Form **990**

Department of the Treasury Internal Revenue Service

832001 12-31-18

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

Form 990 (2018)

▶ Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2018 calendar year, or tax year beginning and ending Check if C Name of organization D Employer identification number GMA Science and Education X Address Foundation Name change 52-2088235 Doing business as Initial E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Final return/ termin-ated 571-378-6760 1001 19th Street North, 7th Floor City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended Arlington, VA 22209 H(a) Is this a group return Applica-F Name and address of principal officer Mr. Geoff Freeman Yes X No for subordinates? same as C above ☐Yes L H(b) Are all subordinates included? 501(c) Tax-exempt status X 501(c)(3) 4947(a)(1) or If "No." attach a list (see instructions)) (insert no.) Website: ▶ part of www.gmaonline.org **H(c)** Group exemption number ▶ Form of organization X Corporation Trust Association 1 Other > Year of formation: 1998 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities Catalyze the improvement of Governance global food safety inspiring the trust of the world's consumers. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 8 Number of independent voting members of the governing body (Part VI, line 1b) 5 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 0 6 Total number of volunteers (estimate if necessary) Ō. 7 a Total unrelated business revenue from Part VIII, dolumn (C) 7a 2,642. b Net unrelated business taxable income from Form 990-1 Vine \$8 **Prior Year Current Year** 248,820. 269,866. Contributions and grants (Part VIII, line 1h) 370,463. 358,860. Program service revenue (Part VIII, line 2g) 8,991 20,030. Investment income (Part VIII, column (A), lines \$ 261,806. 267,372. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c 884,043. 922,165. Total revenue - add lines 8 through 11 (must equal Part VIII 25,000. 500. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 557,767, 562,353. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Ô. 16a Professional fundraising fees (Part IX, column (A), line 11e) 43,005. b Total fundraising expenses (Part IX, column (D), line 25) 461,310. 466,654. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f/24e) 18 Total expenses Add lines 13-17 (must equal Part IX, column (ARIDECE IVED) 1.044.077. 029,507. -107,342. -160,034. Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year** End of Year 1,266,399. 1,413,472. 20 Total assets (Part X, line 16) 335,581. 295,850. Total liabilities (Part X, line 26) OGDEN 1,077,891. 970,549. Net assets or fund balances Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of Inseparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Mr. Bill Pappas, GMA VP & Controller Treasurer, Here Type or print name and title Print/Type preparer's name Thomas J. Raffa[.] P00916458 Paid 11-1986323 ▶ Marcum LLP Firm's EIN Preparer Firm's name Firm's address \ 1899 L Street, Suite NW, Use Only Phone no. (202) 227-4000 Washington, DC 20036 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

GMA Science and Education Foundation

Form	1 990 (2018) Foundation 5:	2-2088235	Page 2
	rt: Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission.		
	The Foundation delivers innovative research, state-of-the-a		ng
	and best-in-class education programs to the food industry		
	consumers and, thereby, contributes to the delivery of high		
	safe food and consumer products. The Foundation also serve	es to	
2	Did the organization undertake any significant program services during the year which were not listed on the		(TF)
	prior Form 990 or 990 EZ?	L Yes	X No
	If "Yes," describe these new services on Schedule O		(48.)
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as mea		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	ie total expenses, a	nd
	revenue, if any, for each program service reported		060
4a		632,	<u> 269.</u>)
	Research projects seek to increase knowledge in food safet		
	science and benefit members of the Grocery Manufacturers A	ssociation	<u>as</u>
	well as the general public.		
4b	(Code) (Expenses \$) (Revenue \$))
			_
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
			<u> </u>
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 730,671.		

GMA Science and Education Foundation equired Schedules

•	GMA Science and Education	NB	アア	ノー	7
Form		2088	235	Р	age 3
Par	Checklist of Required Schedules				
<u> </u>				Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	[
•	If "Yes," complete Schedule A		1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	or			
_	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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,	or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right t	to I			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D,		6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,				
·	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete				
•	Schedule D, Part III		8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	r I			
•	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	ļ	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, perma	nent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or	rx			
•	as applicable				
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule				
_	Part VI	, I	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	l			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		11b		Х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total				
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		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		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		11f	Х	ļ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yos," complete				
	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	ss,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,0	00			1
	or more? If "Yes," complete Schedule F, Parts I and IV		14b	l	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any				
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	ł	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to				
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		16	İ	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		17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, line	es .			
	1c and 8a? If "Yes," complete Schedule G, Part II		18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes,"				
	complete Schedule G, Part III		19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		20a		Х
	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			I	
	domestic government on Part IX, column (A), line 12, if "Voc." complete Schodule I. Parts I and II.		21		x

GMA Science and Education Form 990 (2018) 52-2088235 Foundation Page 4 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Х Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X 23 Schedule J 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 Х 24a Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Х 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," X complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member X 27 of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a Х 28b b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, X director, trustee, or direct or indirect owner? If "Yes." complete Schedule L. Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? Х 31 If "Yes." complete Schedule N. Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 32 Schedule N. Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 X 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 35b 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 related organization? X 36 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Х Note. All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 8 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 1b **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

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			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	b.",	35.5					
	filed for the calendar year ending with or within the year covered by this return	7, 7, 7	1 24	, k				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	* 1 \ \	**	5 5				
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X					
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	X					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			٠				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	2 l n 1 1	X				
þ	If "Yes," enter the name of the foreign country	F 21	ti sar r t i r	7.1 1.1				
- -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<u> </u>	, ,	X				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b	_	X				
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30						
oa	any contributions that were not tax deductible as chantable contributions?	6a		x				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
_	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).	ary id.	, pl.	, , ,				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X				
b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year	· · , 25°	11	3) 3 ₂ 3				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>y</u>						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	· .	, i				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	10,215		***				
_	sponsoring organization have excess business holdings at any time during the year?	8	" 1	, ',				
9	Sponsoring organizations maintaining donor advised funds.	9a	2 11	1.5				
a I	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter	'F.	, , , ,	3 %				
	Initiation fees and capital contributions included on Part VIII, line 12		5 . x.	,				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	, ", ", ',		` ' ,				
11	Section 501(c)(12) organizations. Enter.	Zi i		` , '				
а	Gross income from members or shareholders		, ,	3 '44				
b	Gross income from other sources (Do not net amounts due or paid to other sources against] `;	, .	,				
	amounts due or received from them)	,,,,		-,				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	,}						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>	, ,	, 1				
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note. See the instructions for additional information the organization must report on Schedule O	' ' ' '	.,,					
b	Enter the amount of reserves the organization is required to maintain by the states in which the		· - · , ,	,				
	organization is licensed to issue qualified health plans	· '.	170 1					
_	Enter the amount of reserves on hand	14		V				
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yee," here it filed a Form 720 to report these payments? (fill the file of a form 720 to report these payments?)	14a		<u>X</u> _				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		x				
	If "Yes," see instructions and file Form 4720, Schedule N.	15		2				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
. •	If "Yes," complete Form 4720, Schedule O	<u> </u>	,					
		Form	aan	(2018)				

