Department of the Treasury

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

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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.

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

Inter	nal Reve	nue Service	Go to www.irs.gov/Form990 for instructions and the lates	t information.		Inspection		
Α	For the	e 2023 calen	dar year, or tax year beginning , 2023, and end	ing		, 20		
в	Check if	f applicable:	C Name of organization Chicago Bible Society		D Emple	oyer identification number		
	Address	s change	Doing business as		36-2495301			
	Name cl	hange	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Teleph	none number		
	Initial ret	turn	8765 W. Higgins	404	(773)857-0741		
	Final retu	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code					
	Amende	ed return	Chicago, IL 60631		G Gross	receipts \$ 304,334.		
	Applicat	tion pending	F Name and address of principal officer:			or subordinates? 🗌 Yes 🔀 No		
			Kenneth Oliver, 4300 N. Heritage, Chicago, IL 60	613 H(b) Are all s	ubordinat	es included? 🗌 Yes 🗌 No		
I	Tax-exe	empt status:	▼ 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	lf "No,"	attach a li	st. See instructions.		
	Website	,		H(c) Group e	· · ·			
-		organization: 🗙	Corporation Trust Association Other L Year of form	nation: 1840	M State	of legal domicile: IL		
P	art I	Summa						
	1		cribe the organization's mission or most significant activities: The Chi		is a minis	stry that distributes Bible's		
& Governance			ons, hospitals, and shelters and promotes inc	reased				
nar			of the Bible.					
ver	2		box \square if the organization discontinued its operations or disposed		1 1	s net assets.		
ŝ	3				3	7		
ς δο	4		independent voting members of the governing body (Part VI, line 1	,	4	5		
itie	5		per of individuals employed in calendar year 2023 (Part V, line 2a)		5	5		
Activities	6		per of volunteers (estimate if necessary)		6	12		
Ă	7a		ated business revenue from Part VIII, column (C), line 12		7a	0.		
	b	Net unrelat	ed business taxable income from Form 990-T, Part I, line 11		7b	0.		
		A		Prior Yea		Current Year		
ne	8		ons and grants (Part VIII, line 1h)		,334.	292,240.		
Revenue	9	•	ervice revenue (Part VIII, line 2g)	9	,018.	11,836.		
Rev	10		income (Part VIII, column (A), lines 3, 4, and 7d)		-			
	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	258.		
	12		ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	235	,352.	304,334.		
	13 14		I similar amounts paid (Part IX, column (A), lines 1–3)					
	14		aid to or for members (Part IX, column (A), line 4)	1 4 17	0.00	201 256		
ses	16a		al fundraising fees (Part IX, column (A), line 11e)	14/	,968.	201,356.		
Expenses	b		aising expenses (Part IX, column (D), line 25) 35, 342.					
Ĕ	17		enses (Part IX, column (A), lines 11a–11d, 11f–24e)	EG	,043.	53,127.		
	18		nses. Add lines 13–17 (must equal Part IX, column (A), line 25)		,043. ,011.			
	19	•	ess expenses. Subtract line 18 from line 12			254,483.		
<u>ت 8</u>				3⊥ Beginning of Curi	,341.	49,851. End of Year		
Net Assets or Fund Balances	20	Total accord	s (Part X, line 16)		,138.	225,992.		
Asse Bali	20		ties (Part X, line 26)	T 10	,	220,992.		
Net	21		or fund balances. Subtract line 21 from line 20	176	,138.	225,992.		
- 11	22			Т 10	, 0 .	445,994.		

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 preparer (other than officer) is based on all information of which preparer has any knowledge.

