**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

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

2022
2023
Open to Public Inspection
n number

<u>A I</u>	For the	2023 calendar year, or tax year beginning and	ending		
В	Check if applicable	C Name of organization		D Employer identifie	cation number
Г	Addre	BERNIE'S BOOK BANK			
	Name chang			27-09144	53
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) 917 NORTH SHORE DRIVE	Room/suite	E Telephone number 847-780-	
	لـــاreturn/ termin ated			G Gross receipts \$	7,687,952.
Г	Ameno			H(a) Is this a group re	
F	Applic			for subordinates	
	pendir	SAME AS C ABOVE		<b>H(b)</b> Are all subordinates in	—
$\overline{\Gamma}$	Гах-ех	empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) o	or 527	1	list. See instructions
	Websit			H(c) Group exemption	
K	orm of	organization: X Corporation Trust Association Other	<b>L</b> Year		1 State of legal domicile: IL
Pa	art I	Summary			
4	1	Briefly describe the organization's mission or most significant activities: BERN			
Activities & Governance		NONPROFIT ORGANIZATION FOUNDED IN 2009 TH	AT PRO	OVIDES FREE	QUALITY
rna	2	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass	
ove	3			3	18
<u>ن</u> ح	4	Number of independent voting members of the governing body (Part VI, line 1b)			18
es 8	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			53
ΞĘ	6	Total number of volunteers (estimate if necessary)			35000
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	·····		0.
				Prior Year 5,942,659.	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		0.	6,144,528.
	9	Program service revenue (Part VIII, line 2g)		10,120.	21,078.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-162,607.	-132,275.
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,790,172.	6,033,331.
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,908,824.	2,079,572.
ses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	. ь	Total fundraising expenses (Part IX, column (D), line 25) 764,85	51.		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,427,652.	3,817,168.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,336,476.	5,896,740.
	19	Revenue less expenses. Subtract line 18 from line 12		453,696.	136,591.
Net Assets or	3		Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		7,083,176.	7,023,004.
t As	21	Total liabilities (Part X, line 26)		2,599,529.	2,348,699.
	22	Net assets or fund balances. Subtract line 21 from line 20		4,483,647.	4,674,305.
_	art II	Signature Block			
		Ities of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	lich preparer	nas any knowledge.	
C:~	_	Signature of officer		I Date	
Sig		KRISTEN DANIELS, EXECUTIVE DIRECTOR		Dato	
Hei	е	Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	j	MARLENE DOMASH MARLENE DOMASH	1	.0/07/24 if self-employ	P01285633
	parer	Firm's name WIPFLI LLP		Firm's EIN 3	9-0758449
	Only	Firm's address 100 TRI-STATE INTERNATIONAL STE 3	00		
_		LINCOLNSHIRE, IL 60069		Phone no. 84	7.941.0100
Ma	y the IF	S discuss this return with the preparer shown above? See instructions			X Yes No
ΙΗ	For	Paperwork Reduction Act Notice, see the separate instructions. 332001 13	2-21-23		Form <b>990</b> (2023)