Foundation

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 9			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 8]		
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, or trustees, or key employees to a management company or other person?	3	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4_		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	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			<u> </u>
а	The governing body?	8a	Х	ļ
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 in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
þ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		ŀ	•
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Х
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		l	
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	ļ
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?			
	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			<u> </u>
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			ľ
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	<u> </u>		
	exempt status with respect to such arrangements?	16b	L	
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
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)	avaılat	ole
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)	_		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ıal	
	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	70	C77 C	^
	Mr. Bill Pappas, Board Treasurer and GMA VP & Controller - 571-3	/8-	0/6	U
	1001 19th St. North, 7th Floor, Arlington, VA 22209			

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

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

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

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

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

Check this box if neither the organization n	orga	nıza			npen	sate	ed any current officer, di					
(A) (B))			(D)	(E)	(F)		
Name and Title	Average	Position (do not check more than				than c	ne	Reportable	Reportable	Estimated		
	hours per	box	box, unless person officer and a direct			s both	an tee)	compensation	compensation	amount of		
	week						,	from the	from related organizations	other compensation		
	(list any hours for	direct				_		organization	(W-2/1099-MISC)	from the		
	related)e 01	ste			ısate		(W-2/1099-MISC)	(11 27 1000 111100)	organization		
	organizations	Individual trustee or director	Institutional trustee		Key employee	эшс		`		and related		
	below	ngna	totio	ie ie	empli	est co	Je.			organizations		
	line)	盲	Instr	Officer	Key	Highest compensated employee	Form					
(1) Geoff Freeman	0.50											
Board Chair [& GMA CEO AugDec.)	37.00	Х		Х				0.	530,551.	450,769.		
(2) Pamela Bailey	0.50											
Board Chair [& GMA CEO JanJuly)	37.00	X		Х				0.	4,689,270.	535,734.		
(3) Betsy Boren, Dir. (& GMA	1.00								45 444	640		
Sr. VP-Science & Tech. NovDec.)	36.50	X	ļ		ļ	ļ		0.	17,141.	642.		
(4) Leon Bruner, Dir. (& GMA	1.00	,,							414 462	227 002		
Chief Science Officer JanOct.) (5) Patrizia Barone	36.50	X	-			<u> </u>		0.	414,402.	237,883.		
(5) Patrizia Barone Director	0.50	X	İ					0.	0.	0.		
(6) Tim Haley	0.50	^	_		 	-		· · · · · · · · · · · · · · · · · · ·	0.			
Director	0.50	x			ļ			0.	0.	0.		
(7) Steven Hermansky	0.50		ļ				_	•	•			
Director		x						0.	0.	0.		
(8) Roger Lawrence	0.50								-			
Director		X					ŀ	0.	0.	0.		
(9) Sean Leighton	0.50											
Director		\mathbf{x}						0.	0.	0.		
(10) Jeff Miller	0.50											
Director		Х						0.	0.	0.		
(11) Jeff Semancheck	0.50	1										
Director		X		ļ		<u> </u>	L_	0.	0.	0.		
(12) Mary Tarver	0.50							_	_	_		
Director		X		<u> </u>			_	0.	0.	0.		
(13) Arthur Rosenberg	0.50								_	_		
Director		Х				_	ļ	0.	0.	0.		
(14) Bill Pappas, Board Treasurer	1.00											
(& GMA VP & Controller)	36.50	<u> </u>		Х		<u> </u>	ļ	0.	187,497.	55,604.		
(15) Steven Leslie, Board Secretary	0.50	-		,					114 055	10 561		
(& GMA DirProduct Liab.)	37.00	<u> </u>	_	X	<u> </u>			0.	114,077.	12,561.		
(16) Brian Bedard	37.50	1		,,				1 222	1	00 207		
Executive Director	27 50	├-	├-	Х	<u> </u>	 	├	219,333.	0.	28,307.		
(17) Weiyi Zhao	37.50	┨				,		111 725	_	10 075		
Director of Found, Operations	<u> </u>	<u> </u>	<u> </u>	<u> </u>		X		111,735.	0.	12,275.		

Part	VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	Hiç	ghes	t C	ompensated Employee	s (continued)				
	(A)	(B)			(0	C)			(D)	(E)		(F)		
	Name and title	Average hours per		not c		more	than d s both		Reportable compensation	Reportable compensation		_	timate nount	
		week	offic				r/trus		from	from related			other	•
		(list any hours for	Individual trustee or director				-		the organization	organization (W-2/1099-MIS			pensa om th	
		related	stee or	rustee			Highest compensated employee		(W-2/1099-MISC)	(,	org	anızat	ion
		organizations below	ua! tru:	Institutional trustee		Key employee	t comp	_				ļ.	d relat anızatı	
		line)	Judivid	Institu	Officer	Кеу еп	Hrghes emplo	Рог тег				O.g.	ar ii Zaari	5113
							<u> </u>	<u> </u>						
		• .												
			 											