			-	L1/06/2024								
Sign	Signature of officer Date Kenneth Oliver, Executive Director Date											
Here												
	Type or print name and title											
Paid	Print/Type preparer's name	Preparer's signature	Date	Check 🗙 if	PTIN							
Preparer	Alan T Hall, CPA		11/12/202	4 self-employed	P00967542							
Use Only		tes, CPAs	Fir	Firm's EIN 36-4288387								
	Firm's address 21145 Ridgeland	Phone no. (773)233-6450										
May the IR	May the IRS discuss this return with the preparer shown above? See instructions											
For Paperwork Reduction Act Notice, see the separate instructions. BAA REV 05/09/24 PRO Form 990 (2023)												

Form 99		age 2
Part	II Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
•	The Chicago Bible Society is a ministry that distributes Bible's	
	to prisons, hospitals, and shelters and promotes increased	
	reading of the Bible.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	No
	prior Form 990 or 990-EZ?	NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	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 measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$90,894. including grants of \$0.) (Revenue \$0.)	
	Program A - Scripture Provision - Chicago Bible Society distributes	
	Bible scripture portions, Study Guides to jails, hospitals,	
	shelters & churches.	
4b	(Code:) (Expenses \$91,342. including grants of \$0.) (Revenue \$0.)	
	Program B - Scripture Encouragement - Chicago Bible Society	
	sponsors bible study and education programs to encourage reading	
	and understanding.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
10		
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 182,236.	

Form 99	90 (2023)		F	Page 3
Part	IV Checklist of Required Schedules			
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	×	
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	^	×
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? <i>If "Yes," complete Schedule C, Part II</i>	4		×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .	5		×
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? <i>If "Yes," complete Schedule D, Part I</i>	6		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		×
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		×
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		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		×
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		×
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		×
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		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a b	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a		×
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		×
16	for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		×
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		×
18	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		×
19	Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		×
15	If "Yes," complete Schedule G, Part III	19		×
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
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		×

	90 (2023)			Page 4
Part	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23		
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	23 24a		×
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? <i>If "Yes," complete Schedule L, Part I</i>	24d 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? <i>If "Yes," complete Schedule L, Part I</i>	25b		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		×
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		×
b c	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28b 28c		××
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		××
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	31		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35a 35b		×
36	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		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	×	
Part			•	
			Yes	No
1a b c	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		

