

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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.

2022

Open to Public Inspection

A For the **2022** calendar year, or tax year beginning and ending

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization WORLD BICYCLE RELIEF, NFP		D Employer identification number 20-5080679
	Doing business as		E Telephone number (312) 664-3604
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	1000 WEST FULTON MARKET		G Gross receipts \$ 12,326,863.
City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL 60607			
F Name and address of principal officer: DAVID H. NEISWANDER SAME AS C ABOVE		H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527		H(b) Are all subordinates included? Yes No	
J Website: WWW.WORLDBICYCLERELIEF.ORG		If "No," attach a list. See instructions	
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other		L Year of formation: 2006	M State of legal domicile: IL
H(c) Group exemption number			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WORLD BICYCLE RELIEF MOBILIZES COMMUNITIES IN RURAL REGIONS AROUND THE (CONTINUED IN SCHEDULE O)		
	2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	6
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	32
	6 Total number of volunteers (estimate if necessary)	6	20
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	12,250,988.	12,203,140.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	146,647.	33,274.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,410,061.	12,236,304.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,656,947.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,933,198.	4,393,663.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25)		2,740,715.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,813,495.	3,680,846.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,403,640.	12,421,825.	
19 Revenue less expenses. Subtract line 18 from line 12	2,006,421.	-185,521.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	12,872,204.	12,804,362.
	22 Net assets or fund balances. Subtract line 21 from line 20	240,399.	386,226.
		12,631,805.	12,418,136.

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.

Sign Here	Signature of officer	Date			
	JEFF BOSKEN, DIRECTOR OF FINANCE Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	BRIDGET T. ROCHE	<i>Bridget Roche</i>	08/03/2023	<input type="checkbox"/>	P00666837
Preparer Use Only	Firm's name	Firm's EIN		Phone no.	
	GRANT THORNTON LLP 171 N. CLARK ST., STE. 200 CHICAGO, IL 60601	36-605558		(312) 856-0200	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. WORLD BICYCLE RELIEF, NFP	Taxpayer identification number (TIN) 20-5080679
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1000 WEST FULTON MARKET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CHICAGO, IL 60607	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

JEFF BOSKEN

- The books are in the care of ▶ 1000 WEST FULTON MARKET - CHICAGO, IL 60607

Telephone No. ▶ 312-664-3604

Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until NOVEMBER 15, 2023, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year 2022 or
- ▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:
WORLD BICYCLE RELIEF MOBILIZES COMMUNITIES IN RURAL REGIONS AROUND THE
WORLD TO THRIVE WITH LIFE CHANGING BICYCLES. (CONT'D IN SCHEDULE O)

2 Did the organization undertake any significant program services during the year which were not listed on the
prior Form 990 or 990-EZ? [] Yes [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
Section 501(c)(3) and 501(c)(4) organizations 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 \$ 6,132,885. including grants of \$ 4,347,316.) (Revenue \$)
PROGRAM ACTIVITIES
WBR'S MOBILIZED COMMUNITIES PROGRAM MODEL DRIVES SUSTAINABLE BICYCLE
USE THROUGH COMMUNITY-LED MULTI-SECTOR PROGRAMMING, SUPPORTING IMPROVED
RURAL ACCESS TO HEALTHCARE, EDUCATION, CONSERVATION AND LIVELIHOODS. IN
PARTNERSHIP WITH COMMUNITIES AND SUPPORT FROM GOVERNMENTS, BUSINESSES
AND NGOS, TARGETED REGIONS BENEFIT FROM AN INFUSION OF QUALITY
BICYCLES, PROGRAMMING AND MECHANICS TRAINING. (CONTINUED IN SCHEDULE O)

4b (Code:) (Expenses \$ 381,937. including grants of \$) (Revenue \$)
PRODUCT DEVELOPMENT
FOR THOSE WORLD BICYCLE RELIEF SERVES, THE VALUE OF A BICYCLE IS
ULTIMATELY MEASURED IN THE TIME AND EFFORT IT SAVES. THE VALUE OF THE
BUFFALO BICYCLE ISN'T IN THE OBJECT ITSELF BUT RATHER IN THE
FUNCTION IT PROVIDES. BUFFALO BICYCLES DRAMATICALLY INCREASE EFFICIENCY
FOR ITS USERS - INDIVIDUALS AT THE LOWEST LEVEL OF THE ECONOMIC LADDER.
(CONTINUED IN SCHEDULE O)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.)
(Expenses \$ 1,099,645. including grants of \$) (Revenue \$)

4e Total program service expenses 7,614,467.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38 covering various organizational requirements.

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 [X]

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a-1c regarding Form 1096 and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee reporting, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AR, AZ, CA, CT, FL, GA, HI, IL, KS, KY, MD
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [X] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
JEFF BOSKEN - 312-664-3604
1000 WEST FULTON MARKET, CHICAGO, IL 60607

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ERIC SHOWELL (THRU 08/22) PROGRAM DIRECTOR	40.00 0.00					X	339,937.	0.	22,185.	
(2) DAVID NEISWANDER CEO	40.00 0.00			X			312,528.	0.	12,386.	
(3) ALISHA MYERS SII DIRECTOR	40.00 0.00					X	244,499.	0.	13,476.	
(4) JEFFREY BOSKEN TREASURER & CORP SECRETARY	40.00 0.00			X			208,911.	0.	29,264.	
(5) ADRIENNE KARECKI ED DEVELOPMENT + COMMUNICATIONS	40.00 0.00					X	223,269.	0.	6,439.	
(6) ANDREW SAMWAYS VP OF PRODUCT DEVELOPMENT	40.00 0.00					X	197,851.	0.	31,880.	
(7) SUSAN BORNSTEIN ED INSTITUTIONAL MARKETS	40.00 0.00					X	178,482.	0.	11,718.	
(8) FREDERICK K.W. DAY BOARD MEMBER	36.00 0.00	X					0.	0.	0.	
(9) STANLEY DAY BOARD MEMBER	1.00 0.00	X					0.	0.	0.	
(10) LEAH MISSBACH DAY BOARD MEMBER	1.00 0.00	X					0.	0.	0.	
(11) NATHANIEL HELLER (AS OF 12/22) BOARD MEMBER	1.00 0.00	X					0.	0.	0.	
(12) MICHAEL ROBERT HERR BOARD MEMBER	1.00 0.00	X					0.	0.	0.	
(13) LIZ KELLISON (AS OF 02/22) BOARD MEMBER	1.00 0.00	X					0.	0.	0.	
(14) PETER O'HAGAN BOARD MEMBER	1.00 0.00	X					0.	0.	0.	
(15) DAMARIS PARSITAU BOARD MEMBER	1.00 0.00	X					0.	0.	0.	
(16) ROBERT PERKOWITZ BOARD MEMBER	1.00 0.00	X					0.	0.	0.	
(17) DAVID TSWAMUNO (THRU 11/22) BOARD MEMBER	1.00 0.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) OREN WYCHE-SHAW (THRU 05/22) BOARD MEMBER	1.00 0.00	X						0.	0.	0.
1b Subtotal							1,705,477.	0.	127,348.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							1,705,477.	0.	127,348.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 15

