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Department of the Treasury

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

OMB No. 1545-0047

		enue Service			irs.gov/Form990 for Instruc	ctions and the	e latest info	ormation.			inspection
Α	For th	ne 2024 calen	dar y	ear, or tax year begin	ning	, 2024,	and ending	1		,	20
В	Check i	f applicable:	С						D Employ	er identi	fication number
	Ad	ldress change	AME	ERICAN VEGAN S	SOCIETY				22-6	50585	533
	Na	ime change		DINSHAH DR					E Telepho	ne numb	ber
	Ini	tial return	MAI	LAGA, NJ 08328	5-4426				(856	5) 69	94-2887
	Fin	al return/terminated						-	(00)	, .	
		nended return							G Gross re	ceints \$	\$ 279,617.
		plication pending	ΓN	ame and address of principa	al officer: ANNE DINSH	7 11	H	H(a) Is this a			
	^	plication periaing	Sam	ne As C Above	ANNE DINSH	AH		H(b) Are all s If "No,"			
1	Тах	exempt status:		01(c)(3) 501(c) () (insert no.)	4947(a)(1) or	527	lf "No,"	attach a list.	See inst	tructions.
J		· · · ·) (INSERTIO.)	4547(a)(1) 01	-	K N O M M M			
				canvegan.org				H(c) Group e			
ĸ		of organization:		Corporation Trust	Association Other	LY	ear of formatio	n: 1960) IVIS	tate of le	egal domicile: NJ
Ра	rtl	Summar	<u>y</u>		· · · · · · · · · · · · · · · · · · ·						
	1				sion or most significant a						
ce					<u>le lifestyle, e</u>	mpowering	<u>g indiv</u>	<u>iduais</u>	<u>throu</u>	<u>gn</u> e	<u>aucation and</u>
าลท		advocacy	<u>-sı</u>	<u>nce 1960.</u>							
Activities & Governance	2				on discontinued its opera	tions or disp			- of ito		
30		Check this bo			erning body (Part VI, line					3	
જ					rs of the governing body					4	4
ies					n calendar year 2024 (P					5	13
ivit					necessary)					6	223
Act	7a	Total unrelate	ed bu	siness revenue from	Part VIII, column (C), lir	ne 12				7a	0.
	b	Net unrelated	d busi	iness taxable income	from Form 990-T, Part	I, line 11				7b	0.
								Pr	rior Year		Current Year
	8	Contributions	and	grants (Part VIII, line	e 1h)				233,6	32.	229,694.
nue	9	Program serv	vice re	evenue (Part VIII, line	e 2g)				23,7		32,635.
Revenue	10	Investment in	ncome	e (Part VIII, column (/	A), lines 3, 4, and 7d)					21.	6,264.
щ,	11	Other revenu	e (Pa	art VIII, column (A), lir	nes 5, 6d, 8c, 9c, 10c, a	and 11e)			1,3	95.	3,668.
	12	Total revenue	e — a	dd lines 8 through 11	(must equal Part VIII, c	column (A), lir	ne 12)		258,8	77.	272,261.
	13	Grants and s	imilar	amounts paid (Part	IX, column (A), lines 1-3	3)					
	14	Benefits paid	l to or	for members (Part I	X, column (A), line 4)						
	15	Salaries, oth	er cor	mpensation, employe	e benefits (Part IX, colu	mn (A), lines	5-10)		153,3	64.	161,894.
ses	16a	Professional	fundr	aising fees (Part IX,	column (A), line 11e)				,		,
Expenses				expenses (Part IX, co			2,389.				
Ĕ					· · · · · · · · · · · · · · · · · · ·				100 7	00	100 5 61
					ines 11a-11d, 11f-24e)				139,7		139,561.
					equal Part IX, column (293,0		301,455.
		Revenue less	s expe	enses. Subtract line I	18 from line 12			-	-34,2		-29,194.
Net Assets or Fund Balances	20		(De rit	V line 10				Beginnin	g of Curren		End of Year
aaet 3ala	20								621,0	-	274,577.
et A	21		``							0.	3,847.
					ine 21 from line 20				621,0	10.	270,730.
Pa	rt II	Signatur	′е Bl	ock							
Unde	r penali	ties of perjury, I de	eclare t	hat I have examined this return	urn, including accompanying sch all information of which prepare	nedules and staten	nents, and to th	ne best of my	y knowledge	and belie	ef, it is true, correct, and
COLL	Jiele. De			ner triari officer) is based off		er flas ally kilowiec	iye.				
		0									
Sig He	jn	Signature of	officer					Date			
He	re	ANNE I					VI	P/SECY	/CEO		
		Type or prin		and title			1				
		Preparer's r	name		Preparer's signature		Date		Check		PTIN
Pai	id	Gregg	<u>S.</u>	Bossen	Gregg S. Bosse	en			self-employe	d	P01444127
Pre	epare	Firm's name	e	GREGG S BOSS	EN CPA PC						
Us	e On	Iy Firm's addr	ess	50 LENOX POI					Firm's EIN	58-	-2361357
				ATLANTA, GA					Phone no.		-892-9513