Part N Statements Regarding (ther IRS Filings and Tax Compliance (continued) Yes No 28 Enter the number of employees reported on Form V-3, Transmital of Vage and Tax setures? 20 × 39 Did the organization flag did the organization flag lenguide federal employment tax returns? 20 × 30 Did the organization have unrelated business gross income of \$1,000 or more during the year? 38 × 34 At any time during the calendar year, did the organization have an interest in, or a signature or other authority own, a financial account's of the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 38 × 54 Was the organization is aparty to a prohibited tax shelter transaction at any time during the tax year? 56 × 56 Does the organization have an multity care shelts that are normally grader than \$100.000, and did the organization include with every solicitation an express statement that suck contributions or the organization neal tax year to a polymeint in excess of \$75 made party is a contribution and party for prohibited tax shelter transaction 770(-). 56 × 7 Organization receive a payment in excess of \$75 made party is a contribution and party for groods and services provided to the payor? 56 57 7 Organization nealeva anything in eaces of \$75 made party is a contribut		0 (2023)			Page 5
Statements, filed for the calendar year ending with or within the year covered by this return? 2a 5 3b If the erganization have unrelated business grass income of \$1,000 or more during the year? 3a X 3b If the erganization have unrelated business grass income of \$1,000 or more during the year? 3a X 3b If "Sei", that filds 1 form 990-1 for this year? // %0' to the 2b, provide an explanation on Schedule O 4a X 3b If "Sei", that filds 1 form 990-1 for this year? // %0' to the schedule or other submitly over, a financial account? 4a X 3b If "Sei", that filds 1 form 10 foreign country (such as bank account, securities account, or other financial Accounts (FBAP). 5a X 3c X 5b X 5a X 3c Did any taxable party notify the organization that was or is a party to a prohibited tax shelter transaction? 5a X 3c Did the organization include with every solicitation an express statement that such contributions of the very organization explores a party notify the organization include when ever 5t x deductible as christhat as contributions of the very organization sector 10x deductible as christhat as contributions of the very organization sector 10x deductible as christhat as contributions of the very solicitation an express statement that such contributions of the organization include very enductible as aspare 10x deguctible as christhat as very endu	Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
b frain least one is reported on line 2a, did the organization file all required federal employment fax returns? 2b x b ff "Yes," has it filed a Form 980-T for this year? ("Yo' to <i>line 2b, provide an explanation on Schedule</i> 0) 3b 3b b ff "Yes," has it filed a Form 980-T for this year? ("Yo' to <i>line 2b, provide an explanation on Schedule</i> 0) 3b 3b b ff "Yes," has it filed a Form 980-T for this year? ("Yo' to <i>line 2b, provide an explanation on Schedule</i> 0) 4a x b ff "Yes," anter the name of the foreign country see instructions for iling requirements for fineDRI Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a 5b Did any travelop ary notify the organization that it was or is a party to a prohibited tax shelter transaction? 5a c Did any travelop ary notify the organization that it was or is a party to a prohibited tax shelter transaction? 5a c Dose the organization neave annual gross receipts that are normally greater than \$100,000, and did the organization include with very solicitation and party to a prohibited tax shelter transaction? 5a d ff "Yes," did the organization neaver were solicitation and party for groods and services provided to the payor? 7a x d ff "Yes," did the organization neaver sequencing on the payor? 7d x d <th>2a</th> <th></th> <th></th> <th></th> <th></th>	2a				
3a Did the organization have unrelated business gross income of \$1.000 or more during the year?	b		2b	×	
b If "Yes," has it field a Form 990-T for this year? If YNo* to line 3b, provide an explanation on Schedulo 0. 3b a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, the state in the foreign country (such as a bark account, securities account, or other financial accounts (FBAR). b If "Yes," enter the name of the foreign country (such as bark account, securities account, or other financial accounts (FBAR). 5a Xas the organization aperly to a prohibet dax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c c To cancer organization sciulation insult, we near all groups are scients that are normally greater than \$100,000, and did the organization sciulation insult, we near large science that are normally greater than \$100,000, and did the organization near preceive deductible contributions and partly to goods and services provided to the pary? 6a c Did the organization near order way any ment in excess of \$75 made partly as a contribution and partly to goods and services provided to the pary? 7c × d TYes," did the organization neared a contribution or any science parization free way any any contributions and partly to parization meaker any cancel and the partly as a contribution or any science provided? 7c × d If "Yes," did the organization neare or forms 8282 fied during the ye	-				×
4a At any time during the calendar year, did the organization have an interest in, or a signature or other athority over, a financial account if a prequirements for Fin/CEN Form 114, Report of Foreign Bank and Financial accounts (FBAR). b If "Yes," enter the name of the foreign country used to be a back account, securities account, or other financial accounts (FBAR). b Was the organization aprily to a prohibited tax shelter transaction at any time during the tax year? 5a c Signature or the organization in any to a prohibited tax shelter transaction at any time during the tax year? 5a c Signature or the organization include with even y solicitation an express statement that such contributions or gifts were not tax deductibles? 5a c Did the organization include with even y solicitation an express statement that such contributions and argencies provided to the payor? 7a X d H "Yes," did the organization necesson 375 mode party as a contribution and partly for goods and services provided to the payor? 7a X d H "Yes," did the organization necesson 375 mode party as a contribution and partly for goods and services provided to the payor? 7a X d H "Yes," did the organization calve any premiums, on a personal benefit contract? 7a X d H "Yes," did the organization make any taxable distributions on advised fund maintained by the sponsoring organization meave substation solicity or indirectly or in					