			<u> </u>		<u> </u>									
						<u> </u>								
		<u> </u>	<u> </u>					\vdash						
			\vdash											
								<u> </u>		<u>-</u>				
	sub-total								331,068.	5,952,99	98.	13	337	75. 0.
	otal from continuation sheets to Part VI otal (add lines 1b and 1c)	I, Section A							331,068.	5,952,95		13	337	
	otal number of individuals (including but n	ot limited to th	ose	liste	d at	ove) wh	o re	·					
c	ompensation from the organization													2
	and the second s								hishaat sammanastad ar	anlavas an		-	Yes	No
	old the organization list any former officer, ne 1a? If "Yes." complete Schedule J for s		istee	э, ке	y en	npio	yee,	or i	nignest compensated er	npioyee on		3	- 1	X
	or any individual listed on line 1a, is the su		е со	mpe	ensa	tion	and	oth	ner compensation from t	ne organization			,	
	nd related organizations greater than \$150			-								4	Х	
	old any person listed on line 1a receive or a	-				•		elate	ed organization or individ	lual for services		5		X
	endered to the organization? If "Yes." com on B. Independent Contractors	iblete Schedule	9 <i>J T</i>	or st	ICN I	oers	on							
	complete this table for your five highest co	mpensated ind	lepe	nde	nt co	ontra	acto	rs th	nat received more than \$	100,000 of comp	oensa	tion fro	om	
tl	ne organization Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin		ear.				
	(A) Name and business	address	NO	ONE	3				(B) Description of s	ervices	C)) ompe		n
								_						
								\neg						
									<u> </u>					
	otal number of independent contractors (ii 100,000 of compensation from the organi	_	ot lır	nited	to to	thos)	_	ted	above) who received mo	ore than				

Page 9

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under sections 512 - 514 (C) Unrelated (B) Related or Total revenue exempt function business revenue revenue Federated campaigns Membership dues 1b c Fundraising events 1c 50,000. d Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and 219,866. similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ 269,866. Total. Add lines 1a-1f Business Code 256,446. 256,446. 2 a Contract fees 900099 114,017. 900099 114,017. b Instruction fees f All other program service revenue 370,463. Total. Add lines 2a-2f Investment income (including dividends, interest, and 20,030. 20,030. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses Rental income or (loss) d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less , direct expenses c Net income or (loss) from fundraising events .9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses . c Net income or (loss) from gaming activities Gross sales of inventory, less returns a 298,058 and allowances 43,031 b Less cost of goods sold 255,027. 255,027. Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a Other 6,779: 6,779. 900099 All other revenue 6,779. 這些問題的意思的 Total. Add lines 11a-11d 632,269. 922,165. 20,030 Total revenue See instructions

. Secti	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns All othe	er organizations must cor	mplète column (Λ)	ş 1
	· Check if Schedule O contains a respor				X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) : Total expenses	(B) Program service expenses	(C) : Management and general expenses	(D) Fundraising expenses
• 1	Grants and other assistance to domestic organizations	5.00	, F. O. O.		
	and domestic governments. See Part IV, line 21	500.	, 500 <u>.</u>		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	• ,			
3	Grants and other assistance to foreign	•	-		
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
. 4	Benefits paid to or for members				
^ .5	Compensation of current officers, directors,	262 200	151 267	01 526	19,406.
_	trustees, and key employees	262,309.	151,367.	91,536.	19,400.
, 6	Compensation not included above, to disqualified	.,			
	persons (as defined under section 4958(f)(1)) and		ω		
- -	persons described in section 4958(c)(3)(B)	240,029.	152,330.	76,795.	10,904.
ċ	Other salaries and wages	240,029.	132,330.	. 10,433.	10,304.
· 8	Pension plan accruals and contributions (include	20,472.	13,265.	~ .6 /12	795.
•	section 401(k) and 403(b) employer contributions) Other employee benefits	8,925.	5,447.	6,412. 2,965.	513.
. 9.	• •	30,618.	18,565.	10,232.	1,821.
.10	Payroll taxes	30,010.	10,303.	10,232.	1,021.
11	Fees for services (non-employees)	17,000.	10,308.	5,682.	1,010.
a	Management	17,000.	10,300.	3,002.	* 1,010.
b	Legal	68,543.	41,560.	22,907.	4,076.
C	Accounting	00,343.	41,300.	22,301.	- 4,0701
a	Lobbying " "				
e	Professional fundraising services. See Part IV, line 17				
,	Investment management fees Other (If line 11g amount exceeds 10% of line 25,			,	
. 9	column (A) amount, list line 11g expenses on Sch O.)	220,778.	216,990.	3,215.	573.
تـــــــــــــــــــــــــــــــــــــ	Advertising and promotion	4,257.	4,027.	195.	375. 35
12	Office expenses	55,343.	49,974.	4,558.	811.
13	Information technology	33,343.	45,574.	7. 1,330.	. 011.
14	Royalties -	-	• • •		,
15		23,138.	14,029.	7,734.	1,375.
16 17	Occupancy · · · · · · · · · · · · · · · · · · ·	38,634.	34,938.	3,118.	578.
		30,034.	34,330.	3,110.	3,00
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				•
19	Conferences, conventions, and meetings	6,325.	6,224.	, 86.	15.
	Interest	7,323.	*****		
21	Payments to affiliates	····	,		_
22_	_Depreciation,_depletion,_and_amortization	1,526.	925.	510.	91.
23	Insurance ,	11,265.	6,830.	3,765.	670.
24	Other expenses. Itemize expenses not covered				
•	above. (List miscellaneous expenses in line 24e. If line	indicate a second contribution of the contribu			
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Bad debt	14,250.	7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7	14,250.	39 780 7
b	Exhibitor fees	3,000.	1,819.	1,003.	178.
. 'c	Loss - F/A dispositions	2,595.	1,573.	868.	. 154.
d	,				,
. е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	1,029,507.	730,671.	255,831.	43,005.
26	Joint costs Complete this line only if the organization			•	
	reported in column (B) joint costs from a combined		,	! • .	
	educational campaign and fundraising solicitation.		* - *1		
	Check here If following SOP 98-2 (ASC 958-720)	•	, , , , , , , , , , , , , , , , , , ,	· · ·	<u> </u>
				-	Form 990 (2018)

