | | |
| Sig | n | Signature of office | | | | | | | Da | ate | | |
| Her | | Maam | i Chamleman (IEO | Drogidont of | the Board | | | | | | | |
| | • | Type or print nar | i Starkman, CEO, | President of | the Board | | | | | | | |
| | | | eparer's name | Preparer's signature | | Date | | Observi | П., | PTIN | | |
| Pai | d | | • | | | | 24 | Check | if if | | | |
| | _u parer | John Mu | | John Mullins | i | 10-28-20 | | self-em | pioyed | P01429307 | | |
| | Only | . — | Mullins, | | | | | Firm's EIN | | | | |
| USE | , Oili | Firm's addres | | sconsin Avenu | ie | | | Phone no. | 000 | BB0 6384 | | |
| Max | the IDS | C diaguag this | return with the preparer sh | MD 20814 | notructions | | | | 202- | 770-6371 X Yes No | | |

84-4826419

Page 2

Form 990 (2023) Civil Eats

719,347

Form 990 (2023) Civil Eats
Part IV Checklist of Required Schedules

| | | | Yes | No |
|-----|--|----------|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions | 2 | Х | |
| 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 | | х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | | | |
| | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | Х |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | _ | | |
| _ | assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III | 5 | | Х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | | | |
| | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | |
| _ | "Yes," complete Schedule D, Part I | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | _ | | |
| | the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> | 7 | | Х |
| 8 | complete Schedule D, Part III | 8 | | |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a | - | | Х |
| 3 | custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or | | | |
| | debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | х |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | | | |
| | or in quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | 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 | | | | |
| | complete Schedule D, Part VI | 11a | х | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more | | | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | х |
| С | | | | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | х |
| d | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets | | | |
| | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | х |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | х |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Х | |
| 12a | | | | |
| | Schedule D, Parts XI and XII | 12a | Х | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If | | | |
| | "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | Х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Х |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | Х |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, | | | |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 446 | | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or | 14b | | X |
| 13 | for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other | 13 | | Х |
| 10 | assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | x |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | | | |
| •• | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions | 17 | | x |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | <u> </u> | | |
| - | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | x |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | 1 | | |
| - | If "Yes," complete Schedule G, Part III | 19 | | х |
| 20a | Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> · · · · · · · · · · · · · · · · · · | 20a | | x |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | x |

Form 990 (2023) Civil Eats 84-4826419 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Х 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a 24a X 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a Х Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b Х 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 26 Х 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these 27 х 28 Was the organization a party to a business transaction with one of the following parties (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions). a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a х 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c x Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 х 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Х 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Х 35a Х b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 36 Х Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 37 Х Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 38 x Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a 65 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and

reportable gaming (gambling) winnings to prize winners?

Form 990 (2023) Page 5 Civil Eats 84-4826419 Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b х 3a х 3a 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?...... Х **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a 5a Х х С 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a Х If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a X Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was С 7c d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . 7g g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 9b b 10 Section 501(c)(7) organizations. Enter: 10a а 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 b Gross income from other sources. (Do not net amounts due or paid to other sources 11b 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which 13c С х 14a 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 Х If "Yes," complete Form 4720, Schedule O.

Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities

that would result in the imposition of an excise tax under section 4951, 4952, or 4953?

If "Yes," complete Form 6069.

17

17

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

| <u> </u> | ction 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 | | | |
| | If there are material differences in voting rights among members of the governing body, or | | | |
| | if the governing body delegated broad authority to an executive committee or similar | | | |
| | committee, explain on Schedule O. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | |
| | any other officer, director, trustee, or key employee? | 2 | | х |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | |
| | supervision of officers, directors, trustees, or key employees to a management company or other person? | 3 | | Х |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | х |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | х |
| 6 | Did the organization have members or stockholders? | 6 | | х |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint | | | |
| | one or more members of the governing body? | 7a | | х |
| 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 | | х |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | |
| | the year by the following: | | | |
| а | The governing body? | 8a | х | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | х | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at | | | |
| | the organization's mailing address? If "Yes," provide the names and addresses on Schedule O | 9 | | х |
| 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 | | х |
| 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 | х | |
| b | Describe on 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 | х | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | х | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | |
| | describe on Schedule O how this was done | 12c | х | |
| 13 | Did the organization have a written whistleblower policy? | 13 | х | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | х | |
| 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 | х | |
| b | Other officers or key employees of the organization | 15b | | х |
| | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | |
| | with a taxable entity during the year? | 16a | | х |
| 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 | | |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed California | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) | | | |
| | (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. | | | |
| | Own website | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, | | | |
| | and financial statements available to the public during the tax year. | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records. | | | |
| | mbs Operation (017)520 2024 502 F Gatati Ave 3rd 7014 Gatati GD 04021 | | | |

