

Form 990 <small>Department of the Treasury Internal Revenue Service</small>	Return of Organization Exempt From Income Tax	<small>OMB No. 1545-0047</small> 2023 Open to Public Inspection
	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.	

A For the 2023 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		
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1000 WEST FULTON MARKET		E Telephone number (312) 664-3604
	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		G Gross receipts \$ 15,535,317.
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527		H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No	
J Website: WWW.WORLDBICYCLERELIEF.ORG		H(b) Are all subordinates included? Yes No	
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 <input type="checkbox"/> 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 2023 (Part V, line 2a)	5	31
	6 Total number of volunteers (estimate if necessary)	6	10
	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)	12,203,140.	15,345,619.
	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)	33,274.	178,048.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-110.	1,305.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,236,304.	15,524,972.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,347,316.	7,530,648.
	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)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	4,393,663.	5,015,356.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,304,601.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,680,846.	3,928,403.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	12,421,825.	16,474,407.	
19 Revenue less expenses. Subtract line 18 from line 12	-185,521.	-949,435.	
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)	12,804,362.	13,342,292.
	22 Net assets or fund balances. Subtract line 21 from line 20	386,226.	2,310,489.
22 Net assets or fund balances. Subtract line 21 from line 20	12,418,136.	11,031,803.	

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. My preparation of this return is based on all information of which I have any knowledge.				
Sign Here	Signature of officer JEFF BOSKEN, EXEC DIR. OF FINANCE & ADMIN.		Date 11/8/2024	
	Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name BRIDGET T. ROCHE	Preparer's signature <i>Bridget Roche</i>	Date 11/8/2024	Check if self-employed <input type="checkbox"/> PTIN P00666837
	Firm's name GRANT THORNTON ADVISORS LLC	Firm's EIN 99-1856619		
	Firm's address 171 N. CLARK ST., STE. 200 CHICAGO, IL 60601		Phone no. 920-968-6700	

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

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

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

OMB No. 1545-0047

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

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.

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.

Part I - Identification

Type or Print File by the due date for filing your return. See instructions.	Name of exempt organization, employer, or other filer, see instructions. WORLD BICYCLE RELIEF, NFP	Taxpayer identification number (TIN) 20-5080679
	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 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
Plan Number _____
Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of JEFF BOSKEN

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, 20 24, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
☒ calendar year 20 23 or
tax year beginning _____, 20 _____, and ending _____, 20 _____

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.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2024)

Part III Statement of Program Service AccomplishmentsCheck 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 ☒ 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 ☒ 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 \$ 8,869,366. including grants of \$ 7,529,169.) (Revenue \$ 0.)
PROGRAM ACTIVITIESWBR'S MOBILIZED COMMUNITIES PROGRAM MODEL DRIVES SUSTAINABLE BICYCLE
USE THROUGH COMMUNITY-LED MULTISECTOR 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 MECHANIC TRAINING. (CONTINUED IN SCHEDULE
O).**4b** (Code:) (Expenses \$ 552,357. including grants of \$ 0.) (Revenue \$ 0.)
PRODUCT DEVELOPMENTFOR 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 ISNT IN THE OBJECT ITSELF, BUT RATHER IN THE FUCTION 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 \$ 1,590,304. including grants of \$) (Revenue \$)

4e Total program service expenses 11,012,027.Form **990** (2023)

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

X

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	22
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

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

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 31		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
b If "Yes," enter the name of the foreign country <u>SEE SCHEDULE O</u> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12 10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders 11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
c Enter the amount of reserves on hand 13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.		

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

☒**Section A. Governing Body and Management**

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	9													
b Enter the number of voting members included on line 1a, above, who are independent		6												
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2							X				
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?				3										X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				4										X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?				5										X
6 Did the organization have members or stockholders?				6										X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?				7a										X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?				7b										X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?				8a						X				
b Each committee with authority to act on behalf of the governing body?				8b						X				
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9										X

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

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a														X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b													
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			11a							X					
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.				11b											
12a Did the organization have a written conflict of interest policy? If "No," go to line 13				12a						X					
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?				12b						X					
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done					12c					X					
13 Did the organization have a written whistleblower policy?				13						X					
14 Did the organization have a written document retention and destruction policy?				14						X					
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?															
a The organization's CEO, Executive Director, or top management official				15a						X					
b Other officers or key employees of the organization				15b						X					
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.															
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?				16a											X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?				16b											