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: BERNIE'S BOOK BANK SOURCES, PROCESSES AND DISTRIBUTES QUALITY NEW AND
	GENTLY USED CHILDREN'S BOOKS TO INCREASE BOOK OWNERSHIP AMONG CHILDREN
	THROUGHOUT UNDERSERVED COMMUNITIES IN CHICAGO AND THE SIX SURROUNDING
	COUNTIES.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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?
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 \$4 , 486 , 933 • including grants of \$0 • (Revenue \$)
	BERNIE'S BOOK BANK SOURCES, PROCESSES AND DISTRIBUTES QUALITY NEW AND
	GENTLY USED CHILDREN'S BOOKS TO SIGNIFICANTLY INCREASE BOOK OWNERSHIP
	AMONG UNDER-SERVED INFANTS, TODDLERS AND SCHOOL-AGE CHILDREN THROUGHOUT
	CHICAGOLAND. BERNIE'S BOOK BANK HAS SOURCED, PROCESSED AND DISTRIBUTED
	MORE THAN APPROXIMATELY 25 MILLION QUALITY CHILDREN'S BOOKS SINCE
	DECEMBER 2009.
	BERNIE'S BOOK BANK PERFORMS THREE FUNCTIONS EXCEPTIONALLY WELL:
	(1) WE SOURCE QUALITY NEW AND GENTLY USED CHILDREN'S BOOKS THROUGH
	PARTNERSHIPS WITH SCHOOLS, BUSINESSES, BOOK PUBLISHERS AND
	DISTRIBUTORS. BERNIE'S BOOK BANK MANAGES THE COLLECTION PROCESS, TAKING
	THE BURDEN OFF OF SCHOOLS AND ORGANIZATIONS, AND MAXIMIZING THE
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	Other program services (Describe on Schedule O.)
−u	
	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses 4 , 486 , 933 •

09571007 147695 514925

# Form 990 (2023) BERNIE'S BOOK BANK 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)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	l		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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	444	Х	
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	21	
'	the organization's separate of consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	├		
ızu	Schedule D. Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		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? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			,,,
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X

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Form 990 (2023)

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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete			
	Schedule J	23	Х	<b>——</b>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K. If "No," go to line 25a	24a		_X_
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
d	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part 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? If "Yes," complete Schedule L, Part II	26		<u> </u>
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? If "Yes," complete Schedule L, Part III	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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?	28a		х
h	"Yes," complete Schedule L, Part IV  A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			Х
25.0	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	งอล		
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	500		
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		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	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
۔ د	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 6  Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	1c		
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Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 53 filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h X Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country 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? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Х Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a X If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 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? Х 15 If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17 If "Yes," complete Form 6069.

Form **990** (2023)

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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 18 **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. 18 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b 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 Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request \_\_ Other (explain on Schedule O) Own website Another's website 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. State the name, address, and telephone number of the person who possesses the organization's books and records KRISTEN DANIELS - 847-780-7323

Form **990** (2023)

917 NORTH SHORE DRIVE, LAKE BLUFF.

60044

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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.

(A)  Name and title	(B) Average hours per week	(do box		Pos heck	ition	than o	one n an	(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) BRIAN FLORIANI	40.00			3,7				175 720	0	2 702
FOUNDER (2) DARRIN UTYNEK	40.00			Х				175,738.	0.	2,703.
CHIEF EXECUTIVE OFFICER	40.00	-		х				171,133.	0.	2 514
(3) KRISTEN DANIELS	40.00			^				1/1,133.	0.	2,514.
EXECUTIVE DIRECTOR	40.00	1		х				92,417.	0.	0.
(4) LIA DOUGLAS	6.00							72,417.	0.	<u></u>
BOARD CHAIR (THRU DEC '23)	0.00	x		х				0.	0.	0.
(5) ERIN KIRCHNER	6.00								•	
BOARD VICE CHAIR		х		x				0.	0.	0.
(6) NICK JONES	3.00								-	
SECRETARY		Х		Х				0.	0.	0.
(7) VERONICA APPLETON	1.00									
DIRECTOR (THRU DEC '23)		Х						0.	0.	0.
(8) ROB ARMSTRONG	1.00									
DIRECTOR		Х						0.	0.	0.
(9) JEFF BURTELOW	1.00									
DIRECTOR		Х						0.	0.	0.
(10) DAVID CARLSON	1.00									
DIRECTOR		Х						0.	0.	0.
(11) DANIELLE DEMERER	1.00	-								
DIRECTOR	1	Х						0.	0.	0.
(12) NICOLE GRAHAM	1.00	ļ								•
DIRECTOR	1 00	Х				_		0.	0.	0.
(13) KAREN HABERCROSS	1.00	ļ							•	•
DIRECTOR (THRU DEC '23)	1 00	Х				_		0.	0.	0.
(14) PATRICK MANNELLY	1.00	٠,,							0	0
DIRECTOR (15) WALED TO MICE.	1 00	Х						0.	0.	0.
(15) VALERIE MCCALL DIRECTOR (THRU DEC '23)	1.00	х						0.	0.	0.
(16) PHIL MENZEL	1.00	Α.						0.	0.	<u> </u>
DIRECTOR	1.00	Х						0.	0.	0.
(17) AL MIRALLES	1.00	72						0.	0.	0.
DIRECTOR (THRU DEC '23)	1.00	х						0.	0.	0.
	ı		1				1		J •	Form <b>990</b> (2023)