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

No

Part III Statement of Program Service Accomptishments Check if Schedule Contains a response on note to any line in the Part III. Image: Content is in Schedule Contains a response on note to any line in the Part III. AVS promotes a comparisation's mission: AVS promotes a comparisation industrial and substatinable lifestyle, empowering individuals. through education and advocacy-since 1960. 2 Did the organization underfake any sophicant program services during the year which were not lided on the prior Form 990 or 990 E22. No I' Tres' discustibilities nere sources on Schedule O. No I' Tres' discustibilities neresources on Schedule O. No I' Tres' discustibilities neresource accompliatment's for each of its three targets program services: as measured by compares. Section 3D (contains the organization researce accompliatment's for each of its three targets program services: as measured by compares. Section 3D (context) here any sophicant changes in the out of grants and allocations to others, the total expenses. Section 3D (context) and Schedule O. 4 Ocde:) (Expenses \$ 248,206, including grants of \$) (Revenue \$) (Revenue \$) (Revenue \$) (Revenue \$) (Revenue \$	Form	n 990 (2024)	AMERICAN	VEGAN S	SOCIETY			22	-6058533	Page 2
Berly besche hte organization's mission: AVS_promotes a _ comparation's mission: AVS_promotes a _ comparation's mission: Individuals_through_education_and_advocacy_stice_1960. 2 Diffecentiation_indication underbise any significant program services during the year which were not listed on the prior Form 900 or 900 E22.	Par									
AVS_promotes_icomposes_icometes_healthfull_and_subtainable_lifestyle_empowering						e to any line in this P	Part III			X
Individuals through education and advocacy-since 1960. 2 Did the organization undertake any significant program services during the year which were not listed on the prior from 900 e527. 4 Did the organization cases conducting, or make significant changes in how it conducts, any program services?	1	-	-							
2 Did the organization undertake any significant program services during the year which were not liabed in the prior form 300 or 990-E27. I' Yes, i' was in the services on Schedule 0. 3 Did the organization cases conducting, or make significant changes in how it conducts, any program services? I' Yes, i' was in the service on Schedule 0. 4 Did the organization services on Schedule 0. Yes, i' was in the organization service accompliatments for each of its three targets program services, as measured by expenses, and revenue, if any, for each program service accompliatments for each of grants and allocations to others, the total expenses, and revenue, if any, for each program services on Schedule 0. 4a (Code:) (Expenses \$including grants of \$) (Revenue \$) b (Code:) (Expenses \$including grants of \$) (Revenue \$) 4b (Code:) (Expenses \$including grants of \$) (Revenue \$) 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) 4d Other program services (Describe on Schedule O.) (Expenses \$								<u>lifestyle,</u>	empoweri	<u>ng</u>
Form 990 or 990-E22		individu	uals throu	igh educ	ation and a	advocacy-sinc	<u>e 1960.</u>			
Form 990 or 990-E22										
If "Yes," describe these new services on Schedule 0. If "Yes," describe these changes on Schedule 0. 3 Druct the organization cases conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No 4 Describe the organization's case complexitions are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$248,206, including grants of \$) (Revenue \$) 4b (Code:) (Expenses \$	2	Did the organ	nization undertak	e any signific	cant program serv	ices during the year w	hich were not lis	sted on the prior		
 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Form 990 or	990-EZ?						🗍 Y	′es X No
If "res" describe these changes on Schedule O. Image: Control of the program services (Describe on Schedule O.) 4 Describe the program services (Describe on Schedule O.) Image: Control of Schedule O. 4 Cotter program services (Describe on Schedule O.) Image: Control of Schedule O. 44 Other program services (Describe on Schedule O.) Image: Control of Schedule O. 44 Other program services (Describe on Schedule O.) Image: Control of Schedule O. 44 Other program services (Describe on Schedule O.) Image: Control of Schedule O. 44 Other program services (Describe on Schedule O.) Image: Control of Schedule O. 44 Other program services (Describe on Schedule O.) Image: Control of Schedule O. 45 Total program services (Describe on Schedule O.) Image: Control of Schedule O. 46 Total program services (Describe on Schedule O.) Image: Control of Schedule O. 46 Total program services (Describe on Schedule O.) Image: Control of Schedule O. 46 Total program services (Describe on Schedule O.) Image: Control of Schedule O. 46 Total program services (Describe on Schedule O.) Image: Control of Schedule O. 46 Total program services (Describe on Schedule O.) Image: Control of Schedule O. 46 Total program services (Describe on Schedule O.) Image: Control of Schedule O. 46 Total progr		If "Yes," desc	cribe these new s	services on S	Schedule O.					
4 Describe the organization's program service accomplishments for each of its three langest program services, as measured by expenses. Section 50 (c)(d) and 50 (c) organizations is or encurred to report the amount of grants and allocations to others, the total expenses, and revenue. If any, for each program service reported. 4a (Code:	3					ant changes in how i	it conducts, an	y program services	?	res <u>X</u> No
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See_Schedule_0		and revenue	, if any, for eac	ch program s	service reported.	·	-			·
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						s of \$)	(Revenue \$)
	4e	Total progra	m service expe	nses	248	,206.				

Form 990 (2024) AMERICAN VEGAN SOCIETY

Par	t IV Checklist of Required Schedules			_ <u></u>
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	Yes X	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a	Х	
b	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	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? <i>If "Yes," complete Schedule D, Part VIII</i>	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		х
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		Х
BAA			990	(2024)

Page 3

Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III. 22 Х Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х Schedule J.... 23 **24a** Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.* Х 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?..... 24c **d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?.... 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I..... 25a Х **b** Is the organization aware that it engaged in an excess benefit transaction with a disgualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I 25h Х Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*...... 26 Х 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key 27 employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these Х persons? If "Yes," complete Schedule L, Part III..... 27 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions). 28 a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV..... Х 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV...... Х 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 28c Х Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M..... Х 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х contributions? If "Yes," complete Schedule M. 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I..... Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II. Х 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I.* 33 Х 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, 34 Х and Part V, line 1..... 34 **35a** Did the organization have a controlled entity within the meaning of section 512(b)(13)?.... Х 35a **b** If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2......* 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 36 Х Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI.* 37 37 Х Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 Note: All Form 990 filers are required to complete Schedule O. Х 38 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V..... Yes No **1a** Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 2 **b** Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable..... 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х (gambling) winnings to prize winners? 1c

Form 990 (2024) AMERICAN VEGAN SOCIETY
Part IV Checklist of Required Schedules (continued)