Form 990 (2018)
Part X Balance Sheet

Pai	八人	Balance Sheet	1			
		Check if Schedule O contains a response or note	e to any line in this Part X	T		
-				(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing .		160,492.	1	80,768.
	2	Savings and temporary cash investments		1,168,245.	2	1,112,277
	3	Pledges and grants receivable, net		·	3	
	4	Accounts receivable, net	64,059.	4	49,753	
	` 5	Loans and other receivables from current and fo	rmer officers, directors,			
		trustees, key employees, and highest compensa	• •			30 44年5月7月
		Part II of Schedule L		5		
	6	Loans and other receivables from other disqualif	ied persons (as defined under	是这种意思的。		
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing		3.5	
		employers and sponsoring organizations of section	on 501(c)(9) voluntary			
ş		employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7		
ĕ	8	Inventories for sale or use		16,555.	8	23,390
	· 9	Prepaid expenses and deferred charges		9	211	
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a 0.			
,	b.	Less accumulated depreciation	10b	4,121.	10c	
	11	Investments - publiclý traded securities		.3	11	1,
	12	Investments - other securities See Part IV, line 1		12		
	13	Investments program-related See Part IV, line 1		·13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	•	-	15	
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	1,413,472.	16	1,266,399
	17 :	Accounts payable and accrued expenses	•	127,999.	17	183,986.
	18	Grants payable	227 522	18	444 064	
	19	Deferred revenue		207,582.	19	111,864
	20	Tax-exempt bond liabilities	`		20	
	21	Escrow or custodial account liability. Complete F		The state of the S	21	with a constitution of the wife of contraction in
Se	22 ″	Loans and other payables to current and former			TKE K	
		key employees, highest compensated employee	s, and disqualified persons	三种原位现代的基础的		
Liabilities	•	Complete Part II of Schedule L	•		22	
_	23	Secured mortgages and notes payable to unrela			23	,
-	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, pa		`		
		parties, and other liabilities not included on lines	17-24) Complete Part X of			,
		Schedule D	•	225 501	25	205 050
	26	Total liabilities. Add lines 17 through 25	······································	335,581.	26	295,850
		Organizations that follow SFAS 117 (ASC 958				
es		complete lines 27 through 29, and lines 33 and	d 34.	1,077,891.	4.54.16	970,549.
auc	27	Unrestricted net assets	··· ·	1,077,031.	27	310,343
Bal	28	Temporarily restricted net assets			28	
Fund Balances	29	Permanently restricted net assets	, o o o o o o o o o o o o o o o o o o o		29	Emploid deriver in the first filter of the second of the s
		Organizations that do not follow SFAS 117 (AS	SC 958), check here			
o		and complete lines 30 through 34.		就去10万亿元。10万元的第一位。1		THE PARTY OF THE P
sets	30	Capital stock or trust principal, or current funds	,		30	
As	31	Paid-in or capital surplus, or land, building, or eq			31	
Net Assets or	32	Retained earnings, endowment, accumulated inc	come, or other funds	1 077 901	32	070 540
-	33	Total net assets or fund balances		1,077,891.	33	970,549
	34	Total liabilities and net assets/fund balances		1,413,472.	34	1,266,399. Form 990 (2018

Earn	GMA Science and Education 1990 (2018) Foundation	52-	-2088235	- Γ	ige 12
	rt XI Reconciliation of Net Assets	74	-2000233	Pa	ge Z
L	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	92	2,1	65.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,02	9,5	07.
3	Revenue less expenses Subtract line 2 from line 1	3	-10	7,3	42.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,07	7,8	91.
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 in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	İ			
	column (B))	10	97	0,5	49.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			,	X
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			ļ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	ł		
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O		<u> </u>	1
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Auc	dit		
	Act and OMB Circular A-133?		3a	L	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed aud	lit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2018)

832012 12-31-18

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2018

Open to Public Inspection

0.

Name of the organization Employer identification number GMA Science and Education Foundation 52-2088235 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). A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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). 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) 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 university 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g X Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iv) is the organization listed (i) Name of supported (ii) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1 10 support (see instructions) support (see instructions) organization Yes Nο above (see instructions)) Grocery Manufacturers Association 53-0114930 X 0. 0. 10 Note that the supported organization is a 501(c)(6)

agaic.	(Complete only if you checke fails to qualify under the tests			_	n failed to qualify u	nder Part III. If the o	organization
Sec	tion A. Public Support		· · · · · · · · · · · · · · · · · · ·	·			
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and		197 = 0.10	(6) 20 . 0	(4) 20	(0, =0.10	
	membership fees received (Do not			,			
	include any "unusual grants.")		1				
2	Tax revenues levied for the organ-			,			
	ization's benefit and either paid to	-		~			
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to			<i>r</i>			
	the organization without charge					. ,	
4	Total. Add lines 1 through 3					to the first with the property of	·
5	The portion of total contributions						
	by each person (other than a			7			
	governmental unit or publicly						
	supported organization) included			/			
	on line 1 that exceeds 2% of the						
	amount shown on line 11,			/ /			
_	column (f)						
	Public support. Subtract line 5 from line 4	10.4、社会外的基础的相对分别分词		[61] 19% R [814, 35% 40]	CANCES OF STANSFER		
	· · · · · · · · · · · · · · · · · · ·	(a) 2014	(b) 2015 /	(c) 2016	(d) 2017	(e) 2018	(f) Total
	ndar year (or fiscal year beginning in) Amounts from line 4	(a) 2014	(b) 2013	(6) 2010	(0) 2017	(e) 2010	(i) Total
8	Gross income from interest,					,	
0	dividends, payments received on		c,			,	
	securities loans, rents, royalties,						
	and income from similar sources	1					
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10	部。在《新疆》	知的多多的	3.87444444444444444444444444444444444444	建位的特别数据的 是		
12	Gross receipts from related activities,	etc (see instruction	ons)			12	
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ix year as a section	1 501(c)(3)	
<u> </u>	organization, check this box and sto						
	tion C. Computation of Publ			,	-		
	Public support percentage for 2018 (/	· ·	olumn (f))	-	14	<u>%</u>
	Public support percentage from 2017					15	<u> </u>
16a	33 1/3% support test - 2018. If the				14 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies				lene 15 to 22 1/20/	ar mara abaak thia	▶ ∟
Ľ	33 1/3% support test - 2017. If the	=			ine 15 is 33 1/3%	or more, check this	. DOX
4-	and stop here. The organization qual	•	• • •		12 160 or 16h -	and line 14 is 100/ a	r more
1/a	10% -facts-and-circumstances test						
	and if the organization meets the "fact					re viriow trie organi	ZaliOII
	meets the "facts-and-circumstances"	-		• • •	-	17a and line 15 is 1	₽
C	 10% -facts-and-circumstances test more, and if the organization meets the 	-					070 OI
	organization meets the "facts-and-circ						▶□
18	Private foundation. If the organization		=		-		

Schedule A (Form 990 or 990 EZ) 2018 Foundation

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) 🕨 📘	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 per-	İ					1
formed, or facilities furnished in	i					
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-	ı			/	1	
iness under section 513						1
				 		