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.
☒ Own website ☐ Another's website ☒ 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 ContractorsCheck 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) ANDREW SAMWAYS VP OF PRODUCT DEVELOPMENT	40.00 0.00					X		454,737.	0.	49,804.
(2) DAVID NEISWANDER CEO	40.00 0.00			X				350,501.	0.	44,275.
(3) ALISHA MYERS SII DIRECTOR	40.00 0.00				X			244,866.	0.	36,813.
(4) JEFFREY BOSKEN TREASURER & CORP SECRETARY	40.00 0.00			X				220,201.	0.	59,581.
(5) SEAN GRANVILLE ROSS ED OF PROGRAMS (AS OF 3/23)	40.00 0.00				X			223,874.	0.	26,441.
(6) MARCIA WILSON ED HUMAN RESOURCES	40.00 0.00				X			150,495.	0.	32,405.
(7) ANDREW BATCHELOR INSTITUTIONAL MARKETS LEAD	40.00 0.00				X			163,880.	0.	18,857.
(8) FREDERICK K.W. DAY BOARD MEMBER	1.00 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 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 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.

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			
1b Subtotal								1,808,554.	0.	268,176.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,808,554.	0.	268,176.

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

17

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 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? *If "Yes," complete Schedule J for such individual*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		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 AND DEVELOPMENT	554,229.
GRANT THORNTON ADVISORS LLC, 171 N CLARK STREET SUITE 200, CHICAGO, IL 60601	ACCOUNTING	202,496.
GREENBERG TRAURIG LLP 8400 NW 36TH STREET, DORAL, FL 33166	LEGAL	164,076.

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

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Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) 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	3,713,548.				
	e Government grants (contributions)	1e	650,000.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	10,982,071.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 724,954.				
	h Total. Add lines 1a-1f						
Program Service Revenue			Business Code				
	2 a						
	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)			135,314.			135,314.
	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	0.				
	c Gain or (loss)	7c	42,734.				
	d Net gain or (loss)		42,734.				
	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	11,650.				
b Less: cost of goods sold	10b	10,345.					
c Net income or (loss) from sales of inventory		1,305.					
Miscellaneous Revenue			Business Code				
	11 a						
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions				15,524,972.	0.	0.	179,353.

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	7,530,648.	7,530,648.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	518,202.	339,226.	162,951.	16,025.
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	3,643,910.	1,634,398.	562,626.	1,446,886.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	120,188.	53,425.	20,623.	46,140.
9 Other employee benefits	343,328.	174,539.	76,228.	92,561.
10 Payroll taxes	389,728.	191,101.	65,934.	132,693.
11 Fees for services (nonemployees):				
a Management				
b Legal	316,611.	28,065.	282,665.	5,881.
c Accounting	207,156.		207,156.	
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.)	990,181.	268,192.	149,633.	572,356.
12 Advertising and promotion	552,379.	33,675.	3,098.	515,606.
13 Office expenses	315,653.	109,787.	91,369.	114,497.
14 Information technology	299,971.	56,996.	161,825.	81,150.
15 Royalties				
16 Occupancy	48,937.	34,088.	2,382.	12,467.
17 Travel	600,365.	354,739.	126,681.	118,945.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	234,182.	44,376.	42,007.	147,799.
20 Interest	243,024.	121,512.	121,512.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	37,999.	23,859.	14,140.	
23 Insurance	80,830.	12,522.	66,928.	1,380.
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 BICYCLE FREIGHT	1,115.	879.	21.	215.
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	16,474,407.	11,012,027.	2,157,779.	3,304,601.
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 SheetCheck 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	832,486.	2	735,744.
	3 Pledges and grants receivable, net	952,963.	3	788,617.
	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	187,823.	9	111,112.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 632,661.		
	b Less: accumulated depreciation	10b 481,308.		
		89,381.	10c	151,353.
	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	10,741,709.	13	11,553,812.
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	0.	15	1,654.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	12,804,362.	16	13,342,292.	
Liabilities	17 Accounts payable and accrued expenses	321,684.	17	728,874.
	18 Grants payable	0.	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	0.	23	1,500,000.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	64,542.	25	81,615.
	26 Total liabilities. Add lines 17 through 25	386,226.	26	2,310,489.
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	12,318,136.	27	10,931,803.
	28 Net assets with donor restrictions	100,000.	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	12,418,136.	32	11,031,803.	
33 Total liabilities and net assets/fund balances	12,804,362.	33	13,342,292.	