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CAUSEMIC, LLC 2034 N KILLINGSWORTH ST, PORTLAND, OR 97217	MARKETING & DEVELOPMENT	346,700.
ARNOLD & PORTER KAYE SCHOLER, LLP 601 MASSACHUSETTS AVE, WASHINGTON, DC 20001	LEGAL	185,418.
GRANT THORNTON LLP, 171 N. CLARK STREET, SUITE 200, CHICAGO, IL 60601	ACCOUNTING	142,402.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 3

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)		
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514		
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d	1,351,627.					
	e Government grants (contributions)	1e	200,000.					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	10,651,513.					
	g Noncash contributions included in lines 1a-1f	1g	\$ 619,714.					
	h Total. Add lines 1a-1f		12,203,140.					
Program Service Revenue	2 a _____	Business Code						
	b _____							
	c _____							
	d _____							
	e _____							
	f All other program service revenue							
	g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		111,219.			111,219.		
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	6a	(i) Real					
			(ii) Personal					
			b Less: rental expenses ...	6b				
			c Rental income or (loss)	6c				
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities					
			(ii) Other					
			b Less: cost or other basis and sales expenses	7b	77,945.			
			c Gain or (loss)	7c	-77,945.			
	d Net gain or (loss)		-77,945.			-77,945.		
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses			8b					
c Net income or (loss) from fundraising events								
9 a Gross income from gaming activities. See Part IV, line 19	9a							
		b Less: direct expenses	9b					
		c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	10a		12,339.					
		b Less: cost of goods sold	10b	12,614.				
		c Net income or (loss) from sales of inventory		-275.				
Miscellaneous Revenue	11 a PHOTO USE FEE	Business Code	900099	165.		165.		
	b _____							
	c _____							
	d All other revenue							
	e Total. Add lines 11a-11d		165.					
12 Total revenue. See instructions		12,236,304.	0.	0.	33,164.			

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations 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	4,347,316.	4,347,316.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	563,089.	362,404.	181,194.	19,491.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,226,262.	1,479,213.	413,535.	1,333,514.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	104,652.	54,883.	15,050.	34,719.
9 Other employee benefits	263,783.	151,562.	43,864.	68,357.
10 Payroll taxes	235,877.	99,552.	50,615.	85,710.
11 Fees for services (nonemployees):				
a Management				
b Legal	419,597.	15,746.	399,190.	4,661.
c Accounting	332,272.		332,272.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	998,557.	366,621.	96,277.	535,659.
12 Advertising and promotion	191,432.	68,611.	329.	122,492.
13 Office expenses	383,786.	101,312.	90,097.	192,377.
14 Information technology	322,236.	50,335.	195,467.	76,434.
15 Royalties				
16 Occupancy	50,542.	43,022.		7,520.
17 Travel	555,292.	343,967.	121,217.	90,108.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	193,657.	42,342.	17,169.	134,146.
20 Interest	42,904.		42,904.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	98,730.	60,847.	14,140.	23,743.
23 Insurance	57,287.	5,208.	50,972.	1,107.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a ENGINEERING SERVICES	21,526.	21,526.		
b DONATION REFUND	9,898.			9,898.
c BICYCLE FREIGHT	3,130.		2,351.	779.
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	12,421,825.	7,614,467.	2,066,643.	2,740,715.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	2,687,507.	2	832,486.
	3 Pledges and grants receivable, net	1,252,965.	3	952,963.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	170,999.	9	187,823.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 532,690.		
	b Less: accumulated depreciation	10b 443,309.	154,679.	10c 89,381.
	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	8,606,054.	13	10,741,709.
	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)	12,872,204.	16	12,804,362.	
Liabilities	17 Accounts payable and accrued expenses	239,859.	17	321,684.
	18 Grants payable		18	0.
	19 Deferred revenue	0.	19	0.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	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	540.	25	64,542.
	26 Total liabilities. Add lines 17 through 25	240,399.	26	386,226.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	12,531,884.	27	12,318,136.
	28 Net assets with donor restrictions	99,921.	28	100,000.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	12,631,805.	32	12,418,136.
33 Total liabilities and net assets/fund balances	12,872,204.	33	12,804,362.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	12,236,304.
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,421,825.
3	Revenue less expenses. Subtract line 2 from line 1	3	-185,521.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,631,805.
5	Net unrealized gains (losses) on investments	5	839.
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	-28,987.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	12,418,136.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** 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? _____
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____
- 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 _____

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form **990** (2022)

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

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,117,397.	8,213,892.	9,452,136.	12,250,988.	12,203,140.	50,237,553.
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	8,117,397.	8,213,892.	9,452,136.	12,250,988.	12,203,140.	50,237,553.
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)						14,555,798.
6 Public support. Subtract line 5 from line 4.						35,681,755.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	8,117,397.	8,213,892.	9,452,136.	12,250,988.	12,203,140.	50,237,553.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	87,607.	88,731.	98,097.	119,266.	111,219.	504,920.
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.)	11,789.	-3,556.	18,967.	12,426.	12,339.	51,965.
11 Total support. Add lines 7 through 10						50,794,438.

12 Gross receipts from related activities, etc. (see instructions) **12**

13 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) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	70.25 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	77.14 %

16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2022. 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 - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 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

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c 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.

14 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) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2021 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2021 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. 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

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing 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>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
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?		
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? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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.</i>		
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? <i>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.</i>		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		
1		

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?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> 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.		
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? <i>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.</i>	Yes	No
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? <i>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.</i>		
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? <i>If "Yes" or "No" provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	

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 short tax year or assets held for part of year):		
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 (<i>explain in detail in Part VI</i>):		
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 emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, 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 2022. 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 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

NET INCOME FROM INVENTORY

2018 AMOUNT: \$ 11,789.

2019 AMOUNT: \$ -3,556.

2020 AMOUNT: \$ 18,967.

2021 AMOUNT: \$ 12,426.

2022 AMOUNT: \$ 12,174.

PHOTO USE FEE

2018 AMOUNT: \$ 0.

2019 AMOUNT: \$ 0.

2020 AMOUNT: \$ 0.

2021 AMOUNT: \$ 0.

2022 AMOUNT: \$ 165.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

WORLD BICYCLE RELIEF, NFP

Employer identification number

20-5080679

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 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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 totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