Form 990 (2023) Civil Eats 84-4826419 Page 7

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See the instructions for definition of "key employees."
- 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| Check this box if neither the organization nor any rela | ted organiza | tion co | mpe | nsa | ted a | any cu | rren | t officer, director, o | r trustee. | |
|---|------------------------|-----------------------------------|-----------------------|----------------|--------------|------------------------------|--------|--------------------------------|-------------------------------------|-----------------------|
| (C) | | | | | | | | | | |
| (A) | (B) | | | | sition | | | (D) | (E) | (F) |
| Name and title | Average | | | | | han one s both a | | Reportable | Reportable | Estimated amount |
| | hours | | | | | /trustee | | compensation | compensation | of other |
| | per week | | | | | | | from the organization (W-2/ | from related organizations (W-2/ | compensation from the |
| | (list any hours for | or | Ins | Q _f | 天 e | en Hi | Fo | 1099-MISC/ | 1099-MISC/ | organization and |
| | related | direc | tituti | Officer | y em | ghes: | Former | 1099-NEC) | 1099-NEC) | related organizations |
| | organizations | tor | onal | | Key employee | t con | | | | |
| | below | Individual trustee or director | Institutional trustee | | ee | ηpen | | | | |
| | dotted line) | Φ | ee | | | Highest compensated employee | | | | |
| | | | | | | Ф | | | | |
| (A) | | | | | | | | | | |
| (1)Naomi Starkman | 40.00 | | | | | | | | _ | |
| CEO, President of the Board | | Х | | х | | | | 105,891 | 0 | 10,775 |
| (2)Matthew Wheeland | 40.00 | | | | | | | | _ | |
| Managing Editor | | | | | | х | | 109,890 | 0 | 4,017 |
| (3)Christine Schantz | 1.00 | | | | | | | | | |
| Secretary | | Х | | х | | | | 0 | 0 | 0 |
| (4)Emilio Garcia-Ruiz | 1.00 | | | | | | | | | |
| Member | 1 00 | Х | | х | | | | 0 | 0 | 0 |
| (5)Esther Park | 1.00 | | | | | | | • | | |
| Treasurer | 1 00 | Х | | Х | | | | 0 | 0 | 0 |
| (6)Will Rosenzweig | <u></u> 00 | | | | | | | • | | |
| Chairperson (7) | | х | | Х | | | | 0 | 0 | 0 |
| _(7) | | | | | | | | | | |
| (8) | | | | | | | | | | |
| _(8) | | | | | | | | | | |
| (0) | | | | | | | | | | |
| _(9) | | | | | | | | | | |
| (10) | | | | | | | | | | |
| (10) | | | | | | | | | | |
| (11) | | | | | | | | | | |
| (11) | | | | | | | | | | |
| <u>(12)</u> | | | | | | | | | | |
| Y-='- | | | | | | | | | | |
| (13) | | | | | | | | | | |
| <u>`-'</u> | | | | | | | | | | |
| (14) | | | | | | | | | | |
| ÷-′ | r | | | | | | | | | |
| | 1 | | - | | | | | | | |

EEA Form **990** (2023)

| Form 99 | | | | Vari | | <u></u> | | | <u> </u> | Himboot Comm | | -48264 | | | age 8 |
|---------------|-----------------------|---|---|-----------------------------------|-----------------------|-----------------------|--------------|----------------------------------|----------|--|---|-------------------|-----------------------------------|-----------------------|-----------|
| Part ' | VII | Section A. Officers, Directors, T | rustees, | Ney | Em _i | _ | _ | es, ar | na | Hignest Comp | ensated | Emple | byees | (cont | inued) |
| | (A) Name and title | | (B) Average hours per week | box | , unle | Po ieck r ss pe | rson i | han one s both a r/trustee | ın | (D) Reportable compensation from the organization (W-2/ | (E) Reportable compensation from related organizations (W-2/ | | (F) Estimated ar of othe compensa | | r tion |
| | | | (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | 1099-MISC/ 1099-NEC) | 1099-MIS 1099-NEC | C/ | orga | nization d organiz | and |
| <u>(15)</u> | | | | | | | | | | | | | | | |
| <u>(16)</u> | | | | | | | | | | | | | | | |
| <u>(17)</u> | | | | | | | | | | | | | | | |
| <u>(18)</u> _ | | | | | | | | | | | | | | | |
| <u>(19)</u> | | | | | | | | | | | | | | | |
| <u>(20)</u> | | | | | | | | | | | | | | | |
| (21) | | | | | | | | | | | | $ \bot $ | | | |
| (22) | | | | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | | | | |
| (24) | | | | | | | | | | | | \longrightarrow | | | |
| (25) | | | | | | | | | | | | | | | |
| 1b | Subto | | | | | ٠. | ٠. | | • | | | | | | |
| d | | from continuation sheets to Part VII, Sec (add lines 1b and 1c) | | | | | | | | 215,781 | | 0 | | 14,7 | 792 |
| 2 | Total | number of individuals (including but n table compensation from the organiza | ot limited t | | | | | | | received more t | han \$100,0 | 000 of | | | |
| | ТСРО | table compensation from the organiza | 111011 | | | | | | | | | | | Yes | No No |
| 3 | | e organization list any former officer, direct yee on line 1a? <i>If "Yes," complete Schedule</i> | | | - | | - | | | | | | 3 | | х |
| 4 | | ny individual listed on line 1a, is the sum of r ization and related organizations greater tha | | | | | | | | | | | | | |
| 5 | Did ar | dual · · · · · · · · · · · · · · · · · · · | compensat | ion fro | n an | ıy ur | rela | ted or | gani | zation or individual | | | 4 | | X |
| Soction | | rvices rendered to the organization? If "Yes, Independent Contractors | ," complete : | Schedu | ıle J | for s | such | perso | n. | | <u></u> | | 5 | | х |
| 1 | | plete this table for your five highest co | mpensated | d inde | pen | den | t co | ntract | tors | that received me | ore than \$ | 100,000 | 0 of | | |
| | | pensation from the organization. Repo | - | | | | | | | | | | | s tax y | year. |
| | | (A) Name and business addres | ss | | | | | | | (B) Description of service | es | | (C) Compens | ation | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| 2 | | number of independent contractors (in ved more than \$100,000 of compensa | _ | | | | | nose I | iste | d above) who | | | | | |

Form 990 (2023) Civil Eats 84-4826419 Part VIII Statement of Revenue (C) Total revenue Related or exempt Unrelated Revenue excluded function revenue business revenue from tax under sections 512-514 Federated campaigns 1a 1b Contributions, Gifts, Grants and Other Similar Amounts 1c Related organizations 1d Government grants (contributions) . . 1e 91,245 All other contributions, gifts, grants, and similar amounts not included above 1f 1,160,433 Noncash contributions included in lines 1a-1f \$ 1g h Total. Add lines 1a-1f 1,251,678 **Business Code** 2a Program Revenue 900099 3,250 3,250 Program Service Revenue f All other program service revenue 3,250 3 Investment income (including dividends, interest, and 33,334 33,334 Income from investment of tax-exempt bond proceeds 5 (i) Real (ii) Personal 6a Gross rents 6a **b** Less: rental expenses . . 6b c Rental income or (loss) 6c **d** Net rental income or (loss) (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory 7a b Less: cost or other basis Other Revenue and sales expenses 7b c Gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a **b** Less: direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 9a **b** Less: direct expenses 9b **c** Net income or (loss) from gaming activities 10a Gross sales of inventory, less 10a

33,334

0

3,250

Miscellanous Revenue

11a

b Less: cost of goods sold

c Net income or (loss) from sales of inventory . . .