332007 12-21-23 Form **990** (2023)

Form 990 (2023) BERNIE'S									27-09	14	453	Р	age 8
Part VII   Section A. Officers, Directors, Trust		oloy	ees,			ghes	st C		s (continued)				
(A)	(B)			Posi		1		(D)	(E)		_	(F)	
Name and title	Average hours per		not c	heck ı	more	than o s both		Reportable compensation	Reportable compensation	n		timate nount	
	week					r/trus		from	from related			other	O1
	(list any	ector						the	organizations		com	pensa	tion
	hours for related	or dir	99			ated		organization	(W-2/1099-MIS	C/		om th	
	organizations	rustee	al trust		99/	mpens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)			anizat d relat	
	below	Individual trustee or director	In stit utio nal tru stee	er	key employee	Highest compensated employee	er	•				anizati	
	line)	Indiv	Insti	Officer	Key 6	High emp	Former						
(18) TANUSREE MISRA	1.00												_
DIRECTOR	1 00	Х						0.		0.			0.
(19) USHA PATIL DIRECTOR	1.00	Х						0.		0.			0.
(20) LYNN VAN CLEAVE	1.00	Λ						0.		0.			0.
DIRECTOR	1.00	Х						0.		0.			0.
(21) KRISTIE VAINIKOS STEGEN	1.00									-			
DIRECTOR		Х						0.		0.			0.
			_										
			$\vdash$										
		-											
1b Subtotal								439,288.		0.		5,2	17.
c Total from continuation sheets to Part VII								0.		0.			0.
d Total (add lines 1b and 1c)								439,288.		0.		5,2	<u> 17.</u>
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable				_
compensation from the organization												Vaa	No
3 Did the organization list any <b>former</b> officer,	director twict	aa l			0.10		hio	wheat componented own	lavaa an	1		Yes	NO
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for so	•	,	,	•	,	,	_		•		3		Х
4 For any individual listed on line 1a, is the su											3		
and related organizations greater than \$150											4	Х	
5 Did any person listed on line 1a receive or a			•										
rendered to the organization? If "Yes." com	plete Schedule	e J fo	or su	ıch r	oers	on .					5		X
Section B. Independent Contractors													
Complete this table for your five highest cor	•	•							•	ensat	tion fro	om	
the organization. Report compensation for t	he calendar ye	ear e	ndir	ng w	ith c	or wi	thin		ear.				
<b>(A)</b> Name and business	address	NC	ONE	7.				( <b>B</b> )  Description of s	ervices	С	Ompei		n
-				_							•		
							-						
2 Total number of independent contractors (ir	ncluding but no	ot lin	nited	d to t	thos	se lis	ted	above) who received me	ore than				
\$100,000 of compensation from the organiz	ation				C	)							

Form **990** (2023)