Name of organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 2,795,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 1,434,035.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 628,046.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 377,276.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	SECURITIES _____ _____ _____	\$ 619,714.	10/31/22
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: WORLD BICYCLE RELIEF, NFP; Employer identification number: 20-5080679

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose(s) of conservation easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, acquired after 2006), and questions about monitoring, expenses, and reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures, and a table for revenue and assets included in Form 990.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 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 explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
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 current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		340,145.	279,523.	60,622.
e Other		192,545.	163,786.	28,759.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				89,381.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 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) PRI LOAN - ZAMBIA	1,389,688.	END-OF-YEAR MARKET VALUE
(2) PRI LOAN - KENYA	1,381,897.	END-OF-YEAR MARKET VALUE
(3) PRI LOAN - MAURITIUS	6,008,657.	END-OF-YEAR MARKET VALUE
(4) PRI LOAN - SPAIN	723,322.	END-OF-YEAR MARKET VALUE
(5) PRI LOAN - MALAWI	6,365.	END-OF-YEAR MARKET VALUE
(6) PRI LOAN - INTERNATIONAL		
(7) PHILANTHROPIC	1,085,361.	END-OF-YEAR MARKET VALUE
(8) PRI LOAN - COLOMBIA	146,419.	END-OF-YEAR MARKET VALUE
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	10,741,709.	

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO WBR ZIMBABWE	64,542.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	64,542.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	13,655,811.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	839.
b	Donated services and use of facilities	2b	1,285,217.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,286,056.
3	Subtract line 2e from line 1	3	12,369,755.
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.)	4b	-133,451.
c	Add lines 4a and 4b	4c	-133,451.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	12,236,304.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	13,707,042.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,285,217.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,285,217.
3	Subtract line 2e from line 1	3	12,421,825.
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	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	12,421,825.

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.

PART X, LINE 2:

FIN 48

WBR NFP IS A NOT-FOR-PROFIT ENTITY, AS DESCRIBED IN SECTION 501(C)(3) OF

THE INTERNAL REVENUE CODE (THE IRC), AND WAS ORGANIZED AND INCORPORATED IN

ILLINOIS AS A NOT-FOR-PROFIT ORGANIZATION IN 2006. WBR NFP HAS RECEIVED A

FAVORABLE DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE FOR ITS

SECTION 501(C)(3) STATUS UNDER THE IRC OF 1986, AND IS EXEMPT FROM INCOME

TAXES, EXCEPT TO THE EXTENT OF ANY UNRELATED BUSINESS INCOME. FOR THE

PERIODS ENDED DECEMBER 31, 2022, AND 2021, THE ORGANIZATION DOES NOT HAVE

UNRELATED BUSINESS INCOME.

AS OF DECEMBER 31, 2022 AND 2021, MANAGEMENT HAS DETERMINED THAT THERE ARE

Part XIII Supplemental Information (continued)

NO MATERIAL UNCERTAIN POSITIONS THAT REQUIRE RECOGNITION IN THE

CONSOLIDATED FINANCIAL STATEMENTS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

COST OF GOODS SOLD -12,614.

FOREIGN CURRENCY LOSS -120,837.

TOTAL TO SCHEDULE D, PART XI, LINE 4B -133,451.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
SUB-SAHARAN AFRICA	4	0	GRANTMAKING	MOBILIZED COMMUNITIES	1,855,325.
SUB-SAHARAN AFRICA	4	0	GRANTMAKING	BICYCLES	1,950,249.
SOUTH AMERICA	1	0	GRANTMAKING	BICYCLES	445,910.
SOUTH AMERICA	1	0	GRANTMAKING	MOBILIZED COMMUNITIES	95,832.
EUROPE (INCLUDING ICELAND & GREENLAND)	1	1	INTERCOMPANY SERVICE EXPENSE	NEW PRODUCT DEVELOPMENT	21,526.
3 a Subtotal	11	1			4,368,842.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	11	1			4,368,842.

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

Schedule F (Form 990) 2022

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	771,763.	WIRE	0.		FMV
		SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	258,424.	WIRE	0.		FMV
		SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	1,064,846.	WIRE	0.		FMV
		SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	1,314,221.	WIRE	0.		FMV
		SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	421,341.	WIRE	0.		FMV
		SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	312,366.	WIRE	0.		FMV
		SOUTH AMERICA	PROGRAM IMPLEMENTATION	587,713.	WIRE	0.		FMV
		EUROPE (INCLUDING ICELAND & GREENLAND)	SOCIAL ENTERPRISE	21,527.	WIRE	0.		FMV

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **6**

3 Enter total number of other organizations or entities **3**

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	PROGRAM IMPLEMENTATION	500,000.	WIRE	0.		FMV

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

PROCEDURES FOR MONITORING THE USE OF GRANTS OUTSIDE THE U.S.

WBR PROVIDED GRANTS TO WORLD BICYCLE RELIEF - ZAMBIA LIMITED, A RELATED

FOREIGN CORPORATION, WORLD BICYCLE RELIEF - KENYA, A BRANCH OF WBR,

BUFFALO BICYCLE LIMITED, BBSA, WORLD BICYCLE RELIEF (PRIVATE) LIMITED,

BUFFALO BICYCLE MALAWI, BUFFALO BICYCLE COLOMBIA, AND WORLD BICYCLE

RELIEF COLOMBIA. WBR REQUIRES GRANTEES TO SUMMARIZE HOW GRANTS ARE

UTILIZED. IN ADDITION, THE AFRICA DIRECTOR MONITORS THE USE OF FUNDS AND

REPORTS DIRECTLY BACK TO WBR. WBR ALSO HAS EMPLOYEES PERFORMING PROGRAM

SERVICES IN ZAMBIA, ZIMBABWE, AND KENYA WHO MONITOR THE USE OF THE FUNDS.