 \boldsymbol{d} . All other revenue

e Total. Add lines 11a-11d

10b

Business Code

1,288,262

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 r | note to any line in thi | s Part IX | | <u>x</u> |
|-------|---|-------------------------|------------------------|-----------------------|---------------------------|
| | not include amounts reported on lines 6b, 7b, | (A) Total expenses | (B) Program service | (C) Management and | (D) Fundraising |
| 8b, 9 | 9b, and 10b of Part VIII. | Total expenses | expenses | general expenses | expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | 1,213 | 1,213 | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and | | | | |
| | foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 105,891 | 82,595 | 10,589 | 12,707 |
| 6 | Compensation not included above to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 474,127 | 369,819 | 47,413 | 56,895 |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | 13,716 | 10,698 | 1,372 | 1,646 |
| 9 | Other employee benefits | 20,935 | 16,329 | 2,094 | 2,512 |
| 10 | Payroll taxes | 47,362 | 36,942 | 4,736 | 5,684 |
| 11 | Fees for services (nonemployees): | | | | |
| а | Management | | | | |
| b | Legal | 6,226 | | 6,226 | |
| С | Accounting | 33,398 | | 33,398 | |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, column | | | | |
| | (A), amount, list line 11g expenses on Schedule O.) • • | 171,074 | 159,461 | 5,872 | 5,741 |
| 12 | Advertising and promotion | 4,308 | 3,798 | 510 | |
| 13 | Office expenses | 56,606 | 31,472 | 9,126 | 16,008 |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | | |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 8,401 | 7,020 | 1,381 | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 5,067 | | 5,067 | |
| 23 | Insurance | 6,093 | | 6,093 | |
| 24 | Other expenses. Itemize expenses not covered | | | | |
| | above (List miscellaneous expenses on line 24e. If | | | | |
| | line 24e amount exceeds 10% of line 25, column | | | | |
| | (A), amount, list line 24e expenses on Schedule O.) | | | | |
| a | | | | | |
| b | | | | | |
| C | | | | | |
| d | All of | | | | |
| е | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 954,417 | 719,347 | 133,877 | 101,193 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs | | | | |
| | from a combined educational campaign and | | | | |
| | fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) | | | | |
| | 10110W1119 001 00-2 (A00 300-1201 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1 | | | |

Page 10

Form 990 (2023) Civil Eats 84-4826419 Part X Balance Sheet

| | | Check if Schedule O contains a response or note to any line in this Part X | | | <u> </u> |
|-----------------------------|-----|---|-------------------|-----|------------------------|
| | | | (A) | | (B) |
| | | | Beginning of year | | End of year |
| | 1 | Cash - non-interest-bearing | 149,742 | 1 | 1,529,282 |
| | 2 | Savings and temporary cash investments | 1,014,000 | 2 | 75 |
| | 3 | Pledges and grants receivable, net | 101,500 | 3 | 79,374 |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Loans and other receivables from any current or former officer, director, | | | |
| | | trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | | controlled entity or family member of any of these persons | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined | | | |
| | | under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) \cdots | | 6 | |
| Ś | 7 | Notes and loans receivable, net | | 7 | |
| Assets | 8 | Inventories for sale or use | | 8 | |
| As | 9 | Prepaid expenses and deferred charges | 8,697 | 9 | 9,045 |
| | 10a | Land, buildings, and equipment: cost or other | | | |
| | | basis. Complete Part VI of Schedule D 10a 25,335 | | | |
| | b | Less: accumulated depreciation | 15,545 | 10c | 10,478 |
| | 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 | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 33) | 1,289,484 | 16 | 1,628,254 |
| | 17 | Accounts payable and accrued expenses | 7,619 | 17 | 12,544 |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| Liabilities | 22 | Loans and other payables to any current or former officer, director, | | | |
| pilli | | trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 22 | |
| Lia | 23 | , | | 23 | |
| | 24 | Secured mortgages and notes payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third | | | |
| | 20 | 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 | 7,619 | 26 | 12,544 |
| | | Organizations that follow FASB ASC 958, check here | 77013 | | 12/311 |
| es | | and complete lines 27, 28, 32, and 33. | | | |
| n C | 27 | Net assets without donor restrictions | 1,151,865 | 27 | 1,490,699 |
| 3ala | 28 | Net assets with donor restrictions | 130,000 | 28 | 125,011 |
| Jd E | | Organizations that do not follow FASB ASC 958, check here | | | |
| Fur | | and complete lines 29 through 33. | | | |
| o | 29 | Capital stock or trust principal, or current funds | | 29 | |
| ets | 30 | Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| Ass | 31 | Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| Net Assets or Fund Balances | 32 | Total net assets or fund balances | 1,281,865 | 32 | 1,615,710 |
| <u>z</u> | 33 | Total liabilities and net assets/fund balances | 1,289,484 | 33 | 1,628,254 |
| EEA | | | | | Form 990 (2023) |