		Chook if Schodulo O c	ontoine e	rooponoo	ar note to envilin	o in this Dort VIII			
		Check if Schedule O c	oritairis a	response	or note to any lin	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenuè excluded
							function revenue	business revenue	from tax under sections 512 - 514
				T. T					Sections 512 - 514
nts				1a					
3ra Iou				1b					
s, ( Am		Fundraising events		1c	705,406.				
a git	d	Related organizations		1d					
ıs, imi	е	Government grants (contri	ibutions)	1e					
rior S	f	All other contributions, gifts,	grants, and						
Contributions, Gifts, Grants and Other Similar Amounts		similar amounts not included	above	1f	5,439,122.				
d d	g	Noncash contributions included in I	lines 1a-1f	1g \$	3,290,287.				
Co	h	Total. Add lines 1a-1f				6,144,528.			
					Business Code				
o l	2 a								
ķ	b								
Ser	c								
II N	d								
gra Re	u 0								
Program Service Revenue	f	All other program service i	revenue						
$\rightarrow$		Total. Add lines 2a-2f							
	3	Investment income (includ	Ū	•	·	21 079			21,078.
	_					21,078.			21,076.
	4	Income from investment o		-					
	5	Royalties							
				i) Real	(ii) Personal				
		***************************************	6a	1,800.					
	b	Less: rental expenses	6b	0.					
	С	Rental income or (loss)	6c	1,800.					
	d	Net rental income or (loss)				1,800.			1,800.
	7 a	Gross amount from sales of	(i) S	Securities	(ii) Other				
		assets other than inventory	7a 1,	255,259.					
	b	Less: cost or other basis							
e		and sales expenses	7b 1,	255,259.					
en	С	Gain or (loss)	7c	0.					
Revenue		Net gain or (loss)			•				
er		Gross income from fundraisir							
Ğ	0 4	including \$	•						
		contributions reported on		- 1					
		Part IV, line 18	-		198,403.				
	h			۱.,	394,196.				
		Net income or (loss) from t	fundrajaja		051,150.	-195,793.			-195,793.
		Gross income from gamin				233,733.			233,733.
	эa								
		Part IV, line 19							
		Less: direct expenses							
		Net income or (loss) from							
	10 a	Gross sales of inventory, le		I	0 004				
		and allowances							
		Less: cost of goods sold			5,166.				
$\longrightarrow$	С	Net income or (loss) from	sales of in	ventory	I	4,828.			4,828.
S					Business Code				
Miscellaneous Revenue	11 a	INSURANCE PROCEEDS			900099	54,879.			54,879.
ane	b								
Sell	С								
Mis	d	All other revenue			900099	2,011.			2,011.
	е	Total. Add lines 11a-11d				56,890.			
	12	Total revenue. See instruction	ns			6,033,331.	0.	0.	-111,197.

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Form **990** (2023)

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 (**D**) Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, 444,505. 235,587. 66,676. 142,242. trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,360,483. 721,056. 204,072. 435,355. Other salaries and wages 7 Pension plan accruals and contributions (include 23,699. 12,560. 3,555. 7,584. section 401(k) and 403(b) employer contributions) 57,703. 16,331. 108,874. 34,840. Other employee benefits 9 142,011. 75,266. 21,301. 45,444. 10 Payroll taxes Fees for services (nonemployees): Management Legal 60,086. 60,086. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 45,696. 17,459.28,237. Advertising and promotion 12 72,159. 64,604. 6,978. 577. Office expenses 13 131,175. 65,588. 43,287. 300. Information technology 14 15 Royalties 443,817. 561,794. 67,416. 50,561. 16 Occupancy 8,099. 5,750. 648. 1,701. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 8,025. 8,025. 20 Payments to affiliates 21 8,216. 91,294. 72,122. 10,956. Depreciation, depletion, and amortization 22 75,524. 38,646. 22,109. 14,769. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 2,633,944. 2,633,944. BOOK SOURCING EXPENSES VEHICLE FLEET 30,539. 30,539. 30,420. 4,267. 24,891. 1,262. FEES 15,000. 15,000. BAD DEBT EXPENSE 53,413. 53,413. All other expenses 5,896,740. 4,486,933. 644,956. 764,851. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Form **990** (2023)

if following SOP 98-2 (ASC 958-720)