b If "Yes," enter the name of the foreign country See instructions for filling requirements for Fin-CEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Sa Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? So So Did any taxable party notify the organization file form 8886-17. So So Go Des the organization nave annual gross receipts that are normally greater than \$100,000, and id the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? Go Organizations float may receive deductible contributions under section 170(c). Did the organization notes are statement that such contributions or gifts were not tax deductible? Ta Norganization sective a payment in excess of 357 made party as a contribution and party tor goods and services provided to the payor? Ta Ta Norganization receive any funds, directly or indirectly, to pay premiums, on a personal benefit contract? Te X Norganization receive any funds, directly or indirectly, on a parsonal benefit contract? Te X Norganization receive any funds, discetly or indirectly, on a parsonal benefit contract? Th X Norganization receive any funds, discetly or indirectly, on a parsonal benefit contract? Th X Nore transolution for maxes	-	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			~
55 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization file Form 8886-17 5b X 6D Does the organization have annual gross receipts that are normally greater than \$100,000 add did the organization receive a payment taw even of tax deductible a contrabution solicit any contributions that were not tax deductible? 6c 7 Organization neckive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7d 7d 7 Did the organization neckive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7d 7d 7d 7 Did the organization neckive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7d	b	If "Yes," enter the name of the foreign country	40		~
b) Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X 6 Dress the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible as charitable contributions or gifts were not tax deductible contributions under section 170(c). 0 a) Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 0 b) Did the organization notify the donor of the value of the goods or services provided? 7a X c) Did the organization notify the donor of the value of the goods or services provided? 7d 7c X c) Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7t X 7c X c) Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8982 as required? 7d X 7d X d) If "Yees," indicate the number of forms 8282 filed during the year 7d X 7d X d) Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7t X 7t X <th>_</th> <th></th> <th></th> <th></th> <th></th>	_				
c if "Yes" to line 5a or 5b, dd the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5c 7 Organization stature version tax deductible as charitable contributions? 6b 7 Organization receive a payment in excess of 355 made party as a contribution and partly for good and services provided to the payor? 7a 8 if "Yes," did the organization receive a payment in excess of 355 made party as a contribution and partly for good and services provided to the payor? 7d 9 bid th organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7d 7 C quantization during the year, pay premiums, on a personal benefit contract? 7d 7 If the organization receive a payment ims, dorectly or indirectly, to pay premiums on a personal benefit contract? 7d 7 If the organization receive a contribution of qualified intellectual property, did the organization file Form 8282 7d 8 X 9 9a 9 Soponsoring organization make any taxable distributions under section 4966? 9a 9 Soponsoring organization make any taxable distributions and aptife or payment inth					
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solit any contributions that were not tax deductible contributions? 6a × b If "Yes," did the organization include with every solicitation an express statement that such contributions of gifts were not tax deductible? 6a × c Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goots and services provided to the payor? 7a × c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7a × d If "Yes," indicate the number of Forms 8282 filed during the year 7d × 7a d Did the organization receive a quarteriation directly, to pay premiums on a personal benefit contract? 7f × f If the organization receive a contribution of qualified intelectual property, did the organization fiele Soft do consoring organization make a distributions under section 4966? 9a × 9 Sponsoring organization make any taxable distributions under section 4966? 9a × 10 the sonsoring organization make any taxable distributions under section 4966? 9a × 11 Section					×
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 b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. 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? If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? 			14a		×
 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? If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? 					
 excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 4720, Schedule O. 					
 If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?			15		×
 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 × 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?					
If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? 17	16		16		×
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? 17	-		-		
that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17				
If "Yes," complete Form 6069.			17		
		If "Yes," complete Form 6069.			