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Part XI Reconciliation of Net AssetsCheck 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	15,524,972.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,474,407.
3	Revenue less expenses. Subtract line 2 from line 1	3	-949,435.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,418,136.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-436,898.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	11,031,803.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
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: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
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.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	

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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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,213,892.	9,452,136.	12,250,988.	12,203,140.	15,345,619.	57,465,775.
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	8,213,892.	9,452,136.	12,250,988.	12,203,140.	15,345,619.	57,465,775.
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)						15,098,668.
6 Public support. Subtract line 5 from line 4.						42,367,107.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	8,213,892.	9,452,136.	12,250,988.	12,203,140.	15,345,619.	57,465,775.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	88,731.	98,097.	119,266.	111,219.	135,314.	552,627.
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.)	-3,556.	18,967.	12,426.	12,339.	1,305.	41,481.
11 Total support. Add lines 7 through 10						58,059,883.

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	<input type="checkbox"/>	

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	72.97	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	70.25	%
16a 33 1/3% support test - 2023. 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	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2022. 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	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2022. 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	<input type="checkbox"/>		
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	<input type="checkbox"/>		

Schedule A (Form 990) 2023

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the 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

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. 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 - 2022. 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?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
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? 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.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
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)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
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? 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.			
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

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).		

Schedule A (Form 990) 2023

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 2023 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-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Schedule A (Form 990) 2023

Part VI**Supplemental Information.**

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

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

NET INCOME FROM INVENTORY

2019 AMOUNT: \$ -3,556.

2020 AMOUNT: \$ 18,967.

2021 AMOUNT: \$ 12,426.

2022 AMOUNT: \$ 12,174.

2023 AMOUNT: \$ 1,305.

PHOTO USE FEE

2019 AMOUNT: \$ 0.

2020 AMOUNT: \$ 0.

2021 AMOUNT: \$ 0.

2022 AMOUNT: \$ 165.

2023 AMOUNT: \$ 0.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

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).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Name of organization	Employer identification number
WORLD BICYCLE RELIEF, NFP	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		\$ 2,532,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
2		\$ 1,747,117.	Person <input checked="" type="checkbox"/> Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 915,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
4		\$ 383,441.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

20-5080679

Part II

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	<hr/> <hr/> <hr/> <hr/>	\$ 724,954.	12/31/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	\$ <hr/>	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	\$ <hr/>	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	\$ <hr/>	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	\$ <hr/>	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	\$ <hr/>	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	\$ <hr/>	<hr/>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	\$ <hr/>	<hr/>

Name of organization	Employer identification number
WORLD BICYCLE RELIEF, NFP	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

2023

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2023

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

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

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 in 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:

(i) Unrelated organizations? ☐ Yes ☐ No

(ii) Related organizations? ☐ Yes ☐ No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☐ No

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		440,116.	297,782.	142,334.
e Other		192,545.	183,526.	9,019.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				151,353.

Schedule D (Form 990) 2023

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, line 12, col. (B))		

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	1,477,172.	END-OF-YEAR MARKET VALUE
(2) PRI LOAN - KENYA	1,087,389.	END-OF-YEAR MARKET VALUE
(3) PRI LOAN - MAURITIUS	7,258,419.	END-OF-YEAR MARKET VALUE
(4) PRI LOAN - SPAIN	747,651.	END-OF-YEAR MARKET VALUE
(5) PRI LOAN - MALAWI	127,840.	END-OF-YEAR MARKET VALUE
(6) PRI LOAN - INTERNATIONAL		
(7) PHILANTHROPIC	546,820.	END-OF-YEAR MARKET VALUE
(8) PRI LOAN - COLOMBIA	237,171.	END-OF-YEAR MARKET VALUE
(9) PRI LOAN - UGANDA	71,350.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))	11,553,812.	

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, line 15, col. (B))	

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 BB ZAMBIA	48,793.
(3) DUE TO BB ZIMBABWE	32,822.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	81,615.

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 ... ☒

Schedule D (Form 990) 2023

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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses 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	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part 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	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

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

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, 2023, AND 2022, THE ORGANIZATION DOES NOT HAVE

UNRELATED BUSINESS INCOME.