Check here

Par	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	1,765,063.	1	664,504.
	2	Savings and temporary cash investments		2	76,743.
	3	Pledges and grants receivable, net	586,039.	3	297,212.
	4	Accounts receivable, net	37,500.	4	0.
	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	
ပ္	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	1,554,325.	8	2,219,511.
۲	9	Prepaid expenses and deferred charges	41,352.	9	42,345.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D  Less: accumulated depreciation  10a  2,533,647.  2,258,035.			
	b	Less: accumulated depreciation 10b 2,258,035.	354,334.	10c	275,612. 1,505,207.
	11	Investments - publicly traded securities	513,556.	11	1,505,207.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	2,231,007.	15	1,941,870.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	7,083,176.	16	7,023,004.
	17	Accounts payable and accrued expenses	223,452.	17	279,934.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iab		controlled entity or family member of any of these persons	0.006.550	22	
-	23	Secured mortgages and notes payable to unrelated third parties	2,286,573.	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	00 504		0 060 865
		of Schedule D	89,504.	25	2,068,765.
	26	Total liabilities. Add lines 17 through 25	2,599,529.	26	2,348,699.
s		Organizations that follow FASB ASC 958, check here			
၁၁		and complete lines 27, 28, 32, and 33.	2 270 052		2 000 142
alar	27	Net assets without donor restrictions	3,379,052. 1,104,595.	27	2,800,143.
Ä	28	Net assets with donor restrictions	1,104,595.	28	1,874,162.
Š		Organizations that do not follow FASB ASC 958, check here			
卢		and complete lines 29 through 33.			
ts (	29	Capital stock or trust principal, or current funds		29	
SSE	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	4,483,647.	31	4,674,305.
ž	32	Total net assets or fund balances		32	
	33	Total liabilities and net assets/fund balances	7,083,176.	33	7,023,004.

Par	T XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		<u>6,03</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,89		
3	Revenue less expenses. Subtract line 2 from line 1	3			91.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,48	3,6	<u>47.</u>
5	Net unrealized gains (losses) on investments	5	5	4,0	67.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			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	4,67	4,3	05.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	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?		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		
	<del>-</del>		Form	990	(2023)

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#### **SCHEDULE A**

(Form 990)

<u>Total</u>

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Employer identification number

		BERN	TE'S BOOK I	BANK				7-0914453
Pa	ırt I	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.	
The	organ	ization is not a private found						
1		A church, convention of ch					)(A)(i).	
2	$\Box$	A school described in <b>sect</b>				` ` ` `	, , , ,	
3	一	A hospital or a cooperative				(b)(1)(A)(ii	i).	
4	Ħ	A medical research organiz					•	the hospital's name.
·		city, and state:		,				,
5		An organization operated for	or the benefit of a col	lege or university owned	or operat	ed by a go	vernmental unit describ	ed in
J	ш	section 170(b)(1)(A)(iv). (C		logo or armyoromy ownion	or operat	ou by a go	vorminorital armi accords	5 <b>4</b> 111
6		A federal, state, or local gov		ontal unit described in	soction 17	70(h)(1)(A)	(v)	
	X		-					nublic described in
′	22	An organization that norma		itiai part of its support if	on a gove	mmeman	unit or from the general	public described in
_		section 170(b)(1)(A)(vi). (C		AVAV-1) (Olate Davi				
8	$\mathbb{H}$	A community trust describe						
9		An agricultural research org				-	-	-
		or university or a non-land-g	grant college of agrici	ulture (see instructions).	Enter the i	name, city	, and state of the college	e or
		university:						
10		An organization that norma						
		activities related to its exen		•				-
		income and unrelated busing	ness taxable income	(less section 511 tax) fro	m busines	ses acquii	red by the organization a	after June 30, 1975.
		See section 509(a)(2). (Con	mplete Part III.)					
11	$\square$	An organization organized a	and operated exclusi	vely to test for public sat	ety. See	section 50	)9(a)(4).	
12		An organization organized a	•	•	•			•
		more publicly supported or	ganizations describe	d in <b>section 509(a)(1)</b> o	r <b>section</b> :	509(a)(2).	See <b>section 509(a)(3).</b> (	Check the box on
		lines 12a through 12d that	describes the type of	f supporting organization	and com	plete lines	12e, 12f, and 12g.	
а			anization operated, s	upervised, or controlled	by its supp	orted orga	anization(s), typically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	f the direc	tors or trustees of the su	upporting
		organization. You must o	complete Part IV, Se	ctions A and B.				
b		Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	d organization(s), by hav	/ing
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the sup	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions)	You must complete F	Part IV, Se	ctions A,	D, and E.	
d		Type III non-functionally						zation(s)
		that is not functionally int					• • • • •	
		requirement (see instructi	•	• ,	•		•	
е		Check this box if the orga	•	-				
		functionally integrated, or					31 · 7 31 · 7 31 ·	
f	Ente	er the number of supported o						
		ride the following information						
	(	i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
			ļ					+