Form	orm 990 (2024) AMERICAN VEGAN SOCIETY	22-6058533		F	Page 5
Par	Part V Statements Regarding Other IRS Filings a	and Tax Compliance (continued)			
			١	Yes	No
2a	2a Enter the number of employees reported on Form W-3, Transments, filed for the calendar year ending with or within the year	nittal of Wage and Tax State- ar covered by this return 2a 13			
b	b If at least one is reported on line 2a, did the organization file a		2b	Х	
3a	3a Did the organization have unrelated business gross income of	\$1.000 or more during the year?	3a		Х
	b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an exp</i>		3b		
	4a At any time during the calendar year, did the organization have an financial account in a foreign country (such as a bank account	interest in, or a signature or other authority over, a	4a		х
h	b If "Yes," enter the name of the foreign country		4a		
b	See instructions for filing requirements for FinCEN Form 114, Repo	rt of Foreign Bank and Financial Accounts (FBAR)			
5a	5a Was the organization a party to a prohibited tax shelter transaction		5a		Х
	b Did any taxable party notify the organization that it was or is a		5b		X
	c If "Yes," to line 5a or 5b, did the organization file Form 8886-T		5c		
	6a Does the organization have annual gross receipts that are norr solicit any contributions that were not tax deductible as charita		6a		Х
	b If "Yes," did the organization include with every solicitation an expression tax deductible?	ess statement that such contributions or gifts were	6b		
7	7 Organizations that may receive deductible contributions under				
	a Did the organization receive a payment in excess of \$75 made				
	services provided to the payor?		7a	Х	
	b If "Yes," did the organization notify the donor of the value of the		7b	Х	
	c Did the organization sell, exchange, or otherwise dispose of tangible Form 8282?		7c		Х
	d If "Yes," indicate the number of Forms 8282 filed during the ye				
	e Did the organization receive any funds, directly or indirectly, to		7e		X
	f Did the organization, during the year, pay premiums, directly o		7f		Х
g	g If the organization received a contribution of qualified intellectual pr as required?		7g		
h	h If the organization received a contribution of cars, boats, airpla		7h		
8	Form 1098-C?	a donor advised fund maintained by the sponsoring			
•	organization have excess business holdings at any time during		8		
	9 Sponsoring organizations maintaining donor advised funds.a Did the sponsoring organization make any taxable distributions	sunder contion 49662	9a		
	b Did the sponsoring organization make a distribution to a donor		9a 9b		
	10 Section 501(c)(7) organizations. Enter:		50		
	a Initiation fees and capital contributions included on Part VIII, li	ne 12			
	 b Gross receipts, included on Form 990, Part VIII, line 12, for pu 				
	11 Section 501(c)(12) organizations. Enter:				
	a Gross income from members or shareholders	11a			
	 b Gross income from other sources. (Do not net amounts due or paid against amounts due or received from them.) 	to other sources			
12a	12a Section 4947(a)(1) non-exempt charitable trusts. Is the organize		2a		
	b If "Yes," enter the amount of tax-exempt interest received or a				
	13 Section 501(c)(29) qualified nonprofit health insurance issuer				
	a Is the organization licensed to issue qualified health plans in n		3a		
	Note: See the instructions for additional information the organi				
b	b Enter the amount of reserves the organization is required to m which the organization is licensed to issue qualified health plan	aintain by the states in			
с	c Enter the amount of reserves on hand				
14a	14a Did the organization receive any payments for indoor tanning s	services during the tax year? 1	4a		Х
	b If "Yes," has it filed a Form 720 to report these payments? If "		4b		
	15 Is the organization subject to the section 4960 tax on payment	t(s) of more than \$1,000,000 in remuneration or			1
	excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		15		Х
16	16 Is the organization an educational institution subject to the sec If "Yes," complete Form 4720, Schedule O.	tion 4968 excise tax on net investment income?	6		Х
17	17 Section 501(c)(21) organizations. Did the trust, or any disqual	ified or other person, engage in any activities that would			
	result in the imposition of an excise tax under section 4951, 49 If "Yes," complete Form 6069.		17		

	of officers, directors, trustees, or key employees to a management company of other person?	э		Λ
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? See Sch 0	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	Λ	Х
6	Did the organization become aware during the year of a significant diversion of the organization sassets	6		X
-	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?	0 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		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ue Co	ode.)
			Yes	-
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i> SeeSchedule.Q	12c	Х	
3	Did the organization have a written whistleblower policy?	13	Х	
4	Did the organization have a written document retention and destruction policy?	14	Х	
5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		L
	tion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed <u>None</u>			
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50 available for public inspection. Indicate how you made these available. Check all that apply.			
_	X Own website X Another's website X Upon request X Other (explain on Schedule O)		Sch.	0
	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availate the public during the tax year. See Schedule O	ble to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records. FREYA DINSHAH 56 DINSHAH DR MALAGA NJ 08328-4426 (856) 694-2887			
<u>^ ^</u>		Form	aon /	(2024)
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Form 990 (2024) AMERICAN VEGAN SOCIETY Pa

Section A. Governing Body and Management

3

rt VI	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and t	for
	a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on	
	Schedule O. See instructions.	_
	Check if Schedule O contains a response or note to any line in this Part VI.	Х

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

1a Enter the number of voting members of the governing body at the end of the tax year..... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.

b Enter the number of voting members included on line 1a, above, who are independent.....

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? See Schedule 0

Did the organization delegate control over management duties customarily performed by or under the direct supervision

Page 6

No

Yes

Х

4

4

2

22-6058533

1a

1b

Form 990 (2024) AMERICAN VEGAN SOCIETY	22-6058533	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Higher Independent Contractors	st Compensated Employe	es, and
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 Compens	sated Employees	
1a Complete this table for all persons required to be listed. Report compensation for the calendar year endir organization's tax year.	ng with or within the	
• List all of the organization's current officers, directors, trustees (whether individuals or organiz compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	ations), regardless of amount of	

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				(C						
(A) Name and title	(B) Average hours per week (list any hours for related organiza- tions below dotted line)	o x,i ^{cl} Goff or director	er an	Pos neck s ped d a Officer	more rson i	than o s both r/trust employee	\sim	(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) ANNE DINSHAH	<u>30</u>									
VP/SECY/CEO (2) FREYA DINSHAH	0 30	Х		Х				25,920.	0.	0.
President/Treas	0	Х		Х				0.	0.	0.
(3) BARATA EL	2									
Director	0	Х						0.	0.	0.
	<u>2</u> 0	Х		Х				0.	0.	0.
(5)				Λ				0.	0.	0.
(10)										
(11)										
(12)										
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Form 990 (2024) AMERICAN VEGAN SOCIETY

22-6058533 Page 8

Par	t VII Section A. Officers, Directors, Tru	stees, I	Key	Em	plo	bye	es, a	ano	d Highest Com	pensated Emp	loyees	(contin	nued)
					(C)							
	(A) Name and title	(B) Average hours	box, office	unles er and	s per d a d	more rson i irecto	than or s both r/truste	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	0	(F) Ited amo f other Insation f	
		per week (list any hours for related organiza- tions	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest cc employee	Former	(W-Ž/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the or and	ganization related inization	on
		below dotted line)	trustee	al trustee		yee	Highest compensated employee						
(15)													
(16)													
(17)	·												
(18)	·												
(19)			-										
(20)			-										
(21)													
(22)													
(23)													
(24)													
(25)													
1b	Subtotal								25,920.	0.			0.
С	Total from continuation sheets to Part VII, Section	on A							0.	0.			0.
	Total (add lines 1b and 1c)								25,920.	0.			0.
2	Total number of individuals (including but not limited from the organization 0	to those li	sted	abov	/e) v	who	receiv	ved	more than \$100,00	0 of reportable comp	ensatior		
3	Did the organization list any former officer, direct										3	Yes	No
4	on line 1a? If "Yes, "complete Schedule J for such For any individual listed on line 1a, is the sum of the organization and related organizations greate										. 3		X
	Such individual										. 4		Х
	for services rendered to the organization? If "Yes	s," comple	ete S	cheo	dule	J f c	or suc	ch p	person		. 5		Х
Sec	tion B. Independent Contractors Complete this table for your five highest compense	sated inde	nen	lont		ntra	ntors	tha	t received more t	nan \$100.000 of			
	compensation from the organization. Report compens									ganization's tax year			
	(A) Name and business addr	ess							(B) Description of	of services	(Compe	;) nsatio	n
2	Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not limi N	ted to	o tho	se l	istec	abov	ve) v	who received more	than			