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf	_			1/		
5 The value of services or facilities				Y		
furnished by a governmental unit to			/			
the organization without charge			//			
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and				İ		
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that			Y			1
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		/	1			
c Add lines 7a and 7b						
8 Public support. (Subtract line 7¢ from line 6)		/				
Section B. Total Support				1		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	(a) 2014	(6) 2013	(0) 2010	(0) 2017	(6) 2010	(i) Totar
10a Gross income from interest,		/	 			···
dividends, payments received on		/				
securities loans, rents, royalties,	/	ſ		1		
and income from similar sources						
b Unrelated business taxable income	/				1	
(less section 511 taxes) from businesses	/					
acquired after June 30, 1975	/				<u> </u>	
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b,	/				}	
whether or not the business is regularly carried on	/				-	
12 Other income Do not include gain	/				- 121111	· · · · · · · · · · · · · · · · · · ·
or loss from the sale of capital	/				1	
assets (Explain in Part VI)	 	<u> </u>			†	
13 Total support. (Add lines 9, 10c, 11, and 12)		5	1.6 11 .661.1		504(-)(0)	
14 First five years. If the Form 990 is for	ne organization's	s tirst, second, thir	α, tourth, or tiπh t	ax year as a section	n 501(c)(3) organiza	ation,
check this box and stop here Section C. Computation of Public	Support Do	· · · · · · · · · · · · · · · · · · ·				
					T I	•
15 Public support percentage for 2018 (lin			column (t))		15	%
16 Public support percentage from 2017 S				 	16	%
Section D. Computation of Invest						
17 Investment income percentage for 201	I 8 (l ine 10c, colur	nn (f), divided by l	ine 13, column (f))		17	%
18 Investment income percentage from 20	017 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2018. If the c	organization did r	not check the box	on line 14, and line	e 15 is more than :	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and	stop here. The	organization qual	ifies as a publicly s	supported organiza	ation	▶□
b 33 1/3% support tests - 2017. If the c	-	-				and
line 18 is not more than 33 1/3%, check	-					▶□
20 Private foundation. If the organization		-				. ▶□

Schedule A (Form 990 or 990 EZ) 2018 Foundation

Part IV

Supporting Organizations

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

Section A. All Supporting Organizations

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

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		Yes	No
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	9c		Х
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	dule A (Form 990 or 990 EZ) 2018 Foundation	52-2088235	Pa	age 5
	Supporting Organizations (continued)			
	•	<u>.</u>	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
. а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	A LEGALANTON		
	below, the governing body of a supported organization?	11a		Х
b	A family member of a person described in (a) above?	11b		Х
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		X
Sec	tion B. Type I Supporting Organizations			
	•	Mari Vet	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		70	
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1,00,000 000 000	X X	nateries servi
-2	Did the organization operate for the benefit of any supported organization other than the supported			
1	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	. E254016413		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	#25#.CL	enai	25 T
	supervised, or controlled the supporting organization.	2		X
Sec	tion C. Type II Supporting Organizations			
		J.Engagerrat (IR)	Yes	No
. 1 ,	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			阿斯克斯
	the supported organization(s).			<u> </u>
Sec	tion D. All Type III Supporting Organizations			
		16-10-10-10-10-10-10-10-10-10-10-10-10-10-	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			NAME OF THE PERSON NAME OF THE P
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	THE SAN		53°P-5804
, _	organization's governing documents in effect on the date of notification, to the extent not previously provided?		wai	并提供。
. 2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2	The Oak	L. M. P. C.U
_	the organization maintained a close and continuous working relationship with the supported organization(s)		id 199	West
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3	redit sittledaris	BTEKETS
Sec	supported organizations played in this regard. tion 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 in	etructions)		
1 a	The organization satisfied the Activities Test. Complete line 2 below	isa actions).		
b	The organization is the parent of each of its supported organizations Complete line 3 below			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity	tity (see instructions)		
2	Activities Test Answer (a) and (b) below.	ary (acc mondonomo).	Yes	No
-	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			是
	those supported organizations and explain how these activities directly furthered their exempt purposes,		明 斯尼尔 克林克沙	
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	1555	Will be	#XX
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	146.44	in in	
а	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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
_	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b_		

GMA Science and Education Foundation

Sche	dule A (Form 990 or 990 EZ) 2018 Foundation		5	2-2088235 Page 6
Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust or	n Nov 20, 1970 (explain in P	art VI) See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2	•	
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4	,	
5	Depreciation and depletion	5 4		
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	7.5	11全全数2000年11月1日 11月1日 11日本全数2000年11月1日 11月1日 意识的心态经验	
	instructions for short tax year or assets held for part of year).	175.75		
·a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		,
	Fair market value of other non-exempt-use assets	1c		,
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other	Z M		医统法语介绍的 经基础
·	factors (explain in detail in Part VI)	N. J.		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			•
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2	以"我们"的"我们"的"我们"的"我们"。 第一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
4	Enter greater of line 2 or line 3	4	AND THE TAXABLE	
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	ly integra	ated Type III supporting organ	nization (see
	instructions)			

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 Foundation 52-2088235 Page 7 Rart Val Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions , Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2018 from Section C, line 6 Line 8 amount divided by line 9 amount (ii) (iii) (i) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2018 Amount for 2018 Distributable amount for 2018 from Section C, line 6 Underdistributions, if any, for years prior to 2018 (reasonable cause required explain in Part VI) See instructions Excess distributions carryover, if any, to 2018 a' From 2013 **b** From 2014 **建设到建设设施的国际企业等的基本** c From 2015 d From 2016 From 2017 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2018 distributable amount Carryover from 2013 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2018 from Section D, a Applied to underdistributions of prior years b Applied to 2018 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2019. Add lines 3j and 4c Breakdown of line 7 是是是此代表在一个企业,也是自然的。现在这个人也是一个企业,但是这些强烈的现在分词是 a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017