AS OF DECEMBER 31, 2023 AND 2022, MANAGEMENT HAS DETERMINED THAT THERE ARE

Part XIII Supplemental Information *(continued)*

NO MATERIAL UNCERTAIN POSITIONS THAT REQUIRE RECOGNITION IN THE

CONSOLIDATED FINANCIAL STATEMENTS.

**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

2023Open 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	7	0	GRANTMAKING	BICYCLES	2,651,734.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING	PROGRAM IMPLEMENTATION	1,083,355.
SOUTH AMERICA	1	0	GRANTMAKING	BICYCLES	1,108,339.
SOUTH AMERICA	0	0	GRANTMAKING	PROGRAM IMPLEMENTATION	115,440.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING	MOBILIZED COMMUNITIES	803,473.
EUROPE (INCLUDING ICELAND & GREENLAND)	4	0	GRANTMAKING	PRODUCT DEVELOPMENT	496,710.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	INTERCOMPANY SERVICE FEE	PRODUCT DEVELOPMENT	26,143.
EAST ASIA AND THE PACIFIC	1	0	GRANTMAKING	PROGRAM IMPLEMENTATION	700,000.
3 a Subtotal	13	0			6,985,194.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	13	0			6,985,194.

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

Schedule F (Form 990) 2023

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	2,113,653.	WIRE	0.		
			SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	706,699.	WIRE	0.		
			SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	114,030.	WIRE	0.		
			SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	116,035.	WIRE	0.		
			SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	625,744.	WIRE	0.		
			SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	139,331.	WIRE	0.		
			SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	463,572.	WIRE	0.		
			SUB-SAHARAN AFRICA	PROGRAM IMPLEMENTATION	803,473.	WIRE	0.		

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 **8****3** Enter total number of other organizations or entities **3**

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 the 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 the 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 the 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 the 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 the 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 the Instructions for Form 5713; don't file with Form 990)* ☐ Yes ☒ No

Schedule F (Form 990) 2023

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 - AFRICA FUNDING, BUFFALO

BICYCLE LIMITED, BUFFALO BICYCLE SOUTH AFRICA, WORLD BICYCLE RELIEF

(PRIVATE) LIMITED, BUFFALO BICYCLE MALAWI, BUFFALO BICYCLE UGANDA,

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,

MALAWI, COLOMBIA, UGANDA, AND KENYA WHO MONITOR THE USE OF THE FUNDS.

**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

2023

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 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

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

Schedule J (Form 990) 2023

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) ANDREW SAMWAYS VP OF PRODUCT DEVELOPMENT	(i)	149,133.	0.	305,604.	23,641.	26,163.	504,541.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DAVID NEISWANDER CEO	(i)	350,501.	0.	0.	33,360.	10,915.	394,776.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ALISHA MYERS SII DIRECTOR	(i)	157,273.	0.	87,593.	28,688.	8,125.	281,679.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JEFFREY BOSKEN TREASURER & CORP SECRETARY	(i)	220,201.	0.	0.	30,884.	28,697.	279,782.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) SEAN GRANVILLE ROSS ED OF PROGRAMS (AS OF 3/23)	(i)	143,634.	0.	80,240.	8,376.	18,065.	250,315.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) MARCIA WILSON ED HUMAN RESOURCES	(i)	150,495.	0.	0.	9,458.	22,947.	182,900.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ANDREW BATCHELOR INSTITUTIONAL MARKETS LEAD	(i)	163,880.	0.	0.	18,857.	0.	182,737.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
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	(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 2023, ALISHA MYERS AND ANDREW SAMWAYS RECEIVED THE

FOLLOWING TAXABLE SERVICES:

ANDREW SAMWAYS

HOUSING \$22,966

EMPLOYER-PROVIDED AUTOMOBILE \$7,703

TUITION ASSISTANCE FOR FAMILY \$4,317

TRAVEL \$2,266

TOTAL \$37,252

ALISHA MYERS

TAX SERVICES \$2,075

TOTAL \$2,075

THE HOUSING ALLOWANCE PROVIDED HOUSING THAT ALLOWED ANDY SAMWAYS TO CONDUCT

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.

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 OR APARTMENT.