Form 990 (2024) AMERICAN VEGAN SOCIETY

Part VIII Statement of Revenue

22-6058533

Page 9

Par	t VI	Statement of Revenue Check if Schedule O contains a	a res	oonse or note to anv	/ line in this Part VI	11		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts,	1a	Federated campaigns	1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues	1b	7,605.				
S, G	С	Fundraising events	1c					
art.		Related organizations	1d					
s, s		Government grants (contributions)	1e					
er o	t	All other contributions, gifts, grants, and similar amounts not included above	1f	222,089.				
e Đ	g	Noncash contributions included in		222,009.				
computions, Gins, Grans, and Other Similar Amounts		lines 1a-1f	1g					
	n	Total. Add lines 1a-1f		Business Code	229,694.			
anus	22	EARC			12 004	12 (04		
Program Service Revenue		EATS REGISTRATION FEES		813319 813319	<u>13,684</u> . 9,607.	<u>13,684</u> . 9,607.		
ы		TRADEMARK SERVICES		813319	7,827.	7,827.		
evi N	d			813319	1,517.	1,517.		
й Р	e			015515	1,517.	1,017.		
grar	f	All other program service revenue	e					
Pro		Total. Add lines 2a-2f			32,635.			
	3	Investment income (including divide	nds,	interest, and				
		other similar amounts)			6,264.			6,264
	4	Income from investment of tax-e						
	5	Royalties						
	6-	Gross rents 6a	ear	(ii) Personal				
		Less: rental expenses 6b						
		Rental income or (loss) 6c						
		Net rental income or (loss)						
		Gross amount from (i) Secu		(ii) Other				
	7a	sales of assets						
	h	other than inventory Less: cost or other basis						
	5	and sales expenses 7b						
		Gain or (loss) 7c						
	d	Net gain or (loss)	· · · <u>·</u>					
ē	8a	Gross income from fundraising events						
en		(not including \$	_					
Other Revenue		of contributions reported on line 1c). See Part IV, line 18						
er F	h	Less: direct expenses		a b				
Ě		Net income or (loss) from fundra	_					
9			l sing					
	эа	Gross income from gaming activities. See Part IV, line 19.	9	a				
	b	Less: direct expenses		b				
		Net income or (loss) from gaming	g acti	vities				
	1 0 a	Gross sales of inventory, less	Γ					
		returns and allowances		Ja 10,668.				
		Less: cost of goods sold		b 7,356.				
	С	Net income or (loss) from sales of	of inv	-	3,312.	3,312.		
	11-	NTOORT I NIEGUO		Business Code	050			0.5.5
an	11a h	MISCELLANEOUS			356.			356
Revenue	0							
Rei	с Ч	All other revenue						
Revenue	u	Total. Add lines 11a-11d		L	356.			
		Total revenue. See instructions			272,261.	35,947.	0.	6,620
	• 4				۷۱۷,۷۵۱.	55,947.	U.	0,020

orm 990 Part IX				22-6058	1533 Page
	Statement of Functional Expens 01(c)(3) and 501(c)(4) organizations must com		her organizations must co	omplete column (A)	
	Check if Schedule O contains a re				
	iclude amounts reported on lines b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
oraa	nts and other assistance to domestic anizations and domestic governments. Part IV, line 21		oxponses	gonoral onponeoe	0,001000
2 Grai	nts and other assistance to domestic viduals. See Part IV, line 22				
orga	nts and other assistance to foreign nizations, foreign governments, and for- n individuals. See Part IV, lines 15 and 16				
5 Com	efits paid to or for members npensation of current officers, directors, tees, and key employees	25,920.	18,144.	5,184.	2,592
disq sect	npensation not included above to ualified persons (as defined under tion 4958(f)(1)) and persons described ection 4958(c)(3)(B)	0.	0.	0.	
7 Othe	er salaries and wages	117,057.	97,197.	16,414.	3,446
(incl	sion plan accruals and contributions lude section 401(k) and 403(b) ployer contributions)		, , , , , , , , , , , , , , , , , , ,		
9 Othe	er employee benefits	3,480.	2,807.	526.	14
10 Pay	roll taxes	15,437.	12,453.	2,332.	652
11 Fee	s for services (nonemployees):		,	_,	
a Man	nagement				
b Lega	al				
c Acco	ounting	2,767.		2,767.	
d Lobi	bying	,		,	
e Profe	essional fundraising services. See Part IV, line 17				
f Inve	estment management fees				
g Other	r. (If line 11g amount exceeds 10% of line 25, column	C 40E	2 0 5 5	1 215	1 21
	amount, list line 11g expenses on Schedule 0.) ertising and promotion	6,485.	3,855.	1,315.	1,31
	ce expenses	2,096.	2,096.		
		7 145	F 020	1 107	0.0
	rmation technology	7,145.	5,032.	1,187.	92
	alties	C1 010	50.140	0.007	0.45
	upancy	61,912.	50,149.	9,287.	2,47
	/el	4,762.	4,762.		
expe publ	ments of travel or entertainment enses for any federal, state, or local lic officials				
	ferences, conventions, and meetings	28,528.	28,528.		
	rest				
	ments to affiliates				
•	reciation, depletion, and amortization	2 2 2 2	2 222		
24 Othe cove on li of lir	Irance er expenses. Itemize expenses not ered above. (List miscellaneous expenses ne 24e. If line 24e amount exceeds 10% ne 25, column (A), amount, list line 24e enses on Schedule O.)	3,303.	3,303.		
<u>a</u> pr	inting_and_Publications	14,422.	14,422.		
		2,701.	2,188.	405.	10
c <u>C</u> R	EDIT CARD FEES	2,658.	1,713.	240.	70
d Po	stage and Shipping	1,561.	1,457.	82.	22
		1,221.	100.	1,121.	
25 Tota	I functional expenses. Add lines 1 through 24e	301,455.	248,206.	40,860.	12,38
the joint cam Che	it costs. Complete this line only if organization reported in column (B) t costs from a combined educational paign and fundraising solicitation. ck here if following				
SOF	P 98-2 (ASC 958-720)				Form 990 (202