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

WORLD BICYCLE RELIEF, NFP

Employer identification number

20-5080679

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|---|---|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input checked="" type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ERIC SHOWELL (THRU 08/22) PROGRAM DIRECTOR	(i)	191,164.	0.	148,773.	3,920.	18,265.	362,122.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DAVID NEISWANDER CEO	(i)	312,528.	0.	0.	2,470.	9,916.	324,914.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ALISHA MYERS SII DIRECTOR	(i)	153,467.	0.	91,032.	5,629.	7,847.	257,975.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JEFFREY BOSKEN TREASURER & CORP SECRETARY	(i)	208,911.	0.	0.	7,686.	21,578.	238,175.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ADRIENNE KARECKI ED DEVELOPMENT + COMMUNICATIONS	(i)	223,269.	0.	0.	6,439.	0.	229,708.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ANDREW SAMWAYS VP OF PRODUCT DEVELOPMENT	(i)	136,986.	0.	60,865.	6,618.	25,262.	229,731.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SUSAN BORNSTEIN ED INSTITUTIONAL MARKETS	(i)	178,482.	0.	0.	6,125.	5,593.	190,200.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

HOUSING ALLOWANCE AND RESIDENCE FOR PERSONAL USE

DURING THE CALENDAR YEAR 2022, ERIC SHOWELL, ALISHA MYERS, AND ANDY SAMAYS

RECEIVED THE FOLLOWING TAXABLE SERVICES:

HOUSING \$ 41,186

TAX SERVICES \$ 3,775

TOTAL \$ 44,961

THE HOUSING ALLOWANCE PROVIDED HOUSING THAT ALLOWED ERIC AND ANDY TO CONDUCT BUSINESS AFFAIRS AND BE AVAILABLE 24/7 TO RESPOND TO EMERGENT SITUATIONS THAT MAY ARISE. IT IS IN THE JOB DESCRIPTION FOR THEM TO BE ON SITE WORKING FOR WORLD BICYCLE RELIEF AND THE HOUSING PROVIDED MAKES THIS POSSIBLE. THE HOUSING ALLOWANCE IS BASED ON A MONTHLY RENTAL FEE OF A HOUSE WITH GARDENING SERVICES. THE RESIDENCE IS FOR PERSONAL USE. THE HOUSING IS TREATED AS TAXABLE INCOME AND IS REPORTABLE AS INCOME ON THEIR FORMS W-2.

TAX GROSS-UP PAYMENTS

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

DURING THE CALENDAR YEAR 2022, THE FOLLOWING INDIVIDUALS WERE PROVIDED TAX

GROSS-UP PAYMENTS:

ALISHA MYERS \$ 88,957

ERIC SHOWELL \$ 87,909

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
F.K. DAY	SUBSTANTIAL CONT.	1,434,036.	BUS. REL.		X
SRAM LLC	TRUSTEES/OFFICERS	177,305.	SERVICES		X
STAN DAY	SUBSTANTIAL CONT.	127,021.	BUS. REL.		X
MICHAEL HERR	SUBSTANTIAL CONT.	13,015.	BUS. REL.		X

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

PART IV:

BUSINESS TRANSACTIONS WITH INTERESTED PERSONS

F.K. DAY, STAN DAY, AND MICHAEL HERR AS BOARD MEMBERS AND/OR OFFICERS

HAVE A BUSINESS RELATIONSHIP WITH SRAM LLC. SRAM LLC PROVIDES DONATED

SALARIES AND IN-KIND RENTAL SPACE AND UTILITIES TO WORLD BICYCLE

RELIEF. THIS AMOUNT WAS PAID AT FAIR MARKET VALUE..

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization: **WORLD BICYCLE RELIEF, NFP**
Employer identification number: **20-5080679**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	17	619,714. FMV	
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

NON-CASH CONTRIBUTIONS

WORLD BICYCLE RELIEF, NFP IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED.

**SCHEDULE O
(Form 990)**

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 the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

WORLD BICYCLE RELIEF, NFP

Employer identification number

20-5080679

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WORLD TO THRIVE WITH LIFE CHANGING BICYCLES.

BY COMBINING (BICYCLE) PRODUCT DEVELOPMENT WITH COMMUNITY-LED

PROGRAMMING AND SOCIAL ENTERPRISE, STUDENTS, COMMUNITY SERVICE

PROVIDERS, FARMERS AND ENTREPRENEURS CAN IMPROVE THEIR ACCESS TO

EDUCATION, HEALTHCARE AND ECONOMIC OPPORTUNITIES WITH A

PURPOSE-DESIGNED BUFFALO BICYCLE, SUPPORTED BY AN ECOSYSTEM OF

SUSTAINABLE MOBILITY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: (CONTINUED)

WE ADDRESS THE SYSTEMIC CHALLENGES OF DISTANCE AND RURAL MOBILITY BY

MANUFACTURING A BICYCLE SPECIALLY DESIGNED TO MEET THE NEEDS AND

PREFERENCES OF PEOPLE IN LOW INCOME REGIONS DEALING WITH ROUGH ROADS

AND HEAVY LOADS IN RURAL AREAS. RUGGED, AFFORDABLE, LONG-LASTING, AND

LOCALLY-ASSEMBLED, WBR DISTRIBUTES THE BUFFALO BICYCLE TO HEALTH CARE

PROVIDERS, STUDENTS, FARMERS, AND OTHER COMMUNITY SERVICE WORKERS WHO

CANNOT AFFORD TO BUY THEM. WE SUPPORT A SUSTAINABLE BICYCLE MOBILITY

ECOSYSTEM FOR BICYCLE RIDERS BY, TRAINING LOCAL BICYCLE MECHANICS,

PROVIDING MARKET-BASED ACCESS TO SPARE PARTS, AND NURTURING COMMUNITY

OWNERSHIP OF PROGRAMMING FOR LONG-TERM IMPACT.

SINCE 2005, WBR HAS DISTRIBUTED 712,000 PURPOSE-BUILT BICYCLES (AS OF

DECEMBER 2022), IMPACTING AN ESTIMATED 3.56 MILLION INDIVIDUALS ACROSS

21 COUNTRIES. WE LEARN AND ADAPT PROGRAMMING BASED ON USER AND PARTNER

FEEDBACK, RIGOROUSLY MEASURE RESULTS, AND ITERATE THE BUFFALO BICYCLE

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

AND OUR PROGRAMS TO OPTIMIZE IMPACT.

ILLUSTRATIVE RESULTS

* EDUCATION: WBR'S EDUCATION PROGRAMMING IN ZAMBIA WAS THE SUBJECT OF A

RECENT STUDYAN INDEPENDENT RANDOMIZED CONTROLLED TRIALLED BY

INNOVATIONS FOR POVERTY ACTION. THE STUDY FOUND THAT OVER JUST ONE

YEAR, GIRLS WITH OUR BUFFALO BICYCLES AND SUPPORTIVE PROGRAMMING

ACHIEVED A 66% INCREASE IN PUNCTUALITY, 28% REDUCTION IN ABSENTEEISM,

33% REDUCTION IN TIME TO TRAVEL TO SCHOOL (SAVING THEM NEARLY SIX HOURS

A WEEK), IMPROVED MATH SCORES, AND INCREASED FEELINGS OF SAFETY. AS

IMPORTANTLY, THE RESEARCHERS ALSO FOUND STATISTICALLY SIGNIFICANT

IMPROVEMENTS IN AN ARRAY OF MEASURES OF GIRLS' EMPOWERMENT, SUCH AS

PRO-SOCIALITY, LOCUS OF CONTROL, BARGAINING POWER, FERTILITY

PREFERENCES, AND SELF-IMAGE. A FOLLOW UP EVALUATION FOUND GIRLS WITH

BUFFALO BICYCLES FOR TWO YEARS WERE 19% LESS LIKELY TO DROP OUT OF

SCHOOL.