Schedule A (Form 990 or 990-EZ) 2018

Excess from 2018

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)
Part IV, Section A, Line 3b:
The supported organization of the GMA Science and Education Foundation
is the Grocery Manufacturers Association, a tax-exempt organization
under IRC 501(c)(6). A pro-forma support test calculation (Schedule A,
Part III) is completed each year for the Grocery Manufacturers
Association to document that the IRC Section 509(a)(2) public support
test would be met.
Part IV, Section A, Line 3c:
In 2018, the GMA Science and Education Foundation paid \$2,500 to the
Grocery Manufacturers Association, its supported organization, to
purchase exhibit space at the Science Forum conference held by the
Grocery Manufacturers Association. This was an educational conference
for which there was no lobbying component.
All activities of the GMA Science and Education Foundation are
charitable and designed to benefit the general public through
scientific and educational contributions to the consumer packaged goods
industry. These activities are also aligned with the goals of the
Grocery Manufacturers Association and its members.
Part IV, Section A, Line 6:
In 2018, the GMA Science and Education Foundation made a contribution
award to one entity. This entity was not related to the Foundation or
to the Foundation's supported organization, the Grocery Manufacturers
Association. The entity was also not a member of the Grocery
Manufacturers Association. The award made by the Foundation was to

support a food safety initiative, a direct focus of the Foundation and

Sche	edule A	<u>(Form 990 or 990</u>) EZ) 2018 Foun	<u>dation</u>				52-2088235 F	age 8
Pa	rt VI	Supplement	al Information.	Provide the	explanations re	guired by Part II. lir	ne 10. Part II. line 17a	a or 17b, Part III, line 12,	
		Part IV, Section	A, lines 1, 2, 3b, 3c	, 4b, 4c, 5a,	6, 9a, 9b, 9c, 11	a, 11b, and 11c, P	art IV, Section B, line	es 1 and 2, Part IV, Section C	,
		line 1, Part IV, S	Section D, lines 2 and	d 3, Part IV,	Section E, lines	1c, 2a, 2b, 3a, and	3b, Part V, line 1; Pa	irt V, Section B, line 1e, Part \	V,
		Section D, lines	5, 6, and 8, and Pa	rt V, Section	E, lines 2, 5, and	d 6 Also complete	this part for any add	itional information	
		(See instruction	<u>s)</u>						
of	the	Grocery	Manufactu	rers As	ssociatio	n.			
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SCHEDULE D

(Form 990)

Department of the Treasury

Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

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

GMA Science and Education

Foundation

Employer identification number

52-2088235 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the iPartil**■** organization answered "Yes" on Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds Total number at end of year 1 Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes 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 chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Yes No impermissible private benefit? [Partill 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 a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat 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 Held at the End of the Tax Year day of the tax year 2a Total number of conservation easements 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(ii)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

GMA Science and Education Foundation

	dule D (Form 990) 2018 Foundat:							52-20			1e 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, o	r Othe	r Simil	ar Assets	(continu	ıed)	
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the f	following that	t are a si	gnifican	t use of its c	ollection i	tems	
	(check all that apply)										
а	Public exhibition	c	ı 🖂	Loan or exc	hange progra	ams					
b	Scholarly research	e	. \square	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	illections and explain	n how th	ev further th	ne organizatio	on's exer	not pure	ose in Part	XIII		
5	During the year, did the organization solicit or	•		-	_						
•	to be sold to raise funds rather than to be ma							Г	Yes		No
Par	t IV Escrow and Custodial Arrang					"Yes" on	Form 9	90. Part IV.			
	reported an amount on Form 990, Par		010 11 1110	organizatio				00,1 0,11,			
12	Is the organization an agent, trustee, custodia		lany for a	contribution	e or other ass	eate not	ıncluded	1			
Ia	on Form 990, Part X?	an or other intermed	ilaly loi (Jona Dation.	s or other as	3613 1101	iiiciddec	´ _	Yes		No
_	•	and complete the fel	llouwoo t	abla				<u> </u>	_ 1es		140
ь	If "Yes," explain the arrangement in Part XIII a	and complete the lo	llowing t	able				т-	Amount		—
	On the last of the						-	 	Amount		—
С.	Beginning balance						10				—
đ	Additions during the year						_1 <u>d</u>				—
е	Distributions during the year						1e				
f	Ending balance						<u>1f</u>	`L	٦		
	Did the organization include an amount on Fo						ity	L_	_ Yes	\vdash	No
	If "Yes," explain the arrangement in Part XIII.						10				—
Par	t V Endowment Funds. Complete										
		(a) Current year	(b) F	rior year	(c) Two yea	rs back	(d) Inre	e years back	(e) Four	years o	аск
1a	Beginning of year balance				-				ļ <u></u>		
b	Contributions		ļ		·						
C	Net investment earnings, gains, and losses		ļ								
d	Grants or scholarships										
е	Other expenditures for facilities		i								
	and programs										
f	Administrative expenses						_				
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1ç	g, column (a)) held as						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Temporarily restricted endowment ▶	%									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%									
За	Are there endowment funds not in the posses	ssion of the organiza	ation tha	t are held ar	nd administer	red for th	ne organ	ization	_		
	by									Yes	No_
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the										
Pai	t VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990), Part i\	/, line 11a S	See Form 990), Part X,	line 10				
	Description of property	(a) Cost or c	other	(b) Cost	or other	(c) A	ccumul	ated	(d) Book	value	
		basis (investr		1 , ,	(other)		preciation				
1a	Land					ĺ				_	
	Buildings										
	Leasehold improvements										_
	Equipment			l					•		—
	Other			 	-						
			V 051	na (D) (ma 1	00.1	ı					Ō.
I UId	. Add lines 1a through 1e (Column (d) must e	uuai ronn 990. Pan	A. GOIUN	iii (Di. III)e T	سسسس ليثالا						-