Form 990 (2024) AMERICAN VEGAN SOCIETY

22-6058533	
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Page 11

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
1	Cash – non-interest-bearing			12,922.	1	45,484
2	Savings and temporary cash investments			170,959.	2	112,211
3	Pledges and grants receivable, net				3	999
4	Accounts receivable, net			275.	4	
5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pe	er officer, contribut	director, or, or 35%		5	
6	Loans and other receivables from other disqualified p	ersons (as	s defined under			
	section 4958(f)(1)), and persons described in section	•	r i i i i i i i i i i i i i i i i i i i		6	
7	Notes and loans receivable, net		• • • • • • • • • • • • • • • • • • • •		7	
8	Inventories for sale or use			20,104.	8	20,583
8 9	Prepaid expenses and deferred charges			20/1011	9	20,000
1 0 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	I I	1		-	
Ł	Less: accumulated depreciation.	10b	321,450.	416,750.	10c	95,300
11	Investments – publicly traded securities				11	,
12	Investments – other securities. See Part IV, line 11.				12	
13	Investments – program-related. See Part IV, line 11.				13	
14	Intangible assets.				14	
15	Other assets. See Part IV, line 11				15	
16	Total assets. Add lines 1 through 15 (must equal line		F	621,010.	16	274,577
17	Accounts payable and accrued expenses				17	118
18	Grants payable				18	
19	Deferred revenue		•••••••••••••••••••••••••••••••••••••••		19	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability. Complete Part	V of Sche	edule D		21	
21 22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu controlled entity or family member of any of these pe	itor. or 35	%		22	
					23	
23 24	Unsecured notes and loans payable to unrelated third	•			23	
24		•			24	
	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com				25	3,729
26				0.	26	3,847
27 28 29 30 31 32 33	Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.		-			
27	Net assets without donor restrictions		-	621,010.	27	270,730
28	Net assets with donor restrictions				28	
	Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here				
29	Capital stock or trust principal, or current funds				29	
30	Paid-in or capital surplus, or land, building, or equipm	nent fund.			30	
31	Retained earnings, endowment, accumulated income	or other	funds		31	
22	Total net assets or fund balances			621,010.	32	270,730
32						

Form	990 (2024) AMERICAN VEGAN SOCIETY 22-6	058533		Pa	ge 12
Par					
	Check if Schedule O contains a response or note to any line in this Part XI.				. Х
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	72,2	261.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	01,4	155.
3	Revenue less expenses. Subtract line 2 from line 1	3	- :	29,1	.94.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	6	21,C)10.
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	-3	21,4	150.
9	Other changes in net assets or fund balances (explain on Schedule O)	9		3	364.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2	70,7	30.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🔲
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Cash Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis	d on a			
h	Were the organization's financial statements audited by an independent accountant?		2b		Х
5	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat basis, consolidated basis, or both.	te	LU		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		Х
_	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the U Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA	TEEA0112L 09/05/24		Form	990 ((2024)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. 2024

OMB No. 1545-0047

Depart Interna	Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Open to Pulse and the latest information.							Open to Public Inspection	
Name	Name of the organization Employer identific							ation number	
AMERICAN VEGAN SOCIETY 22-605853								33	
Par	Part I Reason for Public Charity Status. (All organizations must complete this part.) See instruct								ctions.
The o	orga	nization is not	a private found	lation because it is: (For lines 1 through 12,	check o	nly one	box.)	
1		A church, conv	vention of church	es, or association of cl	nurches described in sec	tion 1 70(b)(1)(A)(i).	
2		A school dese	cribed in sectio	n 170(b)(1)(A)(ii). (Att	ach Schedule E (Form	990).)			
3		A hospital or	a cooperative h	ospital service organ	ization described in se	ction 17	0(b)(1)(A	A)(iii).	
4		A medical res name, city, a	0	tion operated in conju	unction with a hospital	describe	d in sec	ction 170(b)(1)(A)(iii). E	Enter the hospital's
5		An organizati section 170(b	on operated for (1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or university owned	or oper	ated by	a governmental unit d	escribed in
6		A federal, sta	te, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1)	(A)(∨) .	
7		An organizatio in section 17	n that normally r 0(b)(1)(A)(vi).(eceives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from the general pu	blic described
8		, j			A)(vi). (Complete Part	,			
9					tion 170(b)(1)(A)(ix) oper (see instructions). Enter				
10	Х	from activities investment in	s related to its e come and unre	exempt functions, sub	nan 33-1/3% of its supp oject to certain exceptio e income (less section Part III.)	ons; and	(2) no r	nore than 33-1/3% of i	its support from gross
11		An organizati	on organized ar	nd operated exclusive	ely to test for public safe	ety. See	sectior	n 509(a)(4).	
12		or more publi	cly supported o	rganizations describe	ely for the benefit of, to d in section 509(a)(1) of upporting organization	or sectic	n 509(a)(2). See section 509(a	ut the purposes of one a)(3). Check the box on
а		Type I. A support	orting organizati	on operated, supervise gularly appoint or elect	d, or controlled by its sup a majority of the directo	ported c	, raanizat	ion(s), typically by giving	g the supported ion. You must
b		management of	porting organiz of the supporting te Part IV, Sect	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organization	having control or tion(s). You
С		Type III funct	ionally integrat	ed. A supporting orga	anization operated in co plete Part IV, Sections	onnectio A. D. an	n with, a d E.	and functionally integra	ated with, its supported
d		Type III non-f	unctionally intentionally intentionally intentionally intentional intentional intentional intentional intention in the construction of the constru	egrated. A supporting	organization operated must satisfy a distribu s A and D, and Part V.	in conn	ection w	ith its supported orgar t and an attentiveness	nization(s) that is not requirement (see
e		integrated, or	Type III non-fu	nctionally integrated	en determination from supporting organizatior	the IRS า.	that it is	s а Туре I, Туре II, Тур	e III functionally
t				organizations n about the supported					
		ame of supported of	-	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your c	s the ion listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						docur Yes	nent?		
(A)									
(B)									
(C)									
(D)									
(E) T									
Total									1