* HEALTH: ON TWO U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT FUNDED

HEALTH FOCUSED ACTIVITIES, THE PROJECTS FOUND THAT WITH A BUFFALO

BICYCLE, HEALTH WORKERS IN KENYA INCREASED THEIR MONTHLY PATIENT VISITS

88%, BOOSTED PATIENT REFERRALS UP TO 50%, AND CONTRIBUTED TO

TUBERCULOSIS DRUG DEFAULTER RATES DROPPING TO 0% IN A SAMPLE OF

CLINICS. IN ZAMBIA, WHERE RETAINING VOLUNTEER HEALTH WORKERS CAN BE A

MAJOR CHALLENGE, THE PROJECT FOUND THAT WITH A TWO-YEAR SERVICE-TO-OWN

INCENTIVE AGREEMENT FOR A BICYCLE, HEALTH WORKER RETENTION RATES

REACHED 95%.

* LIVELIHOODS: THROUGH A PARTNERSHIP WITH A LOCAL ZAMBIAN DAIRY

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

COOPERATIVE PROVIDING MILK TO PARMALAT, WBR HAS BEEN SELLING BUFFALO BICYCLES TO SMALL HOLDER DAIRY FARMERS. WITH THEIR BICYCLE, THE COOPERATIVE'S FARMERS INCREASED THEIR DELIVERIES BY 25% AND INCOMES BY 23%, WHILE MAINTAINING A 100% REPAYMENT RATE. IN SUPPORT OF A FOOD AND AGRICULTURE ORGANIZATION ACTIVITY PROMOTING CONSERVATION AGRICULTURE PRACTICES, LEAD FARMERS THAT WERE PROVIDED BUFFALO BICYCLES INCREASED THEIR FOLLOWER FARMER VISITS BY 120%, 79% OF LEAD FARMERS WERE ABLE TO VISIT MORE FOLLOWER FARMERS PER MONTH, AND TIME TO MARKET DROPPED BY 45%, SAVING 3.5 HOURS PER WEEK WHILE REDUCING POST-HARVEST LOSSES.

THE NEED

ACCORDING TO THE WORLD BANK, ONE BILLION PEOPLE LACK ACCESS TO ECONOMIC OPPORTUNITIES, MARKETS, HEALTHCARE, AND EDUCATION DUE TO DISTANCE. IN AFRICA ALONE, 70% OF THE RURAL POPULATION LACK ACCESS TO ALL SEASON ROAD AND TRANSPORT SERVICES, AND PRIMARILY RELY ON WALKING. RURAL HOUSEHOLDS FACE SEVERAL BARRIERS PREVENTING THEM FROM OVERCOMING THE CHALLENGE OF DISTANCE. IN SPARSELY POPULATED GEOGRAPHIES, NATIONAL AND LOCAL GOVERNMENTS PROVIDE FEW PUBLIC TRANSPORT OPTIONS. PERSONAL TRANSPORT ASSETS, LIKE BICYCLES AND MOTORBIKES, ARE RELATIVELY EXPENSIVE FOR LOW INCOME HOUSEHOLDS, AND RURAL HOUSEHOLDS ALSO HAVE LIMITED ACCESS TO FINANCIAL SERVICES AND PRODUCTS. AND, EVEN IF A HOUSEHOLD PURCHASES A PERSONAL TRANSPORT ASSET, THOSE AVAILABLE TEND TO BE OF POORER QUALITY, DON'T LAST LONG, DON'T MEET THE HOUSEHOLD'S NEEDS, ARE COSTLY TO MAINTAIN, AND HAVE LIMITED OPTIONS FOR SPARE PARTS AND MAINTENANCE.

AS A RESULT, DISTANCE AND LACK OF AFFORDABLE, RELIABLE TRANSPORTATION

HAVE PROFOUND IMPACT ON DEVELOPMENT OUTCOMES. FOR EXAMPLE, ACCORDING TO

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

THE U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT, 47% OF RURAL-BASED WOMEN

IN ZIMBABWE CITED DISTANCE AS A PRIMARY CHALLENGE TO ACCESSING HEALTH

CARE VERSUS JUST 10% OF URBAN-BASED WOMEN. IN MALAWI, NET ATTENDANCE

FOR SECONDARY SCHOOLS IN RURAL AREAS IS JUST 13%, A THIRD OF THE RATE

OF SECONDARY SCHOOL ATTENDANCE IN URBAN AREAS. AND IN ZAMBIA, 64% OF

RURAL RESIDENTS FALL WITHIN THE LOWEST TWO WEALTH QUINTILES VERSUS 3.1%

OF URBAN RESIDENTS.

MEETING THE NEED AND MARKET DEMAND

WBR ADDRESSES THE NEED AND MARKET DEMAND FOR AFFORDABLE, QUALITY

BICYCLE TRANSPORT IN DEVELOPING REGIONS OF THE WORLD THROUGH A

HOLISTIC, SUSTAINABLE APPROACH. WE UTILIZE AN INNOVATIVE BUSINESS

MODEL: WBR IS A 501(C)3 NOT-FOR-PROFIT THAT OWNS 100% OF BUFFALO

BICYCLE LIMITED, A FOR-PROFIT SOCIAL ENTERPRISE. THROUGH WBR'S 501(C)3,

WBR RAISES FUNDS TO PROVIDE TRANSPORT SOLUTIONS TO THOSE WHO CANNOT

AFFORD THEM, AND THROUGH BUFFALO BICYCLE LIMITED, WE SELL THE BUFFALO

BICYCLE, SPARE PARTS, AND VALUE-ADDED SERVICES. ALL PROCEEDS FROM

BICYCLE SALES SUPPORT WBR-FUNDED PROGRAMS, REPLACING SOME OF THE NEED

FOR PHILANTHROPIC FUNDS. BUFFALO BICYCLE LIMITED ALSO MULTIPLIES OUR

IMPACT BY INCREASING MARKET ACCESS TO AFFORDABLE/HIGH-QUALITY BICYCLE

TRANSPORT, DIVERSIFYING OUR FUNDING BASE, PROVIDING A MARKET-BASED

SUPPLY CHAIN OF SPARE PARTS, AND CREATING MANUFACTURING ECONOMIES OF

SCALE THAT LOWER THE PER BIKE COST OF WBR PROGRAMS.