Form 99	90 (2023)		F	-age 6
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See in	nstruc	tions.
	Check if Schedule O contains a response or note to any line in this Part VI			X
Secti	on 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 7 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.	-		
ь 2	Enter the number of voting members included on line 1a, above, who are independent . 1b 5 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		×
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		×
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		×
6	Did the organization have members or stockholders?	6		×
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
h	one or more members of the governing body?	7a		×
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	76		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		×
Ū	the year by the following:			
а	The governing body?	8a	×	
b	Each committee with authority to act on behalf of the governing body?	8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	, í	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		×
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	×	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	×	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>	12b	×	
C	describe on Schedule O how this was done.	100	~	
13	Did the organization have a written whistleblower policy?	12c 13	×	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	×	
15	Did the process for determining compensation of the following persons include a review and approval by	14	~	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	×	
b	Other officers or key employees of the organization	15b		×
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
1 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		×
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		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	T (sec	tion 5	501(c)
10	X Own website Another's website Upon request Other (explain on Schedule O)	¢ :		- 12

- Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Deborah Renaud, 8765 W. Higgins, Ste 404, Chicago, IL 60631 (773)857-0741

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

				(0	C)					
(A)	(B)			Pos	ition			(D)	(E)	(F)
Name and title	Average	(do not check more than one box, unless person is both an						Reportable	Reportable	Estimated amount
	hours	office				or/trust		compensation	compensation	of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1)M. Renetzzky	1.00									
President		×		×				0.	0.	0.
(2) Wendy Cotter	1.00	-								
Vice President		×						0.	0.	0.
(3)Jaffrey Schwab	1.00									
Treasurer		×		×				0.	0.	0.
(4) Kenneth Oliver	30.00									_
Executive Director		×		×				56,500.	0.	0.
(5) David Dault	1.00									_
Secretary		×						0.	0.	0.
(6) Jesus Nunez Director	1.00	×						0	0	0
	1 00							0.	0.	0.
(7) Lydia Talbot Director	1.00	×						0.	0.	0.
					-			0.	0.	0.
(8)	+									
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
	1	ļ	L	<u> </u>	L	ļ	L	<u> </u>	<u> </u>	

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Emj	ploy	yee	s, an	d⊦	lighest Compe	nsated	Emplo	yees (contir	nued)
	(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		Position (do not check more than one box, unless person is both an officer and a director/trustee) (D) (E) (E) (E) (E) (E) (E) (E) (E) (E) (E		able sation	0	(F) ated am of other pensati					
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	- from the organization (W-2/ 1099-MISC/ 1099-NEC)	organizatio 1099-N 1099-N	ons (W-2/ IISC/	fr	om the ization	and
(15)														
(16)			-											
(17)			-											
(18)			-											
(19)			-											
(20)														
(21)														
(22)			-											
(23)														
(24)														
(25)			-											
1b c	Subtotal	VII, Sectio	 on A	·	·	 	•		56,500.		0.			0.
d					A list	 ed :	above		56,500.	e than \$1	0.000	of		0.
	reportable compensation from the organi							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		o than y i	00,000			
3	Did the organization list any former of employee on line 1a? If "Yes," complete								loyee, or highes			3	Yes	No X
4	For any individual listed on line 1a, is the organization and related organizations <i>individual</i>	e sum of re greater th	portal an \$1	ole (150,	con 000	nper 1? <i>11</i>	nsatio f <i>"Ye</i> s	n a s, "	and other competended complete Scheel	nsation fr	om the			×
5	Did any person listed on line 1a receive of for services rendered to the organization											-		×
Secti	on B. Independent Contractors													
1	Complete this table for your five high compensation from the organization. Rep													
	(A) Name and business add	ress							(B) Description of serv	/ices	((C) Compens		

	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to received more than \$100,000 of compensation from the organization	those listed above) who	

Form 9							Page 9
Part	t VIII						
		Check if Schedule O contains a respon	ise or note to an	y line in this Pa	art VIII		<u> </u>
				(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					
ant	b	Membership dues					
no Gr	с	Fundraising events 1c	47,950.				
fts, ır A	d	Related organizations 1d					
Contributions, Gifts, Grants, and Other Similar Amounts	е	Government grants (contributions) 1e					
ons, Sin	f	All other contributions, gifts, grants,					
utic		and similar amounts not included above 1f	244,290.				
Oth	g	Noncash contributions included in					
ont nd		lines 1a–1f 1g					
<u>o</u> a	h	Total. Add lines 1a-1f		292,240.			
Ø	_		Business Code				
Program Service Revenue	2a	Program Service	813110	11,836.	11,836.	0.	0.
sen ue	b						
n S /en	c						
jram Ser Revenue	d						
rog	e						
٩	f g	All other program service revenue Total. Add lines 2a–2f		11,836.			
	3	Investment income (including dividende		11,030.			
		other similar amounts)					
	4	Income from investment of tax-exempt bo					
	5	Royalties					
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	с	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
nue	b	Less: cost or other basis					
		and sales expenses . 7b					
Sev	С	Gain or (loss) 7c					
Other Reve	d	Net gain or (loss)					
Oth	8a	Gross income from fundraising					
0		events (not including \$ 47,950. of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	c	Net income or (loss) from fundraising eve	nte				
	9a	Gross income from gaming					
	04	activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activitie	es				
		Gross sales of inventory, less					
		returns and allowances 10a					
	b	Less: cost of goods sold 10b					
	с	Net income or (loss) from sales of invented	ory				
ns			Business Code				
leoi		Other Program Income	813110	258.	258.	0.	0.
lan	b						
Miscellaneous Revenue	c	A II					
Mis	d	All other revenue		050			
_	e	Total. Add lines 11a–11d		258.			
	12	Total revenue. See instructions		304,334.	12,094.	0.	0.