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

DURING THE CALENDAR YEAR 2023, THE FOLLOWING INDIVIDUALS WERE PROVIDED TAX

GROSS-UP PAYMENTS:

ANDY SAMWAYS	\$ 268,352
ALISHA MYERS	\$ 85,518
SEAN GRANVILLE ROSS	\$ 80,240

SCHEDULE L
(Form 990)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

WORLD BICYCLE RELIEF, NFP

Employer identification number

20-5080679

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												

Total \$

Part III Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990) 2023

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
(1) F.K. DAY	SUBSTANTIAL CONT.	1,747,117.	BUS. REL.		X
(2) SRAM LLC	TRUSTEES/OFFICERS	479,885.	REIMBURSEME		X
(3) STAN DAY	SUBSTANTIAL CONT.	101,709.	BUS. REL.		X
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

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 AND STAN DAY AS BOARD MEMBERS AND/OR OFFICERS HAVE A BUSINESS

RELATIONSHIP WITH SRAM LLC. SRAM LLC PROVIDES IN-KIND RENTAL SPACE AND

UTILITIES TO WORLD BICYCLE RELIEF. THIS AMOUNT WAS PAID AT FAIR MARKET

VALUE.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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.

OMB No. 1545-0047

2023

Open to Public
Inspection

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	724,954. 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

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?

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

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.

	Yes	No
30a		X
31		X
32a		X
33		

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

Schedule M (Form 990) 2023

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

2023

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 780,000 PURPOSE-BUILT BICYCLES (AS OF

DECEMBER 2023), IMPACTING AN ESTIMATED 3.9 MILLION INDIVIDUALS ACROSS

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

FEEDBACK, RIGOROUSLY MEASURE RESULTS, AND ITERATE THE BUFFALO BICYCLE

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization	Employer identification number
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AND OUR PROGRAMS TO OPTIMIZE IMPACT.

ILLUSTRATIVE RESULTS

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

RECENT STUDY AN 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

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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

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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.

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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
 BICYCLES TO 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
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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 COUNTRIES WE
SERVE 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

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IN WHICH WBR OPERATES, THE ADVANTAGE OF A CABLE-FREE BRAKE IS 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 \$ 1,590,304. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

ZAMBIA, KENYA, MAURITIUS, ZIMBABWE,

MALAWI, COLOMBIA, SPAIN, GERMANY,

Name of the organization	Employer identification number
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UGANDA

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 AND A BUSINESS RELATIONSHIP.

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

FORM 990 REVIEW PROCESS

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
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THE CFO, AND TREASURER REVIEWED A DRAFT OF THE FORM 990 THAT WAS PREPARED

BY A THIRD-PARTY TAX PREPARER, GRANT THORNTON ADVISORS, LLC, 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

Name of the organization WORLD BICYCLE RELIEF, NFP	Employer identification number 20-5080679
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TO WHETHER A CONFLICT OF INTEREST EXISTS, THE MATTER SHALL BE RESOLVED BY A

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 2023 BY GRANT THORNTON.

EACH YEAR THE BOARD EVALUATES THE CEO AND TREASURER'S PERFORMANCE THROUGH

Name of the organization

WORLD BICYCLE RELIEF, NFP

Employer identification number

20-5080679

AN ASSESSMENT PROCESS. THE BOARD USES THIS DATA TO DETERMINE COMPENSATION.

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.

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

2023

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) 2023

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	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	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	700,000. COST	
(2) BUFFALO BICYCLE COLUMBIA	L	875,338. COST	
(3) BUFFALO BICYCLE LIMITED MAURITIUS	D	1,245,000. COST	
(4) WORLD BICYCLE RELIEF (PRIVATE) LIMITED ZIMBABWE	L	231,685. COST	
(5) WORLD BICYCLE RELIEF AFRICA FUNDING	B	803,473. COST	
(6) BUFFALO BICYCLE KENYA	L	582,846. 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	334,284. COST	
(8) BUFFALO BICYCLE LIMITED MAURITIUS	L	2,303,811. COST	
(9) BUFFALO BIBYCLE MALAWI	L	209,267. COST	
(10) WORLD BICYCLE RELIEF COLUMBIA	L	550,102. COST	
(11) BUFFALO BICYCLE UGANDA	L	511,614. COST	
(12) WORLD BICYCLE RELIEF SERVICES	L	631,601. COST	
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

Provide additional information for responses to questions on Schedule R. See instructions.