Page **11**

| -orm | n 990 (2023) Civil Eats | 84-482641 | .9 | Pa | age 12 |
|------|---|-----------|------|----------------|--------|
| Pa | rt XI Reconciliation of Net Assets | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 1, | 288, | 262 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 954, | 417 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | | | 333, | 845 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | | 281, | |
| 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 | | | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | | | 0 |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | | |
| | 32, column (B)) | 10 | 1, | 615, | 710 |
| 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 X Accrual Other | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain on | | | | |
| | Schedule O. | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | х |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or | | | | |
| | reviewed on a separate basis, consolidated basis, or both. | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | х | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a | | | | |
| | separate basis, consolidated basis, or both. | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of | | | | |
| | the audit, review, or compilation of its financial statements and selection of an independent accountant? | | 2c | х | |
| | If the organization changed either its oversight process or selection process during the tax year, explain on | | | | |
| | 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 | | | | |
| | Uniform Guidance, 2 C.F.R. Part 200, Subpart F? | | 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 on Schedule O and describe any steps taken to undergo such audits | | 3b | | |
| EΑ | - | | Form | 1 990 (| (2023) |
| | | | | | |

EEA

SCHEDULE A (Form 990)

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.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Name of the organization Employer identification number Civil Eats 84-4826419 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**. X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 12 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. а Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Schedule A (Form 990) 2023 Page 2

rm 990) 2023 Civil Eats 84-4826419
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

| Calen | dar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
|-------|---|------------------------|-------------------|------------------|-----------------|-------------------|-------------|
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | 1,964,722 | 569,757 | 760,131 | 1,251,678 | 4,546,288 |
| 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 | | 1,964,722 | 569,757 | 760,131 | 1,251,678 | 4,546,288 |
| 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) | | | | | | 989,634 |
| 6 | Public support. Subtract line 5 from line 4 - | | | | | | 3,556,654 |
| | on B. Total Support | | | | | | |
| | dar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
| 7 | Amounts from line 4 | | 1,964,722 | 569,757 | 760,131 | 1,251,678 | 4,546,288 |
| 8 | Gross income from interest, dividends, | | | | | | |
| | payments received on securities loans, | | | | | | |
| | rents, royalties, and income from | | | | | | |
| • | similar sources | | | 632 | | 33,334 | 33,966 |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the business | | | | | | |
| 40 | 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 | | | | | | 4 500 054 |
| 12 | Gross receipts from related activities, etc. | (see instruct | ione) | | | 12 | 4,580,254 |
| 13 | First 5 years. If the Form 990 is for the o | | | | | | 13,150 |
| .0 | organization, check this box and stop he | • | | | • | , | , , , |
| Secti | on C. Computation of Public Suppo | rt Percenta | ae | | | | <u> </u> |
| 14 | Public support percentage for 2023 (line | | | 11, column (f)) | | 14 | % |
| 15 | Public support percentage from 2022 Sch | | | | | | % |
| 16a | 33 1/3% support test - 2023. If the organ | | | | | | check this |
| | box and stop here. The organization qua | llifies as a pub | olicly supported | organization. | | | |
| b | 33 1/3% support test - 2022. If the organ | nization did no | t check a box o | n line 13 or 16 | a, and line 15 | is 33 1/3% or r | nore, check |
| | this box and stop here. The organization | qualifies as a | publicly suppor | rted organizatio | on | | |
| 17a | 10%-facts-and-circumstances test - 20 | 23. If the orga | ınization did not | check a box o | n line 13, 16a | , or 16b, and lir | ne 14 is |
| | 10% or more, and if the organization mee | | | | | • | |
| | Part VI how the organization meets the fa | | | - | - | | |
| | organization | | | | | | _ |
| b | 10%-facts-and-circumstances test - 20 | • | | | | | |
| | 15 is 10% or more, and if the organization | | | | | • | • |
| | in Part VI how the organization meets the | facts-and-cir | cumstances tes | t. The organiza | ation qualifies | as a publicly sı | upported |
| | organization | | | | | | _ |
| 18 | Private foundation. If the organization d | | | | | | |
| | 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.)

| Secti | on A. Public Support | | | | | | |
|-------|--|---------------|-----------------|--------------------|-----------------|----------------|--------------|
| Calen | dar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (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 | | | | | | |
| | 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.) | | | | | | |
| Secti | on B. Total Support | | | | | | |
| | dar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (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 on line 10b, whether | | | | | | |
| | or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or | | | | | | |
| | loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| | and 12.) | | | | | | |
| 14 | First 5 years. If the Form 990 is for the or | • | rst, second, th | ird, fourth, or fi | fth tax year as | a section 501 | (c)(3) |
| | organization, check this box and stop her | | | | | | |
| | on C. Computation of Public Suppo | | | | | 1 . 1 | |
| 15 | Public support percentage for 2023 (line 8 | . , , , | • | , , | | 15 | % |
| 16 | Public support percentage from 2022 Sch | | | | | 16 | % |
| | on D. Computation of Investment In | | | l: 40 : | (0) | 1 4= 1 | |
| 17 | Investment income percentage for 2023 (| | . , | • | | 17 | % |
| 18 | Investment income percentage from 2022 | | | | | 18 | % |
| 19a | 33 1/3% support tests - 2023. If the orga | | | | | | |
| | 17 is not more than 33 1/3%, check this b | - | _ | = | | | ganization [|
| b | 33 1/3% support tests - 2022. If the organization | | | | | | _ |
| 00 | line 18 is not more than 33 1/3%, check this box | | | | | | |
| _20 | Private foundation. If the organization di | d not check a | box on line 14 | , 19a, or 19b, o | check this box | and see instru | ctions 📙 |