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

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

Section A. Public Support

JEC	tion A. I ublic Support						
	ndar year (or fiscal year nning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support				1		.
	ndar year (or fiscal year nning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
•	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activ					I	
	First 5 years. If the Form 990 is organization, check this box and	d stop here					
	tion C. Computation of Pul			11 - aluman (A)			
	Public support percentage for 20 Public support percentage from 2						%
	33-1/3% support test—2024. If the and stop here. The organization	the organization di	lid not check the b	box on line 13, an	id line 14 is 33-1/3	3% or more, check	k this box
b	33-1/3% support test–2023. If th and stop here. The organization	he organization did	d not check a box	x on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, c	check this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	and-circumstances	s test, check this I	box and stop here	e. Explain in Part '	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances te	and-circumstances est. The organizat	s test, check this l tion qualifies as a	box and stop here publicly supporte	e. Explain in Part	VI how the
18	Private foundation. If the organized	zation did not che	eck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions

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

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

Section A. Public Support (c) 2022 Calendar year (or fiscal year beginning in) (a) 2020 (b) 2021 (d) 2023 (e) 2024 (f) Total Gifts, grants, contributions, 1 and membership fees received. (Do not include any "unusual grants.").... 129,219 248,078 281,317 233,632 229,694 1,121,940. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose... <u>35,9</u>48 4,258 6,286 17,430 89<u>,046.</u> 25,124 3 Gross receipts from activities that are not an unrelated trade or business under section 513. 0. Tax revenues levied for the organization's benefit and either paid to or expended on 0. its behalf... The value of services or facilities furnished by a governmental unit to the organization without charge ... Ω Total. Add lines 1 through 5... 133,477 254,364 298,747 258,756 265,642 1 210 986. Amounts included on lines 1, 7a 2, and 3 received from disqualified persons.... 0 0 0 0 50,000 50,000. **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. 0 0 0 0 0 n c Add lines 7a and 7b.... 0 0 50,000 0 0 50 000. 8 Public support. (Subtract line 7c from line 6.). 160,986 1 Section B. Total Support (e) 2024 (a) 2020 (c) 2022 (f) Total (b) 2021 (d) 2023 Calendar year (or fiscal year beginning in) 9 Amounts from line 6..... 133,477 254,364 298,747 258,756 265,642 1,210,986. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . 145 194 167 121 6,264 6,891. b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975... c Add lines 10a and 10b 145 167 194 121 6,264 6,891 11 Net income from unrelated business activities not included on line 10b. whether or not the business is regularly carried on 0. 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI 16,260 355 16,615. Total support. (Add lines 9, 13 10c, 11, and 12.)..... 133,644. 270,769 298,941 258,877. 272,261 1,234,492. First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)...... % 15 94.05 16 Public support percentage from 2023 Schedule A, Part III, line 15. 16 94.52 ÷ Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))..... 17 0.56 0\0 0\0 18 Investment income percentage from 2023 Schedule A, Part III, line 17..... 18 0.07 19a 33-1/3% support tests-2024. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 Х is not more than 33-1/3%, check this box and stop here. The organization gualifies as a publicly supported organization **b** 33-1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions..... 20

22-6058533

Page 4

 Part IV
 Supporting Organizations

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

Section A. All Supporting Organizations

			Vee	Ma
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was	•		
	described in section 509(a)(1) or (2).	2		
38	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
I	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.	24		
		3b		
(c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4;	a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
I	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
(c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5	a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
I	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
(Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990)</i> .	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
I	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
(Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
10a	a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10-		
		10a		
I	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

2a

2b

3a

3h

11 Has the organization accepted a gift or contribution from any of the following persons?

a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?

AMERICAN VEGAN SOCIETY

b A family member of a person described on line 11a above?

c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

Section B. Type I Supporting Organizations

Part IV Supporting Organizations (continued)

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in Part VI how the supported* organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the 1 organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).* 2 2
- 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete line 2 below. а
 - The organization is the parent of each of its supported organizations. Complete line 3 below. b
 - The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). С

2 Activities Test. Answer lines 2a and 2b below.

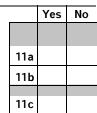
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- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
- **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.

3

Yes

No



Yes

Yes

No

1

2

1

No

Page 6

			(B) Current Year
Section A – Adjusted Net Income		(A) Prior Year	(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of income or for management, conservation, or maintenance of property held for production of income (see instructions)			
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for tax year or assets held for part of year):	or short		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergen temporary reduction (see instructions).	су б		

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

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Schedule A (Form 990) 2024

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	ations (continue	d)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	1			
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	IS,	2		
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organization in Part VI). See instructions.	on is responsive (provide	e details	8	
9	Distributable amount for 2024 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2024	ons	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2024				
	From 2019				
	From 2020				
	From 2021				
	From 2022				
e	PFrom 2023				
1	Total of lines 3a through 3e				
ç	Applied to underdistributions of prior years				
h	Applied to 2024 distributable amount				
i	Carryover from 2019 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2024 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
-	Applied to 2024 distributable amount				
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2025. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2020				
	Excess from 2021				
C	Excess from 2022				
c	Excess from 2023				
e	Excess from 2024				

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Schedule A (Form 990) 2024

Schedule A (Forr	n <mark>990) 20</mark> 2	4	AME	RICAN VEG	AN	SOCIETY			22-605	8533	Page 8
Part VISupplemental 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 III, Li	ine 12 - C	other Income	9								
<u>Nature</u>	and Sou	rce		2024		2023		2022	 2021	2020	
MISCELL SBA PPP		INCOME	\$	355.					\$ 16,260.		
		Total	\$	355.	\$	0.	\$	0.	\$ 16,260.	\$	0.