Part IX Statement of Functional Expenses

Check if Schedule O contains a response or note to any line in this Part IX **(D)** Fundraising (B) Program service Do not include amounts reported on lines 6b. 7b. (A) Total expenses (C) Management and 8b. 9b. and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 56,500. 28,250. 19,775. 8,475. 6 Compensation not included above to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . Other salaries and wages 7 123,087. 9,010. 9,210. 104,867. Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) 6,826. Other employee benefits 9 8,031. 0. 1,205. 10 Payroll taxes 13,738. 10,183. 2,202. 1,353. Fees for services (nonemployees): 11 Management а Legal b С Accounting d Lobbying Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column a (A), amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion 13 670. 279. 335. 56. Office expenses 14 Information technology 2,952. 2,210. 449. 293. 15 Royalties 3,128. 3,750. Occupancy 7,501. 16 623. Travel 632. 473. 96. 17 63. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 71. 53. 11. 7. 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 2,407. 23 3,215. 489. 319. Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) a Supplies/Inventory 19,032. 19,032. 0. Ο. 13,336. 0. 0. 13,336. b Special Events Subcontractors 2,400. 0. С 2,400. 0. Printing & Mailing d 1,431. 715. 501. 215. e All other expenses 1,887. 1,413. 287. 187. 25 Total functional expenses. Add lines 1 through 24e 254,483. 182,236. 36,905. 35,342. Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here [] if following ŠOP 98-2 (ASC 958-720)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Form 990 (2023)

_	n 990 (2				Page 11
P	art X		+ V		
		Check if Schedule O contains a response or note to any line in this Par	(A) Beginning of year		∟
	1	Cash-non-interest-bearing	162,679.	1	212,083.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	150.	4	600.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		5 6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	12,809.	8	12,809.
As	9	Prepaid expenses and deferred charges	500.	9	500.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	176,138.	16	225,992.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons		22	
Ľ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
Fund Balances		Organizations that follow FASB ASC 958, check here x and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	122,798.	27	131,988.
B	28	Net assets with donor restrictions	53,340.	28	94,004.
Fund		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
00	29	Capital stock or trust principal, or current funds		29	
iets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds .		31	
Net Assets or	32	Total net assets or fund balances	176,138.	32	225,992.
Ź	33	Total liabilities and net assets/fund balances	176,138.	33	225,992.

REV 05/09/24 PRO

Form **990** (2023)

Form 9	90 (2023)			Pa	ige 12
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		04,3	
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	54,4	83.
3	Revenue less expenses. Subtract line 2 from line 1	3		49,8	851.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	76,1	.38.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
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	25,9	89.
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: 🗵 Cash 🗌 Accrual 🗌 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain on			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		×
	If "Yes," check a box below to indicate whether the financial statements for the year were co				
	reviewed on a separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		×
	If "Yes," check a box below to indicate whether the financial statements for the year were auc	lited on a			
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	ersight of			
-	the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, e				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	orth in the			
54	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not un				
5	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such		3b		
			0.0	 m 990	
	REV 05/09/24 PRO		For	m 330	(2023

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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.