> 0. Schedule D (Form 990) 2018

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5	Page	3

Investments - Other Securities.	on Form 000, Port IV, Jun	, 11h Soo Form 900	Dort V. Iron 12	
Complete if the organization answered "Yes" of (a) Description of security or category (including name of security)	on Form 990, Part IV, IIn (b) Book value		valuation Cost or end	d-of-year market value
(1) Financial derivatives	V-7	 		<u> </u>
(2) Closely-held equity interests		-		
(3) Other				,
(A) .		1		
(B)		.		
(C)				
(D)				•
(E)			· · · · · · · · · · · · · · · · · · ·	
(F)				<u> </u>
(G)		٦		
(H)	ē.			, , ,
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			MORESTANDA	
Part VIII Investments - Program Related.	-	while town finites a factor for	THE PARTY OF STREET AND ADDRESS OF AN ADDRESS.	TALESTAN STREET, SECOND STANDARD AND ADDRESS OF THE
	50 000 Part IV In	110 Soo Form 990	Port V line 13 · ·	
Complete if the organization answered "Yes" of a) Description of investment	(b) Book value		valuation Cost or end	d-of-vear market value
	(b) Book value	(0) 141011100 01	Valuation Cost of Girls	- Porycai market value
(1)				
(2)				
(3)				····
(4)				
(5)				
' (6)	<u> </u>			
(7)				
(8)	1			·
(9)				
Complete if the organization answered "Yes" c	on Form 990, Part IV, lin Description	ie 11d See Form 990), Part X, line 15	(b) Book value
(1)				
(2)	, , , , , , , , , , , , , , , , , , ,			
(3)				
(4)				
(5)		`		•
(6)				
(7) -				
(8)	-			
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X. Other Liabilities.	•		>	
Complete if the organization answered "Yes" of	on Form 990, Part IV, lin		rm 990, Part X, line 25	
1. (a) Description of liability	•	(b) Book value		
(1) Federal income taxes				
(2)		·		
(3)				
(4)				
(5)		 		
(6)				推了在各個的概念
(7)	-			
(8)			一次表现的	
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	251	•		
Total. (Column lb) must equal Form 990. Part X. col. (B) line	23./		magazareat angen a continue of the	ى دۇر قەربىيە بايىلىقلىكى ئەتىپەركىيىڭ دە دە 1946-ئىلىرگىلىدا ئەستارىد.

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

Foundation

Schedule D (Form 990) 2018

52-2088235 Page 4

Par	TXI Reconciliation of Revenue per Audited Financial Statement	ents With Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a		
1	Total revenue, gains, and other support per audited financial statements		1	17,476,294.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	. 1	
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d 16,511,098.		
е	Add lines 2a through 2d		2e	16,511,098.
3	Subtract line 2e from line 1		3	965,196.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]	
b	Other (Describe in Part XIII)	-43,031.		
С	Add lines 4a and 4b		4c	-43,031.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	922,165.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	nents With Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	'a		
1	Total expenses and losses per audited financial statements		1	26,790,376.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	[
c	Other losses	2c	1 1	
d	Other (Describe in Part XIII)	2d 25,760,869.	1	
e	Add lines 2a through 2d		2e	25,760,869.
3	Subtract line 2e from line 1		3	1,029,507.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	1	
C	Add lines 4a and 4b	10	4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I. line 18.)		5	1,029,507.
	rt XIII Supplemental Information.			
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Par 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad		, Part	X, line 2, Part XI,
	rt X, Line 2: hagement reviews and assesses all activiti	les annually to id	lent	ify any
<u>ch</u>	anges in the scope of the activities and r	revenue sources an	d t	he tax
tre	eatment thereof to identify any uncertaint	y in income tax.	Fo	r the year
end	ded December 31, 2018, management did not	identify any unce	rta	inty in
<u>in</u>	come tax requiring recognition or disclosu	re in the financi	a1_	
sta	atements.			
Par	rt XI, Line 2d - Other Adjustments:			
Re	venue of entities other than the Foundatio	on included in the	!	
COI	nsolidated audited financial statements, n	net of		
<u>el:</u>	imination entries			16,511,098.
83205	4 10-29-18		Sche	dule D (Form 990) 2018

GMA Science and Education Foundation

Schedule D (Form 990) 2018 Foundation	52-2088235 Page 5
Part XIII Supplemental Information (continued)	
Part XI, Line 4b - Other Adjustments:	
Cost of words wild /worked with women on the Horm 000)	42 021
Cost of goods sold (netted with revenue on the Form 990)	-43,031.
Part XII, Line 2d - Other Adjustments:	
Expenses of entities other than the Foundation included in t	he
consolidated audited financial statements, net of	
elimination entries	25,717,838.
	42 021
Cost of goods sold (netted with revenue on the Form 990)	43,031.
Total to Schedule D, Part XII, Line 2d	25,760,869.
•	
	•
	•

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Foundation

Partil Questions Regarding Compensation

Employer identification number 52-2088235

		,	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,	鄉常		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			10,77
	Travel for companions Payments for business use of personal residence		10 1.45 1.75	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)		No.	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2				
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
			はは	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	課題では		
	CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study		23	
	Form 990 of other organizations Approval by the board or compensation committee			
				政策
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing		, V, 125	
	organization or a related organization			
а		4a	Х	
b	* * * * * * * * * * * * * * * * * * * *	4b	Х	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a.c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		_X_
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		5.7	
	contingent on the net earnings of	(5) 3 m (1)	اَحْ مَا	144
а	The organization?	6a		X
b		6b		Х
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		* . , ·	
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	F934	16	المراجعة المارة المراجعة المارة
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2018

52-2088235

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-{iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	aple	(E) Total of columns	(F) Compensation
(A) Name and Title		(ı) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	in column (B) reported as deferred on prior Form 990
(1) Geoff Freeman	E	0	0	0	0	0	0	0
Board Chair (& GMA CEO AugDec.)	3	480,551.	50,000.	0	442,468.	8,301.	981,320.	0
(2) Pamela Bailey	Ξ	0	0	0	• 0	0	0.	0
Board Chair [& GMA CEO JanJuly)	: 🗉	800,809.	0	3,888,461.	511,584.	24,150.	5,225,004.	2,603,286.
(3) Leon Bruner, Dir. (& GMA	Ξ	0	0	0	• 0		0.	0
Chief Science Officer JanOct.)	: <u>E</u>	334,711.	0	79,751.	216,599.	21,284.	652,345.	0
(4) Bill Pappas, Board Treasurer	Ξ	0	0	0	0	0	• 0	0
(& GMA VP & Controller)	: 3	181,397.	6,100.	0	,40	19,197.	243,101.	6,100.
(5) Brian Bedard	Ξ	219,333.	0	0	.182.	1,125.	247,640.	0.
Executive Director	(ii)	0.	0.	0	• 0	0.	0	0.
	(i)							
	(ii)							
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Part T Lines 4a-b:
Freeman:
serves on the Board of the Foundation. The contribution of GMA to this
Plan in 2018, in accordance with the employment contract between GMA and
its President and CEO and as approved by the compensation committee of the
Board of Directors of GMA, was \$150,000.
Pamela Bailey: GMA CEO and Foundation board member for Jan July 2018.
GMA provided a 457(f) Plan in accordance with the terms of an employment
contract. The employer contribution to this 457(f) Plan in 2018 was
which was in accordance with
was board approved. A payout of the 457(f) Plan cumulative balance of
\$3,218,434 was made in 2018. A total of \$966,862 was awarded in severance
pay of which \$491,483 was paid in 2018.
Leon Bruner: Severance award through GMA of \$226,509 of which \$46,115 was
in 2018.