(Fo (Rev. 1	SCHEDULE D (Form 990) Supplemental Financial Statements (Rev. December 2024) Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Department of the Treasury berged December 2024) Go to www.irs.gov/Form990 for instructions and the latest information.					
Intern	of the organization	venue Service				
Name	or the organization				Employer	dentification number
AMF	RICAN VEGAN	SOCIETY			22-605	8533
Par	t I Organiz	zations Maintaining Do	nor Advised Funds or Other Si	milar Funds or A		
	Comple	te if the organization ar	nswered "Yes" on Form 990, Pa	rt IV, line 6.		
_			(a) Donor advised funds	(b) F	unds and	other accounts
1		end of year				
2 3		ntributions to (during year)				
4		at end of year				
5	Did the organizati	ion inform all donors and do	nor advisors in writing that the assets h organization's exclusive legal control?.	eld in donor advised	funds	Yes No
6	Did the organizat	ion inform all grantees, donc poses and not for the benefi	rs, and donor advisors in writing that g t of the donor or donor advisor, or for a	rant funds can be us ny other purpose cor	ed only	Yes No
Par		vation Easements				
_		3	nswered "Yes" on Form 990, Pa	,		
1		nservation easements held by	y the organization (check all that apply)). reservation of a histo	rically imp	ortant land area
		natural habitat		reservation of a certil	5 1	
		of open space				
2	Complete lines 2a last day of the tax	through 2d if the organization I x year.	neld a qualified conservation contribution in	n the form of a conser	vation ease	ement on the
					leld at the	End of the Tax Year
			ments	-		
	0		fied historic structure included on line 2			
			on line 2c acquired after July 25, 2006,	-		
	a historic structur	e listed in the National Regis	ster	2d		
3	Number of conserv tax year	ation easements modified, trar	nsferred, released, extinguished, or termina	ated by the organizatio	on during th	e
4		where property subject to co	onservation easement is located			
5	Does the organization	ation have a written policy re	garding the periodic monitoring, inspec	tion, handling of viol	ations, _	
			nts it holds?			Yes No
6	Staff and volunteer	r hours devoted to monitoring,	inspecting, handling of violations, and enfo	orcing conservation ea	sements di	iring the year
7	Amount of expense \$	es incurred in monitoring, inspe	ecting, handling of violations, and enforcing	g conservation easeme	ents during	the year
8	Does each conse and section 170(h	rvation easement reported on (4)(B)(ii)?	n line 2d above satisfy the requirements	s of section 170(h)(4)(B)(i) 	Yes No
9	In Part XIII, descuinclude, if application conservation ease	able, the text of the footnote	ports conservation easements in its reve to the organization's financial statement	enue and expense st ts that describes the	atement a organizat	nd balance sheet, and ion's accounting for
Par	t III Organiz	zations Maintaining Co	llections of Art, Historical Treas nswered "Yes" on Form 990, Pa	sures, or Other S rt IV, line 8.	Similar A	ssets
1a	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in its re- Id for public exhibition, education, or re al statements that describes these items	esearch in furtherance	l balance s e of public	sheet works of art, service, provide in
b	following amounts	s relating to these items.	r FASB ASC 958, to report in its revenu or public exhibition, education, or research			
	(i) Revenue inclu	uded on Form 990, Part VIII,	line 1		\$	
2	(ii) Assets includ	ed in Form 990, Part X			\$	La colta a
2	It the organization amounts required	received or held works of art, I I to be reported under FASB	nistorical treasures, or other similar assets ASC 958 relating to these items.	tor financial gain, pro	vide the fol	Iowing
a						

b Assets included in Form 990, Part X		\$
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	TEEA3301L 11/13/24	Schedule D (Form 990) (Rev. 12-2024)

Schedule D (Form 990) (Rev. 12-2024) AMERICAN			22-605		Page 2
Part III Organizations Maintaining Co	ollections of Art, His	storical Treasures,	or Other Similar As	ssets (conti	inued)
3 Using the organization's acquisition, accession, items (check all that apply).		, ,	ake significant use of its	collection	
a Public exhibition	O	or exchange program			
b Scholarly research	e Other				
c Preservation for future generations	tions and evaluin how they	. further the evention is at an l	in		
4 Provide a description of the organization's collect Part XIII.					
5 During the year, did the organization solicit of to be sold to raise funds rather than to be main to be main the solicit of		t, historical treasures, corganization's collection	?	Yes	No
Part IV Escrow and Custodial Arrang Complete if the organization a Form 990, Part X, line 21.	inswered "Yes" on F			n amount c	วท
1a Is the organization an agent, trustee, custodi on Form 990, Part X?	an, or other intermediary	for contributions or oth	ner assets not included	Yes	No
b If "Yes," explain the arrangement in Part XIII and					
				Amount	
c Beginning balance					
d Additions during the year					
e Distributions during the year			1e		
f Ending balance			1f		
2a Did the organization include an amount on Fe	orm 990, Part X, line 21,	for escrow or custodial	account liability?	Yes	No
b If "Yes," explain the arrangement in Part XIII	. Check here if the expla	nation has been provide	ed in Part XIII	•	
Part V Endowment Funds					
Complete if the organization a	inswered "Yes" on F	orm 990, Part IV, I	ine 10.		
(a) Currei	nt year (b) Prior yea	r (c) Two years back	(d) Three years back	(e) Four yea	urs hack
1a Beginning of year balance					To Such
b Contributions				-	
• Net investment seminary asian					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities					
and programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentage of the curr	•	ne 1g, column (a)) held	as:		
a Board designated or quasi-endowment	%				
-	0				
c Term endowment	1 1 0 0 0 /				
The percentages on lines 2a, 2b, and 2c should	equal 100%.				
3a Are there endowment funds not in the possessio	n of the organization that a	are held and administered	I for the		
organization by: (i) Unrelated organizations?				Yes	No
(i) Unrelated organizations?				3a(i)	<u> </u>
b If "Yes" on line 3a(ii), are the related organizations?				3a(ii)	<u> </u>
				. 3b	
4 Describe in Part XIII the intended uses of the					
Part VI Land, Buildings, and Equipm Complete if the organization answered		IV, line 11a. See Form 9	90, Part X, line 10.		
Description of property	(c) Accumulated depreciation	(d) Book value			
1a Land		95,300.		95	5,300.
b Buildings		303,700.	303,700.		0.
c Leasehold improvements					
d Equipment		17,750.	17,750.		0.
e Other					
Total. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part X,	line 10c, column (B))			5,300.
BAA			Schedule D (Forr	n 990) (Rev. 12	<u>2-2024)</u>