2023
Open to Public Inspection

Name of the organization	Employer identification number
Chicago Bible Society	36-2495301
Part I Reason for Public Charity Status. (All organizations must complete t	this part.) See instructions.
The organization is not a private foundation because it is: (For lines 1 through 12, check or	nly one box.)
1 A church, convention of churches, or association of churches described in section	on 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)	
3 A hospital or a cooperative hospital service organization described in section 17	0(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital describe hospital's name, city, and state:	d in section 170(b)(1)(A)(iii) . Enter the
5 An organization operated for the benefit of a college or university owned or op section 170(b)(1)(A)(iv). (Complete Part II.)	perated by a governmental unit described in
6 A federal, state, or local government or governmental unit described in section 1	70(b)(1)(A)(v).

- 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 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:
- An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33¹/₃% 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). 11
- 12 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12a,
 - **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а 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.
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V.
 - Check this box if the organization received a written determination from the IRS that it is a Type I. Type II. Type III. е functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations . . .
 - Provide the following information about the supported organization(s) α

(i) Name of supported organization			(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
			Yes	No			
(A)							
(B)							
(C)							
(D)							
(E)							
Total							

Part IISupport 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.)

Secti	on A. Public Support	o quality and					
-	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	196,292.	228,221.	235,143.	235,352.		1,199,343.
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	196,292.	228,221.	235,143.	235,352.	304,335.	1,199,343.
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						1,199,343.
	on B. Total Support	[I			
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	196,292.	228,221.	235,143.	235,352.	304,335.	1,199,343.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						1,199,343.
12	Gross receipts from related activities, etc		,			12	
13	First 5 years. If the Form 990 is for the	•			-		
0	organization, check this box and stop he on C. Computation of Public Suppor						📋
		0		11			1000/
14 15	Public support percentage for 2023 (line Public support percentage from 2022 Scl					14 15	<u> </u>
16a	33 ¹ / ₃ % support test-2023. If the organ						
	box and stop here . The organization qua						
b	33 ¹ / ₃ % support test - 2022. If the organithis box and stop here . The organization						nore, check
17a	10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test — 2 15 is 10% or more, and if the organization in Part VI how the organization meets the organization	on meets the fa e facts-and-cir	cts-and-circu cumstances te	mstances test, est. The organi	check this bo zation qualifies	x and stop he s as a publicly	ere. Explain supported
18	Private foundation. If the organization	did not check	a box on line	13, 16a, 16b	, 17a, or 17b,	check this bo	ox and see
	instructions						· · · · 🗌
						0 - 1	A (Form 990) 2023

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
-	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
ç	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Saati	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	(a) 2019	(b) 2020	(0) 2021	(u) 2022	(e) 2023	(I) TOTAI
10a	Gross income from interest, dividends,						
IVa	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
~	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the		s first, second	, third, fourth,	or fifth tax ye	ear as a secti	on 501(c)(3)
	organization, check this box and stop he						[
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line 8						%
16	Public support percentage from 2022 Sch					16	%
	on D. Computation of Investment In		-			4-	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
17	Investment income percentage for 2023 (-			%
18	Investment income percentage from 2022						%
19a	$33^{1}/_{3}\%$ support tests – 2023. If the organ						
F	17 is not more than $33^{1/3}$ %, check this box	-	-	-		-	
b	33 ¹ / ₃ % support tests – 2022. If the organiz line 18 is not more than 33 ¹ / ₃ %, check this l						
00		_	-	-			
20	Private foundation. If the organization di	u not check a	box on line 14	, 19a, or 19b, o	CHECK THIS DOX	and see instr	uctions .

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

- 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer 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).
- **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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 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).*
- 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).
- **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 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.*
- **c** 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.*
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

Section B. Type I Supporting Organizations

- 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

Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 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). 1
- а The organization satisfied the Activities Test. *Complete line 2 below.*
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а 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.
- 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.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes No

1

2

1

3

2a

2b

3a

3b

Yes No

Yes No

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
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		
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	ion B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
_			· · · · · ·	

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

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Schedule A (Form 990) 2023

Schedu	le A (Form 990) 2023			Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	zations (continued)	1
Sect	ion D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish		1	
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted 2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required-	–provide details in Part	<i>VI</i>) 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 whic (provide details in Part VI). See instructions.	h the organization is res	ponsive 8	
9	Distributable amount for 2023 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		1()
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required – <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2023			
а	From 2018			
b	From 2019			
С	From 2020			
d	From 2021			
е	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2023. 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 2024. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

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Schedule A (Form 990) 2023

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.)