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

| | | | Yes | No |
|-----|--|------|-----|-----|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing | | 100 | 110 |
| - | documents? If "No," describe in Part VI how the supported organizations are designated. If designated by | | | |
| | class or purpose, describe the designation. If historic and continuing relationship, explain. | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status | - | | |
| | under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported | | | |
| | organization was described in section 509(a)(1) or (2). | 2 | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If</i> "Yes," answer | | | |
| - | lines 3b and 3c below. | 3a | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and | - Cu | | |
| ~ | satisfied the public support tests under section 509(a)(2)? <i>If</i> "Yes," <i>describe in Part VI when and how the</i> | | | |
| | organization made the determination. | 3b | | |
| С | 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. | 3с | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? <i>If</i> | - | | |
| | "Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below. | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign | | | |
| ~ | supported organization? If "Yes," describe in Part VI how the organization had such control and discretion | | | |
| | despite being controlled or supervised by or in connection with its supported organizations. | 4b | | |
| С | Did the organization support any foreign supported organization that does not have an IRS determination | 1.0 | | |
| · | under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used | | | |
| | to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ | | | |
| | purposes. | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If</i> "Yes," | | | |
| | answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN | | | |
| | numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; | | | |
| | (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action | | | |
| | was accomplished (such as by amendment to the organizing document). | 5a | | |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already | | | |
| | designated in the organization's organizing document? | 5b | | |
| С | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to | | | |
| | anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited | | | |
| | by one or more of its supported organizations, or (iii) other supporting organizations that also support or | | | |
| | benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor | | | |
| | (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity | | | |
| | with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line | | | |
| | 7? If "Yes," complete Part I of Schedule L (Form 990). | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more | | | |
| | disqualified persons, as defined in section 4946 (other than foundation managers and organizations | | | |
| | described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI . | 9a | | |
| b | Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which | | | |
| | the supporting organization had an interest? If "Yes," provide detail in Part VI. | 9b | | |
| С | Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit | | | |
| | from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. | 9с | | |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section | | | |
| | 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated | | | |
| | supporting organizations)? If "Yes," answer line 10b below. | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to | | | |
| | determine whether the organization had excess business holdings.) | 10b | | |

Schedule A (Form 990) 2023 Page 5 Civil Eats 84-4826419 Part IV Supporting Organizations (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? 11 A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11a 11c below, the governing body of a supported organization? 11b A family member of a person described on line 11a above? A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, 11c provide detail in Part VI. Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 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 Section C. Type II Supporting Organizations No Yes 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 Section 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 1 organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 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 instructions). Yes 2 No Activities Test. Answer lines 2a and 2b below. 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 2a that these activities constituted substantially all of its activities.

b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

2b Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.

3a 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.

Schedule A(I

<u>Schedule A (Form 990) 2023</u> <u>Civil Eats</u> <u>84-4826419</u> Page 6

| Part | V Type III Non-Functionally Integrated 509(a)(3) Supporting Or | gar | iizations | |
|------|---|--------|--------------------------|-------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | g tru | st on Nov. 20, 1970 (exp | lain in Part VI). See |
| | instructions. All other Type III non-functionally integrated supporting organ | izat | ions must complete Sect | ions A through E. |
| Sect | on A - Adjusted Net Income | | (A) Prior Year | (B) Current Year |
| | on A - Aujusteu Net Income | | (A) I IIOI Teal | (optional) |
| 1_ | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3. | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or collection | | | |
| | of gross income or for management, conservation, or maintenance of | | | |
| | property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Sect | on B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year): | | | |
| a | Average monthly value of securities | 1a | | |
| | Average monthly cash balances | 1b | | |
| C | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| е | Discount claimed for blockage or other factors | | | |
| | (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d. | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, | | | |
| | see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by 0.035. | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | on C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | | |
| 2 | Enter 0.85 of line 1. | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3. | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| | emergency temporary reduction (see instructions). | 6 | | |
| 7 | Check here if the current year is the organization's first as a non-functional | ally i | ntegrated Type III suppo | rting organization |
| | (see instructions). | | | |

EEA Schedule A (Form 990) 2023

EEA

| | e A (Form 990) 2023 Civil Eats | 2) Supposition Overs | 84-4 | | 6419 Page 7 | | |
|-------|--|----------------------------|--------------------|------------|---------------------------|--|--|
| Part | , , , , , , , , , , , , , , , , , , , | 3) Supporting Organ | izations (continue | <i>∋a)</i> | Commant Vacu | | |
| Secti | on D - Distributions | | | | Current Year | | |
| 1 | Amounts paid to supported organizations to accomplish e | xempt purposes | | 1 | | | |
| 2 | Amounts paid to perform activity that directly furthers exer | mpt purposes of suppor | ted | | | | |
| | organizations, in excess of income from activity 2 | | | | | | |
| 3_ | Administrative expenses paid to accomplish exempt purpo | 3 | | | | | |
| 4 | Amounts paid to acquire exempt-use assets | | | 4 5 | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | | | | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | 6 | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | 7 | | | |
| 8 | Distributions to attentive supported organizations to which | n the organization is resp | oonsive | | | | |
| | (provide details in Part VI). See instructions. | | | 8 | | | |
| 9 | Distributable amount for 2023 from Section C, line 6 | | | 9 | | | |
| 10 | Line 8 amount divided by line 9 amount | | | 10 | | | |
| | | (i) | (ii) | | (iii) | | |
| Secti | on E - Distribution Allocations (see instructions) | Excess Distributions | Underdistribution | าร | Distributable | | |
| | | ZXCCCC ZICLIDULICIIC | Pre-2023 | | Amount for 2023 | | |
| 1_ | Distributable amount for 2023 from Section C, line 6 | | | | | | |
| 2 | Underdistributions, if any, for years prior to 2023 | | | | | | |
| | (reasonable cause required - explain in Part VI). See | | | | | | |
| | instructions. | | | | | | |
| 3_ | Excess distributions carryover, if any, to 2023 | | | | | | |
| a | From 2018 | | | | | | |
| b | From 2019 | | | | | | |
| C | From 2020 | | | | | | |
| d | From 2021 | | | | | | |
| е | From 2022 | | | | | | |
| f | Total of lines 3a through 3e | | | | | | |
| g | Applied to underdistributions of prior years | | | | | | |
| h | Applied to 2023 distributable amount | | | | | | |
| i_ | Carryover from 2018 not applied (see instructions) | | | | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | | | | |
| 4 | Distributions for 2023 from | | | | | | |
| | Section D, line 7: \$ | | | | | | |
| a | Applied to underdistributions of prior years | | | | | | |
| b | Applied to 2023 distributable amount | | | | | | |
| С | Remainder. Subtract lines 4a and 4b from line 4. | | | | | | |
| 5 | Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h | | | | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | | | | |
| | Part VI. See instructions. | | | | | | |
| 7 | Excess distributions carryover to 2024. Add lines 3j | | | | | | |
| | and 4c. | | | | | | |
| 8 | Breakdown of line 7: | | | | | | |
| a | Excess from 2019 | | | | | | |
| b | Excess from 2020 | | | | | | |
| С | Excess from 2021 | | | | | | |
| d | Excess from 2022 | | | | | | |
| е | Excess from 2023 | | | | | | |