Schedule J (Form 990) 2018

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization Foundation

GMA Science and Education Employer identification number 52-2088235

Form 990, Part III, Line 1, Description of Organization Mission: further enhance the Grocery Manufacturers Association as a recognized world leader in food science and safety. Form 990, Part VI, Section A, line 3: The Foundation's operations are managed by its parent company, the Grocery Manufacturers Association. Form 990, Part VI, Section A, line 6: Pursuant to the Foundation's governing documents, the sole member of the Foundation is the Grocery Manufacturers Association. Form 990, Part VI, Section A, line 7a: The Board of Directors of the Foundation is determined by the Foundation's sole member, the Grocery Manufacturers Association. Form 990, Part VI, Section A, line 7b: Decisions made by the Board of Directors of the Foundation are subject to approval by the Foundation's sole member, the Grocery Manufacturers Association. Form 990, Part VI, Section A, line 8b: The Foundation has no established board committees. Accordingly, this question is not applicable but pursuant to the IRS instructions, when this line is not applicable, it is to be answered "no".

OMB No. 1545-0047

Open to Public

Inspection

Employer identification number 52-2088235

Form 990, Part VI, Section B, line 11b:

The Foundation's Federal Form 990 is reviewed by the accounting staff of the Grocery Manufacturers Association (GMA), including the Director of Accounting, Director of Finance & Administration and the Controller. Such review takes place upon receipt of the draft Form 990 received from the independent public accounting firm who conducts the consolidated financial statement audit of GMA, of which the Foundation is a part. The review involves comparison of financial data in the Form 990 with the audited financial statements and review of all narrative information for accuracy and completeness.

Form 990, Part VI, Section B, Line 12c:

In addition to the written conflict of interest policy, the Foundation regularly reviews antitrust provisions, which specifically address conflict of interest provisions, at board meetings. In the event of any actual or perceived conflict, the Board determines what action is appropriate, if any.

Form 990, Part VI, Section B, Line 15:

The compensation of the executive director of the Foundation is set by the CEO of the Foundation's parent organization, the Grocery Manufacturers

Association (GMA). Other officers of the Foundation are employees of GMA and compensated directly by GMA.

GMA's compensation structure provides that comparability data is gathered from a variety of publicly available sources, including published survey data and Form 990's. Specific to the President and CEO of GMA, who serves on the Board of the Foundation, a salary survey was obtained and the total compensation reviewed and approved by the compensation committee of the

Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990 EZ) (2018)	Page 2
Name of the organization GMA Science and Education Foundation	Employer identification number 52-2088235
Total Other Fees on Form 990, Part IX, line 11g, Col A	220,778.
Part XII, Line 2c	
The Finance and Audit Committee of the Grocery Manufacture	ers
Association (GMA), the parent organization of the Foundation	ion, is
responsible for the approval of the independent public acc	counting firm
who conducts the consolidated financial statement audit of	GMA which
includes the Foundation, and for the approval of the consc	olidated
audited financial statements. This process is unchanged if	from the prior
year.	
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

GMA Science

Name of the organization

Foundation

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

2018

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number 52-2088235

(g) Section 512(b)(13) Š × controlled entity? Direct controlling Yes entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax exempt organizations during the tax year Direct controlling entity End-of-year assets **e** status (if section Public charity 501(c)(3)) Total income Exempt Code Ð section 501(c)(6) Legal domicile (state or Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) Jelaware 3MA represents the world's leading consumer packaged Primary activity Primary activity goods companies. 53-0114930, 1001 19th St. North, 7th Floor, Grocery Manufacturers Association (GMA) -Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity 22209 ΚX Arlington, Part Part II

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

Schedule R (Form 990) 2018

Foundation Schedule R (Form 990) 2018

Page 2

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General or Percentage managing ownership partner? Yes No Section 512(b)(13) controlled entity? Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year 3 Percentage ownership Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Yes Ξ Code V-UBI amount in box '20 of Schedule -K-1 (Form 1065) Share of end-of-year assets <u>6</u> ž Disproportionate allocations? Ξ Yes Share of total income Share of end-of-year assets Type of entity (C corp, S corp, or trust) **e** Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) € <u>e</u> Legal domicile (state or foreign country) <u>ق</u> (d)
I Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization Name, address, and EIN of related organization Part III Part IV

Page 3

52-2088235

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Foundation Schedule R (Form 990) 2018

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

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

- Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
 - Gift, grant, or capital contribution to related organization(s)
 - Gift, grant, or capital contribution from related organization(s)
 - d Loans or loan guarantees to or for related organization(s)
 - e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
 - m Performance of services or membership or fundraising solicitations by related organization(s)

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- Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- Other transfer of cash or property from related organization(s)
- 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(c) (d) Amount involved Method of determining amount involved	199,596. Fair value	184,929. Fair value	111,720. Fair value	325,574. Fair value		
(b) Transaction type (a-s)	M	0	Ф	α		
(a) Name of related organization	(1) Grocery Manufacturers Association	(2) Grocery Manufacturers Association	(3) Grocery Manufacturers Association	(4) Grocery Manufacturers Association	(5)	

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Foundation Schedule R (Form 990) 2018 Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

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

ular was not a related organization over instructions regarding exclusion for certain investment partition in partitions in partition in partitions in partitions in partitions in partitions in parti	iluctions regarding exclus	SION CERTAIN HIVE			9		[[5	
(a)	e)		(a)	Are all	E	(6)	(ב)	()	∋ [.]	£ (
Name, address, and EIN of entity	Firmary activity	(state or foreign	redominant income (related, unrelated, excluded from tax under -	partners sec 501(c)(3) orgs ?	Share of total	Share of end-of-year	tionate allocations?	Uspragor Code V-UBI General of Percentage tone amount in box 20 managing ownership of Schedule K-1 partner?	General o managing partner?	ownership
			Sections 512-514)	Yes No		455615	Yes	(FOLM 1065)	Yes No	
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GMA Science and Education 52-2088235 Page 5 Schedule R (Form 990) 2018 Found Part VII Supplemental Information. Foundation Provide additional information for responses to questions on Schedule R. See instructions