Sched	ule	В
(Form	990))

Department of the Treasury

Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

Attach to Form 990. 990-EZ. or 990-PF. Go to www.irs.gov/Form990 for the latest information.



Name of the organization Employer identification number Chicago Bible Society 36-2495301 Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	✗ 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 X or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. REV 05/09/24 PRO

SCHEDULE O	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
(Form 990)	2023	
Department of the Treasury Internal Revenue Service	Open to Public Inspection	
Name of the organization	Go to www.irs.gov/Form990 for the latest information.	Employer identification number
Chicago Bible S	Society	36-2495301
Pt VI, Line 11	o: Chicago Bible Society has form 990 reveiwed by the	Executive
Committee prio	r to submission to the IRS. A copy of the submitted 99	90 is provided
to all board me	embers.	
Pt VI, Line 120	c: Bylaws of the organization contain a conflict of in	nterest clause
prohibiting act	tions/attemmpts to influence which result in a materia	al or financial
gain for office	ers, key employees or their immediate family. All of	ficers directors
and key employe	ees are required to disclose annually any interest the	at may represent
a potential con	nflict.	
Pt VI, Line 15a	a: The Executive Committee holds an annual performance	e review
with Exec Dire	ctor, salary adjustments and bonuses are made by by th	ne Board of
Directors upon	the recommendation of the committee following the and	ual review.

Form 8879-T	Έ
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IRS E-file Signature Authorization for a Tax Exempt Entity

Go to www.irs.gov/Form8879TE for the latest information.

OMB No. 1545-0047

For calendar year 2023, or fiscal year beginning , 2023, and ending

Do not send to the IRS. Keep for your records.

Department of the Treasury Internal Revenue Service

Name of filer

Chicago Bible Society

36-2495301

EIN or SSN

Name and title of officer or person subject to tax

Kenneth Oliver, Executive Director Type of Return and Return Information Part I

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here 🗙	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	304,334.
2a	Form 990-EZ check here	b	Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	b	Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here	b	Tax based on investment income (Form 990-PF, Part V, line 5) .	4b	
5a	Form 8868 check here	b	Balance due (Form 8868, line 3c)	5b	
6a	Form 990-T check here 🛛 . 🗌	b	Total tax (Form 990-T, Part III, line 4)	6b	
7a	Form 4720 check here	b	Total tax (Form 4720, Part III, line 1)	7b	
8a	Form 5227 check here	b	FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a	Form 5330 check here	b	Tax due (Form 5330, Part II, line 19) . .	9b	
10a	Form 8038-CP check here	b	Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	
	Declaration and Signatu		Authorization of Officer an Devece Cubicatte Tax		

Part II	Declaration and s	Signature	Authorization of Officer or	Person	Subject to Tax
Indor nor	alties of periury. I declar	othat 🗙	am an officer of the above entity	$(or \Box I)$	am a porson subject to tax wi

penalties of perjury, I declare that 🛛 I am an officer of the above entity or 📋 I am a person subject to tax with respect to (name Under , (EIN) of entity) and that I have examined a copy of the

2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one bo	x only	to enter my PIN	as my signature
-	ERO firm name		Enter five numbers, but do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

X As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax	Date11/06/2024
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.	3 6 4 7 6 3 6 2 8 0 0 Do not enter all zeros
	ture on the 2023 electronically filed return indicated above. I confirm that I Pub. 4163 , Modernized e-File (MeF) Information for Authorized IRS e-file
ERO's signature	Date <u>11/12/2024</u>
	s Form — See Instructions he IRS Unless Requested To Do So