Schedule A (Form 990) 2023 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI 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 D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

2023

Open to Public Inspection

Name of the organization Employer identification number Civil Eats 84-4826419 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . . . Aggregate value of grants from (during year) 3 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included on line 2a Number of conservation easements included on line 2c. acquired after July 25, 2006, and not Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

| Par | t III Organizations Maintaining | Collections of A | Art, Hi | storical | Treasures, | or O | ther Similar A | ssets (co | ontinued |
|--------|--|-------------------------|-------------|---------------|------------------|-----------|----------------------|-------------|------------|
| 3 | Using the organization's acquisition, accessi | on, and other record | s, check | any of the | following that i | make si | gnificant use of its | | |
| | collection items (check all that apply): | | | | | | | | |
| а | Public exhibition | | d | Loan o | r exchange pr | ogram | | | |
| b | Scholarly research | | е | Other | | | | | |
| С | Preservation for future generations | | | _ | | | | | |
| 4 | Provide a description of the organization's co | ollections and explair | n how the | ey further th | ne organization | n's exen | npt purpose in Part | t | |
| | XIII. | • | | , | Ü | | | | |
| 5 | During the year, did the organization solicit of | or receive donations of | of art. his | torical trea | sures. or othe | r similar | • | | |
| | assets to be sold to raise funds rather than t | | | | | | | . Tyes | □No |
| Par | | | | <u> </u> | | | | | |
| | Complete if the organization 990, Part X, line 21. | | on Fo | m 990, F | Part IV, line | 9, or 1 | reported an am | nount on | Form |
| 1a | Is the organization an agent, trustee, custod | ian or other intermed | iary for o | ontribution | s or other ass | ets not | | | |
| | included on Form 990, Part X? | | | | | | | . Yes | ☐ No |
| b | If "Yes," explain the arrangement in Part XIII | and complete the fol | lowing ta | able. | | | | _ | _ |
| | , | | | | | | Am | ount | |
| С | Beginning balance | | | | | . 1c | ; | | |
| d | Additions during the year | | | | | | 1 | | |
| е | Distributions during the year | | | | | | | | |
| f | Ending balance | | | | | | - | | |
| 2a | Did the organization include an amount on F | | | | | | | . Yes | No |
| b | If "Yes," explain the arrangement in Part XIII | | | | | | | | Ħ. |
| Par | | | | | <u> </u> | | | | |
| | Complete if the organization | answered "Yes" | on Fo | m 990, F | Part IV, line | 10. | | | |
| | ' ' | (a) Current year | | rior year | (c) Two years | | (d) Three years back | (e) Four | ears back |
| 1a | Beginning of year balance | (a) Current your | (5) | nor your | (c) Two years | buok | (a) Times years back | (6) 1 541) | youro buok |
| b | Contributions | | | | | | | + | |
| | Net investment earnings, gains, and | | | | | | | _ | |
| С | losses | | | | | | | | |
| 4 | | | | | | | | + | |
| d | Grants or scholarships | | | | | | | | |
| е | Other expenditures for facilities and | | | | | | | | |
| | programs | | | | | | | _ | |
| f | Administrative expenses | | | | | | | | |
| g | End of year balance | | | | <u> </u> | | | | |
| 2 | Provide the estimated percentage of the cur | - | e (line 1 | g, column (a | a)) held as: | | | | |
| а | Board designated or quasi-endowment | | | | | | | | |
| b | Permanent endowment% | | | | | | | | |
| С | Term endowment% | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c sho | | | | | | | | |
| 3a | Are there endowment funds not in the posse | ession of the organiza | ation that | are held a | nd administere | ed for th | е | _ | |
| | organization by: | | | | | | | | Yes No |
| | (i) Unrelated organizations? | | | | | | | . 3a(i) | |
| | (ii) Related organizations? | | | | | | | - 3a(ii) | |
| b | If "Yes" on line 3a(ii), are the related organiz | ations listed as requi | red on S | chedule R? | · | | | . 3b | |
| 4 | Describe in Part XIII the intended uses of the | | wment f | unds. | | | | | |
| Par | 3-7-1 | | _ | | | | | 5 ()(| 4.0 |
| | Complete if the organization | answered "Yes" | on Fo | m 990, F | art IV, line | 11a. S | see ⊦orm 990, | Part X, li | ne 10. |
| | Description of property | (a) Cost or other | | 1 ' ' | or other basis | | Accumulated | (d) Book | value |
| | | (investmer | nt) | 1 (| other) | de | epreciation | | |
| 1a | Land | | | 1 | | | | | |
| b | Buildings | | | 1 | | | | | |
| С | Leasehold improvements | . • | | | | | | | |
| d | Equipment | | | | | | | | |
| ее | OtherSTMD1E | . | | | 25,335 | | 14,857 | | 10,478 |
| Total. | Add lines 1a through 1e. (Column (d) must ed | gual Form 990, Part X | (, line 10 | c, column (| B) | | | : | 10,478 |

| D /F | | | _ 2 |
|---------------------------|------------|------------|--------|
| chedule D (Form 990) 2023 | Civil Eats | 84-4826419 | Page 3 |