WE DISTRIBUTE OUR BICYCLES THROUGH THREE PRIMARY CHANNELS:

ORGANIZATIONAL SALES AND PARTNERSHIPS (E.G. UN AGENCIES, NGOS),

CONSUMER SALES (E.G. INDIVIDUALS AND LOCAL BUSINESSES), AND WBR-FUNDED

PROGRAMS THAT DONATE BICYCLES TO THOSE WHO CANNOT AFFORD THEM (E.G.

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

RURAL STUDENTS LIVING BELOW THE POVERTY LINE). THROUGHOUT OUR
 ACTIVITIES, WE EMPHASIZE GENDER EQUALITY TO MAXIMIZE THE IMPACT OF OUR
 WORK. IN OUR PERMANENT PRESENCE COUNTRIES OF COLOMBIA, KENYA, MALAWI,
 ZAMBIA, AND ZIMBABWE, WE ESTABLISH MARKET-BASED BICYCLE ECOSYSTEMS BY
 TRAINING LOCAL MECHANICS, ESTABLISHING SPARE PARTS SUPPLY CHAINS,
 BUILDING COMMUNITY OWNERSHIP OF PROGRAMS, RIGOROUSLY MONITORING
 RESULTS, AND ITERATING OUR PROGRAMS AND PRODUCTS BASED ON USER AND
 PARTNER FEEDBACK.

FORM 990, PART III, LINE 4A: (CONTINUED)

WE ALSO ESTABLISH LINKS TO OUR SOCIAL ENTERPRISE BUSINESS BUFFALO
 BICYCLESTO SELL BUFFALO BICYCLES AND SPARE PARTS, ENSURING EXPANDED
 ACCESS AND SUSTAINABLE BICYCLE USE IN THE COMMUNITIES.

AFTER AN ASSESSMENT OF NEEDS AND POTENTIAL IMPACT OF BICYCLE
 PROGRAMMING, LOCAL COMMITTEES WITHIN EACH COMMUNITY SHAPE AND MANAGE
 PROGRAMS TO ADDRESS THEIR NEEDS. THESE BICYCLE SUPERVISORY COMMITTEES
 ALSO OVERSEE LOCAL BICYCLE MECHANICS AND OFFER SUPPORT TO PROGRAM
 PARTICIPANTS. WOMEN AND GIRLS ARE PRIORITIZED IN THE MOBILIZED
 COMMUNITY PROGRAM DUE TO THE ADDITIONAL MOBILITY BARRIERS THEY OFTEN
 FACE.

OUR THEORY OF CHANGE IS BASED ON THE HYPOTHESIS THAT IF COMMUNITIES
 HELP IDENTIFY THE DISTANCE BARRIERS THEY FACE AND CO-DESIGN SOLUTIONS,
 ARE SUPPORTED TO CREATE LOCAL MANAGEMENT STRUCTURES, AND ARE PROVIDED
 WITH HIGH QUALITY BUFFALO BICYCLES, SUPPORTED BY WBR-TRAINED COMMUNITY
 MECHANICS AND ACCESS TO SPARE PARTS, THEN THEY WILL MANAGE COMMUNITY
 BICYCLE PROGRAMS AND BENEFIT FROM IMPROVED TRANSPORTATION TO GOODS AND

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

SERVICES. THAT WILL RESULT IN IMPROVED HOUSEHOLD ACCESS TO MARKETS,
 COMMUNITY STRUCTURES AND SERVICES, GIRL AND BOY SCHOOL ATTENDANCE,
 MAINTAINED BICYCLES, AND SUSTAINABLE COMMUNITY OWNED BICYCLE PROGRAMS.

OVER THE LONG-TERM, WE EXPECT THE MOBILIZED COMMUNITIES APPROACH WILL
 RESULT IN IMPROVED PRODUCTIVITY, INCREASED AND DIVERSIFIED HOUSEHOLD
 INCOMES, IMPROVED EDUCATION AND HEALTHCARE, AND OTHER EMPOWERMENT
 OUTCOMES. THESE OUTCOMES, SUPPORTED BY WBR'S HOLISTIC BICYCLE
 ECOSYSTEM, WILL RESULT IN PEOPLE AND COMMUNITIES BEING INDEPENDENT AND
 THRIVING.

FORM 990, PART III, LINE 4B: (CONTINUED)

THAT'S WHY WBR'S PRODUCT DEVELOPMENT TEAM CONSTANTLY WORKS TO IMPROVE
 THE BICYCLE AND ITS SPARE PARTS: TO HELP ENSURE THE SUSTAINABILITY AND
 ADVANCEMENT OF ALL PROGRAMS THAT USE THE BUFFALO BICYCLE.

WBR'S GUIDING PRINCIPLE OF ALL ANSWERS ARE FOUND IN THE FIELD MEANS
 THAT DESIGN DECISIONS ARE FRAMED BY THE LANDSCAPE OF LOCALLY AVAILABLE
 SPARE PARTS, TOOLS AND REPAIR EXPERTISE, AS WELL AS CULTURAL
 CONSIDERATIONS ABOUT HOW BIKES ARE LIKELY TO BE USED AND MAINTAINED.
 THIS OFTEN RESULTS IN USING UNCONVENTIONAL COMPONENTS ON THE BIKES.

THE COASTER BRAKE, FOR EXAMPLE, SLOWS THE REAR WHEEL THROUGH A
 BACK-PEDALING ACTION. THIS SEEMINGLY ANTIQUATED DESIGN, NOW TYPICALLY
 FOUND ONLY ON CHILDREN'S BIKES, REQUIRES NO CABLES TO OPERATE. THIS MAY
 BE A TRIVIAL CONSIDERATION IN THE UNITED STATES, WHERE BRAKE CABLES ARE
 EASY TO FIND. BUT AS THEY ARE NOT COMMONLY AVAILABLE IN THE COUNTRIES
 IN WHICH WBR OPERATES, THE ADVANTAGE OF A CABLE-FREE BRAKE IS

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

SIGNIFICANT.

WBR'S PRODUCT DEVELOPMENT TEAM AIMS TO BE CONSIDERATE OF THE REALITIES

OF WHERE OUR BIKES ARE USED. HOWEVER, WBR ALSO FEELS IT HAS A

RESPONSIBILITY TO IMPROVE THE EXPERIENCE OF OWNING AND USING A BICYCLE.

WHERE THE AVAILABLE SPARE PARTS ARE INADEQUATE, WBR SEEKS TO MAKE

BETTER PARTS AVAILABLE. WHERE AVAILABILITY IS LIMITED, WBR SEEKS TO

IMPROVE DISTRIBUTION AND ACCESS THROUGH ITS NETWORK OF TRAINED

MECHANICS AND GROWING NETWORK OF LOCAL SHOPS.