Part VII	Investments – Other Securities	Form 000 Port IV line	N/A	
(a) Doscriu	Complete if the organization answered "Yes" on ption of security or category (including name of security)	f voar markot valuo		
	al derivatives	(b) Book value	(c) Method of valuation: Cost or end-o	
· ·	held equity interests			
(3) Other				
(A)				
<u>(B)</u>				
<u>(C)</u>				
<u>(D)</u>				
<u>`</u> (E)				
(F)				
(G)				
(H)				
Total. (Colum	n (b) must equal Form 990, Part X, line 12, column (B))			
Part VIII	Investments – Program Related Complete if the organization answered "Yes" on	n Form 990, Part IV, line	N/A 11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	nn (b) must equal Form 990, Part X, line 13, column (B))			
Part IX	Other Assets	N/A		
	Complete if the organization answered "Yes" on			
	(a) De	scription		(b) Book value
(1)				
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, line 15, c	column (B))		
Part X	Other Liabilities Complete if the organization answered "Yes" on	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	
1.		iption of liability		(b) Book value
	al income taxes ROLL LIABILITIES			3,729.
(3)				5,129.
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 25, co			3,729.
	uncertain tax positions. In Part XIII, provide the text of the fo nder FASB ASC 740. Check here if the text of the footnote has			

BAA

Schedule D (Form 990) (Rev. 12-2024)

Schedule D (Form 990) (Rev. 12-2024) AMERICAN VEGAN SOCIETY	22-6058533	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return N/A	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a		
b Donated services and use of facilities 2b		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.) 2d		
e Add lines 2a through 2d.	2e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return N/A	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1.	3	
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		
c Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part XIII Supplemental Information		

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

(Rev. December 2024)

Department of the Treasury Internal Revenue Service Open to Public Inspection

Name of	the	organization
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AMERICAN VEGAN SOCIETY

Employer identification number 22-6058533

Form 990, Part III, Line 4a - Program Service Accomplishments

For the year ended December 31 2024, AVS operated the following successful programs with digital and in-person resources that continue to welcome people to the vegan lifestyle and enjoy being vegan:

(i) Philadelphia Program

AMERICAN VEGAN CENTER

American Vegan Center is a welcoming cultural hub in Philadelphia's historic district for vegans and pre-vegans, visitors and locals. This international tourist attraction is AVS' single biggest program; a unique combination of museum, information, community center, and engaging activities. Friendly experts are ready to help guide the way along the vegan journey: taste delicious vegan food samples, explore a compassionate wardrobe, find an ethical compass, meet like-minded friends, receive restaurant dining advice, participate in a veg history walking tour, and enjoy events.

(ii) National Programs

EDUCATIONAL RESOURCES AND ADVOCACY

Publications/Information

American Vegan magazine-delightfully inspirational original content in print or PDF provides basic info on health, environment, animals, compassion, and recipes
AmericanVegan.org-website offering reliable information on veganism and ahimsa, solid resources for beginners and anyone looking to learn

•E-Newsletter-free monthly communication of news and events

•Social media-Facebook, Instagram, and X posts with useful info and events to welcome vegan-curious people

•AVS also shares the legacy of founder Jay Dinshah including Powerful Vegan Messages book; Jay's recorded videos, essays, and speeches.

SCHEDULE O (Form 990)

(Rev. December 2024)

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 Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

Name of the organization

AMERICAN VEGAN SOCIETY

Form 990, Part III, Line 4a - Program Service Accomplishments

CELEBRATIONS AND COMMUNITY

Celebrations/Events

•Vegan Cuisine Month (February, global celebration)

•Dynamic Harmlessness Day (do least harm and most good, November 2 and every day)

•American Vegan Garden Party (Sunday of Memorial Day Weekend in NJ)

•Pilot projects to inspire (culinary schools, progressive dinners, showcase dinners)

•Online events attract attendees worldwide

Community

•Vegan Information Points (VIPs)-friendly local guides across the U.S. (& some international) provide special attention to help vegan-curious people in their area
•Vegan Synergy-collaboration with over 40 organizations to provide additional support for those beginning a vegan journey or vegans wanting more connections
•Vegan Trademark-third-party certification of vegan products makes it easier for newcomers to find vegan goods and helps tip the supply and demand in favor of these

items

American Vegan Speakers Bureau-over 80 speakers each offer great talks on veganism
Outreach at community events

•Volunteer and Internship Opportunities-ways for pro-vegan individuals to get involved

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

Freya Dinshah president is the mother of Anne Dinshah vice president

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents

Bylaws and organization structure, but technically not into effect until 2025 (after membership meeting Jan 4)

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 Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

AMERICAN VEGAN SOCIETY

Employer identification number

22-6058533

Form 990, Part VI, Line 11b - Form 990 Review Process

Sent by email to board for comment prior to filing.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

All staff and board required to read and sign COI policy annually.

Form 990, Part VI, Line 18 - Explanation of Other Means Forms Available For Public Inspection

Financial statements are available upon request and announced as such at the annual

general membership meeting in May.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

PRIOR YEAR 990 NET ASSETS DIF	FFERENCE	\$ 364.
	Total	\$ 364.

20	24
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Federal Supporting Detail

Page 1

AMERICAN VEGAN SOCIETY

Reconciliations (990) Prior period adjustments OMISSION OF ACCUMULATED DEPRECIATION IN PRIOR YEARS -321,450. -321,450. <u>\$</u> Total <u>\$</u>

12/31/24

2024 Federal Book Depreciation Schedule

Page 1

AMERICAN VEGAN SOCIETY

22-6058533

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal Depr.	Salvage /Basis Reductn	Depr.	Prior Depr.	Method	Life_Rate	Current
Form 990/99	190-PF														
Buildings															
1 BUILD	DING AT 72 DINSHAH LANE	6/01/69		184,200							184,200	184,200	S/L	30	0
3 BUILD	DING AT 56 DINSHAH LANE	6/01/74		119,500							119,500	119,500	S/L	30	0
Total	Buildings			303,700		0	0		0	0 (303,700	303,700			0
Land															
2 LAND) at 72 dinshah lane	6/01/69		45,700							45,700				0
4 LAND) AT 56 DINSHAH LANE	6/01/74		49,600							49,600				0
Total	Land			95,300		0	0		0	0 (95,300	0			0
Machinery	y and Equipment														
5 EQUIP	PMENT	6/01/74		17,750							17,750	17,750	S/L	5	0
Total	Machinery and Equipment			17,750		0	0		0	0 () 17,750	17,750			0
Total	Depreciation			416,750		0	0		0	0 (416,750	321,450			0
Grand	Total Depreciation			416,750		0	0		0	0(0 416,750	321,450			0