| Schedule D (For | | | | | 84- | 4826419 | Page |
|-----------------|--|----------------|--------------|-----------------|---------------|--|----------|
| Part VII | Investments - Other Securities | | | | _ | | |
| | Complete if the organization answere | d "Yes" on Fo | m 990, Par | t IV, line 11t | o. See Form | 990, Part X, | line 12. |
| | (a) Description of security or category (including name of security) | | (b) Book va | lue | | hod of valuation: -of-year market value | |
| (1) Financial | derivatives | | | | | | |
| (2) Closely-he | eld equity interests | | | | | | |
| (3) Other | | | | | | | |
| (A) | | | | | | | |
| (B) | | | | | | | |
| (C) | | | | | | | |
| (D) | | | | | | | |
| (E) | | | | | | | |
| (F) | | | | | | | |
| (G) | | | | | | | |
| (H) | | | | | | | |
| Part VIII | n (b) must equal Form 990, Part X, line 12, col.(B)) Investments - Program Related | | 000 Dav | + IV / line 444 | Coo Forms | 000 Dest V | line 10 |
| | Complete if the organization answere | d tes on Fo | III 990, Par | Try, lifte 110 | . See Form | 990, Part A, | iiie is. |
| | (a) Description of investment | | (b) Book va | lue | ` ' | thod of valuation: | |
| (4) | | | | | Cost or end | -of-year market value | |
| (1) (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
| (5) | | | | | | | |
| (6) | | | | | | | |
| (7) | | | | | | | |
| (8) | | | | | | | |
| (9) | | | | | | | |
| | n (b) must equal Form 990, Part X, line 13, col. (B) |) | | | | | |
| Part IX | Other Assets | , | • | • | | | |
| | Complete if the organization answere | ed "Yes" on Fo | rm 990, Par | t IV, line 11d | d. See Form | 990, Part X, | line 15. |
| | (a) D | escription | | | | (b) Book | value |
| (1) | | | | | | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
| (5) | | | | | | | |
| (6) | | | | | | | |
| (7) | | | | | | | |
| (8) | | | | | | | |
| (9) | n /h) must squal Form 000. Part V. line 15 act. /PI | 1 | | | | | |
| Part X | n (b) must equal Form 990, Part X, line 15 col. (B)) Other Liabilities | | | | | | |
| Turk | Complete if the organization answere line 25. | ed "Yes" on Fo | rm 990, Par | t IV, line 11e | e or 11f. See | e Form 990, P | Part X, |
| 1. | (a) Description of liability | (b) Book | value | | | | |
| | income taxes | (2) 2001 | | | | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
| (5) | | | | | | | |
| (6) | | | | | | | |
| (7) | | | | | | | |
| (8) | | | • | | | | |
| (9) | | | · · · | | | | |
| Total. (Column | (b) must equal Form 990, Part X, line 25 col. (B)) | | | | | | |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

| | e D (Form 990) 2023 | | | | 26419 Page 4 |
|-----------------|--|----------|--------------------------|----------|---------------------|
| Part | · | | - | Retu | ırn |
| | Complete if the organization answered "Yes" on Form 990, F | | | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 1,302,342 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | I | | |
| а | Net unrealized gains (losses) on investments | 2a | | _ | |
| b | Donated services and use of facilities | 2b | 14,080 | - | |
| С | Recoveries of prior year grants | 2c | | - | |
| d | Other (Describe in Part XIII.) | 2d | | | |
| е | Add lines 2a through 2d | | | 2e | 14,080 |
| 3 | Subtract line 2e from line 1 | | | 3 | 1,288,262 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | ١. | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | - | |
| b | Other (Describe in Part XIII.) | 4b | | + | |
| _ C | Add lines 4a and 4b | | | 4c | |
| 5 Dort | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.). | | | 5 | 1,288,262 |
| Part | · | | | er Re | eturn |
| | Complete if the organization answered "Yes" on Form 990, F | | | | |
| 1 | Total expenses and losses per audited financial statements | | | 1 | 968,497 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | ء ا | l | | |
| a | Donated services and use of facilities | 2a | 14,080 | - | |
| b | Prior year adjustments | 2b | | _ | |
| C | Other losses | 2c | | _ | |
| d | Other (Describe in Part XIII.) | 2d | | ١ | |
| е | Add lines 2a through 2d | | | 2e | 14,080 |
| 3 | Subtract line 2e from line 1 | · · · | | 3 | 954,417 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | ١ | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | - | |
| b | Other (Describe in Part XIII.) | 4b | | - | |
| C | | | | 4c 5 | 054 415 |
| 5 Part | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) - XIII Supplemental Information | • • • | | <u> </u> | 954,417 |
| | e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, | lingo 1 | h and 2h: Dart V line 4: | Dort V | lino |
| | XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide al | | | Part X, | iine |
| | | - | ilionai imormation. | | |
| 01. 1 | Footnote for uncertain tax position under FIN 48 (Part | X) | | | |
| ٠ ـ ـ ـ ـ ـ ـ ـ | | | 1/->/2> -£ +1- = | - | 1 D G-1- |
| CIVI. | LEats is exempt from federal income taxes under Section | n 50 | I(C)(3) OF the I | nter | nai kevenue Code |
| mba. | | | L | | |
| rne a | accounting standard on accounting for uncertainty in in | come | taxes addresses | tne | determination of |
| b.a.+1 | now tour homofite elaimed on aumosted to be elaimed on a | + | maturn abould b | | gondod in the |
| wiieti | ner tax benefits claimed or expected to be claimed on a | Lax | return should i | е ге | corded in the |
| £: | agial statements. Index that suidense Sivil Ests way w | | nisa the ter bes | | from an |
| Linai | ncial statements. Under that guidance, Civil Eats may r | ecog. | nize the tax ber | ieiit | Irom an |
| | tain tax position only if it is more likely than not t | ha+ : | the tow medition | 1 | l be gugtained or |
| uncei | tain tax position only if it is more likely than not t | IIat | the tax position | 1 MIT | 1 De Sustained Or |
| owam: | ination by taxing authorities based on the technical me | ~i+a | of the position | . Ev | amples of tax |
| елаш. | nation by taxing authorities based on the technical me | IILS | or the position | I. EX | ampies of tax |
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SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