THE DESIGN OF THE BICYCLE IS DYNAMIC. THE PROCESS IS ONGOING. AS THE

ORGANIZATION GROWS, AND ANNUAL VOLUMES INCREASE, WBR REVISITS EARLIER

DESIGN DECISIONS TO CONTINUOUSLY REFINES THE BICYCLE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

MONITORING AND EVALUATION

WORLD BICYCLE RELIEF IS CONSISTENTLY MEASURING THE IMPACT OF THE

BICYCLE IN WBR AND NON WBR RUN PROGRAMS. LEVERAGING LEARNING WITH

ADAPTIVE MANAGEMENT ENSURES WBR IS PROVIDING THE BEST SOLUTION POSSIBLE

TO MOBILITY TO THOSE IT SERVES. WBR METRICS TIME INCLUDE CHANGES IN

PARTICIPANT ACCESS TO HEALTHCARE, EDUCATION AND ECONOMIC OPPORTUNITY,

AND IN THE LONG-TERM, CHANGES TO INCOME AND OTHER EMPOWERMENT OUTCOMES.

EXPENSES \$ 1,099,645. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

ZAMBIA, KENYA, MAURITIUS, ZIMBABWE,

MALAWI, COLOMBIA, SPAIN

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

FORM 990, PART VI, SECTION A, LINE 1A:

THE BOARD OF DIRECTORS SHALL HAVE POWER TO APPOINT COMMITTEES FOR THE PURPOSE OF CONDUCTING CERTAIN ASPECTS OF THE CORPORATE BUSINESS NOT OTHERWISE DELEGATED.

COMMITTEES MAY NOT ACT ON BEHALF OF THE CORPORATION UNLESS SUCH AUTHORITY IS SPECIFICALLY DELEGATED TO THE COMMITTEE, AND IF SUCH CORPORATE AUTHORITY IS SO DELEGATED, IT SHALL BE VALID ONLY AS TO A SINGLE ISSUE AND NOT IN GENERAL TERMS. THE BOARD OF DIRECTORS MAY FROM TIME TO TIME APPOINT ADVISORY BOARDS OR SPECIAL COUNCILS FOR SPECIFIC PURPOSES THAT DO NOT REQUIRE CORPORATE ACTION. THE COMPOSITION OF SUCH ADVISORY GROUPS MAY INCLUDE PERSONS WITH PROFESSIONAL SKILLS OR SPECIAL EXPERIENCE NECESSARY TO ADVISE AND INFORM THE BOARD OF DIRECTORS. SUCH ADVISORY GROUPS SHALL NOT HAVE THE AUTHORITY TO COMMIT THE CORPORATION TO ANY LEGAL CONTRACTS OR AGREEMENTS WHETHER OR NOT RELATED TO THE BUSINESS OF THE CORPORATION. THE BOARD OF DIRECTORS SHALL NOT LEND APPARENT AUTHORITY TO SUCH ADVISORY GROUPS AND ALL RELATED CORPORATE RESOLUTIONS SHALL EXPRESSLY LIMIT THE GROUPS' AUTHORITY IN THIS RESPECT.

FORM 990, PART VI, SECTION A, LINE 2:

FAMILY RELATIONSHIPS

BOARD MEMBERS STANLEY DAY AND CHAIRMAN FREDERICK K.W. DAY HAVE A FAMILY RELATIONSHIP. MICHAEL HERR, STANLEY DAY, AND FREDERICK K.W. DAY HAVE A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 REVIEW PROCESS

THE CFO, AND TREASURER REVIEWED A DRAFT OF THE FORM 990 THAT WAS PREPARED

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

BY A THIRD-PARTY TAX PREPARER, GRANT THORNTON, BASED UPON INFORMATION WBR

PROVIDED THE PREPARER. SUBSEQUENT TO THEIR REVIEW, MANAGEMENT AND THE FULL

VOTING BOARD RECEIVED A COPY OF THE DRAFT RETURN ELECTRONICALLY. THE BOARD

PROVIDED ANY QUESTIONS OR COMMENTS TO THE CEO AND TREASURER AND THE FORM

990 WAS REVISED, AS NECESSARY. THE FULL VOTING BOARD OF DIRECTORS RECEIVED

A COPY OF THE FORM 990 PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT

THE RESPONSIBILITY FOR DISCLOSING ANY KNOWN OR REASONABLY FORESEEN ACTUAL

OR POTENTIAL CONFLICTS OF INTEREST SHALL BE UPON THE INTERESTED PARTY WHOSE

INTERESTS ARE OR MAY APPEAR TO BE IN CONFLICT. ALL INTERESTED PARTIES ARE

REQUIRED TO FILE A DISCLOSURE STATEMENT WITH WBR PRIOR TO SUCH INDIVIDUAL

COMMENCING HIS OR HER SERVICE WITH WBR AND THEREAFTER SHALL FILE WITH WBR

AN UPDATED DISCLOSURE STATEMENT AS MAY BE REQUIRED FROM TIME TO TIME BY THE

BOARD OF DIRECTORS OR ITS COMMITTEE DESIGNEE, AND IN NO EVENT LESS OFTEN

THAN ANNUALLY. THE MINUTES SHALL REFLECT THAT THE CONFLICT OF INTEREST WAS

DISCLOSED AND THE INTERESTED PERSON WAS NOT PRESENT DURING ANY DISCUSSION

OF THE MATTER AND DID NOT VOTE ON THE MATTER IN PERSON OR BY PROXY.

WHEN ANY SUCH CONFLICT OF INTEREST IS RELEVANT TO A MATTER REQUIRING ACTION

BY THE BOARD OF DIRECTORS OR ANY COMMITTEE OF THE BOARD, THE INTERESTED

PERSON SHALL DISCLOSE SUCH CONFLICT TO THE BOARD OF DIRECTORS OR SUCH

COMMITTEE; AND SHALL NOT VOTE ON THE MATTER. FURTHER, THE INTERESTED PERSON

HAVING A CONFLICT SHALL RETIRE FROM THE ROOM IN WHICH THE BOARD OR THE

COMMITTEE IS MEETING AND SHALL NOT PARTICIPATE IN ANY DELIBERATION OR

DECISION REGARDING THE MATTER UNDER CONSIDERATION. WHEN THERE IS A DOUBT AS

TO WHETHER A CONFLICT OF INTEREST EXISTS, THE MATTER SHALL BE RESOLVED BY A

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

VOTE OF THE BOARD OF DIRECTORS OR THE COMMITTEE, AS THE CASE MAY BE,
 EXCLUDING THE INTERESTED PERSON CONCERNING WHOM THE DOUBT HAS ARISEN. THE
 BOARD OF DIRECTORS, FROM TIME TO TIME, SHALL REPORT ON ITS IMPLEMENTATION
 OF THESE GUIDELINES AND THE STATUS OF ANY POLICY DEVELOPMENTS REGARDING
 COMPENSATION AND CONFLICTS OF INTEREST. FURTHER, THE BOARD OF DIRECTORS
 SHALL REPORT AFTER HAVING BEEN ALERTED TO SPECIFIC INSTANCES WHEN THESE
 GUIDELINES HAVE NOT BEEN FOLLOWED OR ANY OTHER ISSUE REGARDING COMPENSATION
 OR CONFLICT OF INTEREST IS DETERMINED TO EXIST.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION REVIEW

WBR ESTABLISHES A REBUTTABLE PRESUMPTION THAT THE COMPENSATION PAID TO THE
 CEO AND OTHER EXECUTIVES IS REASONABLE. WBR ESTABLISHES A POSITION BY
 COMPARING THE COMPENSATION OF ITS CEO AND OTHER EXECUTIVES AGAINST 10
 SIMILAR SIZE NONPROFITS IN WBR'S PEER GROUP AND THIRD-PARTY MARKET DATA
 PROVIDED BY GRANT THORNTON. THE DATA USED FOR THE COMPARISON IS TAKEN FROM
 THE 990, ANNUAL REPORT AND AUDITED FINANCIAL STATEMENTS FROM THE 10
 NONPROFITS AND THIRD-PARTY DATA BASES ACCESSED BY GRANT THORNTON. THE FINAL
 ANALYSIS IS PRESENTED TO THE BOARD OF DIRECTORS OF WBR AND SALARIES ARE
 APPROVED YEARLY AT THE FEBRUARY BOARD MEETING.

COMPENSATION REVIEW BY INDEPENDENT PERSONS

COMPENSATION IS ESTABLISHED FOR THE CEO AND TREASURER BY THE BOARD AFTER A
 THOROUGH SALARY/MARKET REVIEW BY A THIRD PARTY. THIS SALARY/MARKET REVIEW
 PROCESS WAS COMPLETED IN 2019 BY GRANT THORNTON.

EACH YEAR THE BOARD EVALUATES THE CEO AND TREASURER'S PERFORMANCE THROUGH
 AN ASSESSMENT PROCESS. THE BOARD USES THIS DATA TO DETERMINE COMPENSATION.

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
---	--

THE SENIOR STAFF HAS A COMPREHENSIVE PERFORMANCE EVALUATION AND
 COMPENSATION REVIEW DONE AT THE END OF EACH CALENDAR YEAR. SALARY IS
 BENCHMARKED REGULARLY VIS-A-VIS OTHER SIMILAR ORGANIZATIONS USING FORM 990
 DATA. DOCUMENTATION OF THE COMPENSATION REVIEW IS CONTEMPORANEOUSLY
 DOCUMENTED IN THE HUMAN RESOURCES FILES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
 AL, AR, AZ, CA, CT, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OH, OK, OR, PA
 RI, TN, UT, VA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19:
 GOVERNING DOCUMENTS AVAILABLE TO PUBLIC
 THE FOLLOWING DOCUMENTS ARE POSTED ON THE ORGANIZATION'S WEBSITE AND
 AVAILABLE UPON REQUEST: ARTICLES OF INCORPORATION, BYLAWS, CONFLICT OF
 INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

DONATION REFUND	9,898.
FOREIGN EXCHANGE GAIN	-38,885.
TOTAL TO FORM 990, PART XI, LINE 9	-28,987.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **WORLD BICYCLE RELIEF, NFP** Employer identification number **20-5080679**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
WORLD BICYCLE RELIEF - AUSTRALIA 6 MACRO COURT ROWVILLE, AUSTRALIA AS VIC 317	BIKE RELIEF	AUSTRALIA	501(C)(3)		WBR	X	
WORLD BICYCLE RELIEF - ZAMBIA P. O. BOX 38991 LUSAKA, ZAMBIA	BIKE RELIEF	ZAMBIA	501(C)(3)		WBR	X	
WORLD BICYCLE RELIEF DEUTSCHLAND GMBH ROMSTRASSE 1 SCHWEINFURT, GERMANY GM D-97424	BIKE RELIEF	GERMANY	501(C)(3)		WBR	X	
WORLD BICYCLE RELIEF MALAWI PLOT 21/2/35 LILONGWE, MALAWI	BIKE RELIEF	MALAWI	501(C)(3)		WBR	X	

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

Schedule R (Form 990) 2022

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
WORLD BICYCLE PRIVATE LIMITED 540 RORO CLOSE RUWA, ZIMBABWE	BICYCLE SALES	ZIMBABWE	WBR, TRUST	C CORP	3,002,844.	1,691,364.	100%		X
BUFFALO BICYCLE LIMITED SUITE 405, 4TH FLOOR, BARKLY WARF EA PORT LOUIS, MAURITIUS	BICYCLE SALES	MAURITIUS	WBR, NFP	C CORP	5,930,246.	888,372.	100%		X
BUFFALO BICYCLE KENYA LIMITED LUTHER PLZ 1, FL NO 209/5447 NAIROBI, KENYA	BICYCLE SALES	KENYA	BB MAURITIUS	C CORP	1,815,025.	1,287,880.	1.00%		X
BUFFALO BICYCLE ZAMBIA LIMITED PLOT NO. 2405, KABELNGA ROAD LUSAKA, ZAMBIA	BICYCLE SALES	ZAMBIA	BB MAURITIUS	C CORP	4,911,955.	2,246,379.	1.00%		X
BUFFALO BICYCLE SOUTH AFRICA (PTY) LTD 1 SURREY PLACE TWO OCEANS HOUSE ST MOUILLE POINT, SOUTH AFRICA	BICYCLE SALES	SOUTH AFRICA	BB MAURITIUS	C CORP	258,424.	64.	1.00%		X

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)	X	
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses	X	
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)	X	
s Other transfer of cash or property from related organization(s)	X	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) WORLD BICYCLE RELIEF AUSTRALIA	B	500,000.	COST
(2) BUFFALO BICYCLE COLOMBIA	D	47,044.	COST
(3) BUFFALO BICYCLE LIMITED MAURITIUS	D	797,759.	COST
(4) WORLD BICYCLE RELIEF (PRIVATE) LIMITED ZIMBABWE	L	353,355.	COST
(5) BUFFALO BICYCLE LIMITED MARITIUS	E	150,000.	COST
(6) BUFFALO BICYCLE KENYA	L	1,057,256.	COST

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) WORLD BICYCLE RELIEF ZAMBIA	L	298,930.	COST
(8) BUFFALO BICYCLE LIMITED MAURITIUS	L	2,446,148.	COST
(9) BUFFALO BIBYCLE MALAWI	L	211,988.	COST
(10) WORLD BICYCLE RELIEF COLOMBIA	L	662,029.	COST
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