84-4826419 Civil Eats 01. Form 990 governing body review (Part VI, line 11) FORM 990 IS DISTRIBUTED TO THE BOARD PRIOR TO FILING. 02. Conflict of interest policy compliance (Part VI, line 12c) BOARD MEMBERS DISCLOSE AND REVIEW POTENTIAL CONFLICTS OF INTEREST ANNUALLY. 03. CEO, executive director, top management comp (Part VI, line 15a) BOARD REVIEWS THE PERFORMANCE OF THE EXECUTIVE DIRECTOR ANNUALLY AND CALIBRATES COMPENSATION BASED UPON RESEARCH 04. Governing documents, etc, available to public (Part VI, line 19) THE ORGANIZATION MAKES PUBLIC DOCUMENTS AVAILABLE UPON REQUEST. 05. List of other fees for services expenses (Part IX, line 11g) \$145,059 Contractors for Stories Other Professional Fees \$ 12,590 Fundraising Consultant \$ 13,425 \$ 14,080 In-Kind Expense

| | Statement of Program Service Accomplishments | 2023 PG01 |
|----------------------------|--|-----------------------------|
| Name(s) as shown on return | | Your Social Security Number |
| Civil Eats | | 84-4826419 |

Form 990-Part III(a) Statement of Service Accomplishment

Statement #4

Program Service Code

Program Service Expenses \$719347

Grants and allocations included in above expense \$1213

Program Services Revenue \$3250

Explanation

Since 2009, Civil Eats, an independent, nonprofit digital news site about the American food system, has focused on high-quality, original journalism which breaks news, educates leaders and policymakers, and serves as a resource for broader mainstream media. Civil Eats brings a clear and compelling voice to a complex range of issues. Our 15 years of reporting experience has shown that complicated and often underreported stories on climate, the environment, social justice, and on policy issues such as health and nutrition, are all made more accessible to a mainstream audience through our nuanced, solutions-oriented reporting. For the first four years, Civil Eats operated with no funding and as a labor of love. Today, Civil Eats has achieved significant impact and reach: It raised an unprecedented \$100,000 via Kickstarter in 2013, was named Publication of the Year in 2014 by the prestigious James Beard Foundation, inducted into the Library of Congress in 2019, won the International Association of Culinary Professionals (IACP) Digital Media Award for Best Group Food Blog in 2020, won a 2022 IACP Award for best newsletter for our members-only monthly column, The Deep Dish, which also won an Online News Association award for best newsletter in 2024. Civil Eats has reported on some of the most important food and agriculture stories of our time. Unique in the media landscape, food justice has been central to its reporting since its inception. Civil Eats collaborates with high-profile print and online publications, and these partnerships bring Civil Eats' important stories to millions of new readers, expanding the dialogue on economic and social justice. The site is on the regular reading lists of policymakers in D.C. and grassroots leaders alike, and its stories appear in daily news roundups, and are shared on social media by elected officials. In 2023, Civil Eats published 200 articles with more than 80 reporters and was nominated for and received numerous awards. In 2023, Civil Eats was awarded and/or named a finalist for more than a dozen awards and accolades. For the second year in a row, Civil Eats was named a Micro Newsroom Finalist by the Online News Association for the Online Journalism Awards, the global prizes that honor excellence in digital journalism. Civil Eats launched an investigations desk in 2022, and has won and been nominated for many awards for the stories reported on since then, including a 2023 James Beard Foundation Media Award for excellence in investigative reporting for the 2022 investigation series on animal agriculture workers, Injured and Invisible. In 2023, Civil Eats undertook a year-long investigative series on Walanthropy: Walmart and the Waltons Wield Unprecedented Influence Over Food, Policy, and the Planet. We took a detailed look at Walmart and its founding family's influence over the American food system, over the producers and policymakers who shape it, and how its would-be critics are also its bedfellows. The investigation was nominated for a 2024 James Beard award excellence in investigative reporting and received numerous other awards. One if its story, "Black Farmers in Arkansas Still Seek Justice a Century After the Elaine Massacre," was selected for inclusion in Best American Food Writing 2023, guest edited by Mark Bittman. In 2023, Civil Eats also undertook a year-long transition reorganization, with key staff assuming new duties to allow for continued and sustained growth. The result was a new organization chart in 2024, with additional employees. In addition, new board members have been cultivated. In a fraught media landscape, Civil Eats has withstood the shocks faced by many larger and more deeply funded news oulets. It has stood the test of time, proving itself to be an extremely careful steward of its funding, and a groundbreaking thought-leader in this space.

| | Statement of Program Service Accomplishments | 2023 PG01 |
|----------------------------|--|-----------------------------|
| Name(s) as shown on return | | Your Social Security Number |
| Civil Eats | | 84-4826419 |

Form 990-Part III(b) Statement of Service Accomplishment

Statement #4

Program Service Code

Program Service Expenses \$0

Grants and allocations included in above expense \$0

Program Services Revenue \$0

Explanation

| | | F | FOR YOUR RECOR | | | 2023 | PG01 |
|--|--|---|----------------|------------|----|-------------|------------|
| Name(s) as shown on return | | | | | | Tax ID Numb | per |
| Civil Eats | | | | | | { | 84-4826419 |
| Form 990 - Schedule D - Part VI - Line 1e statement #Dle Investments - Other | | | | | | | |
| Description | | | Cost/basis | Cost/basis | | | Book |
| of Investment | | | (Investment) | (Other) | Ι | Depr | Value |
| Website | | | 0 | 25,335 | | 4,723 | 20,612 |
| Total | | | 0 | 25,335 | 4, | ,723 | 20,612 |