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Schedule A (Form 990) 2023 BERNIE'S BOOK BANK 27-0914

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	tion
fails to qualify under the tests listed below, please complete Part III.)	

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5506597.	4917778.	5384478.	5942659.	6144528.	27896040.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	F F O C F O F	4010000	F 2 0 4 4 F 0	5040650	61.445.00	07006040
	Total. Add lines 1 through 3	5506597.	4917778.	5384478.	5942659.	6144528.	27896040.
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,						1676112
_	column (f)						4676112. 23219928.
	Public support. Subtract line 5 from line 4.						<u> </u>
		(a) 2010	(b) 2020	(a) 2021	(4) 2022	(a) 2022	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2019 5506597.	(b) 2020 4917778.	(c) 2021 5384478.	(d) 2022 5942659.	(e) 2023 6144528	(f) Total 27896040.
	Amounts from line 4  Gross income from interest.	33003371	4J17770*	33044701	3342033.	0144520.	2700040.
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	95,717.	7,636.	431.	19,039.	22 878.	145,701.
9	Net income from unrelated business	33,727	,,0301	1311	23,033.	22/0/00	11377011
Ū	activities, whether or not the						
	business is regularly carried on	9,607.					9,607.
10	Other income. Do not include gain	, , , ,					,
	or loss from the sale of capital						
	assets (Explain in Part VI.)					54,879.	54,879.
11	<b>Total support.</b> Add lines 7 through 10						28106227.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12 1	,119,727.
	First 5 years. If the Form 990 is for th			ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2023 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	82.61 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	82.81 %
16a	33 1/3% support test - 2023. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	
	$\ensuremath{\text{stop}}$ here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2022. If the						
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ition			Ш
17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact			-	•	VI how the organiz	zation
	meets the facts-and-circumstances te	-		• • •	-		
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets the						
	organization meets the facts-and-circu				•		
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box a		
						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.)

Sec	etion A. Public Support	siow, picase comp	oloto i dit ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	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 organ- ization'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						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
		(a) 2013	(6) 2020	(6) 2021	(d) ZOZZ	(6) 2020	(i) rotai
	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						
	Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is						
12	regularly carried on  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	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizatio	on,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2023 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	<b>2022</b> Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization qual	ifies as a publicly s	supported organiza	ation	
b	<b>33 1/3% support tests - 2022.</b> If the line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

		Yes	No
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Pai	TIV Supporting Organizations (continued)			
		_	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	1a		
		1b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
800	<u>detail in</u> Part VI. 1: tion B. Type I Supporting Organizations	1c		
Sec	tion B. Type i Supporting Organizations	$\overline{}$	<del>,,</del>	
			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 <b>Part VI</b> 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	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  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,			
		2		
Sec	tion 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		
Sec	tion 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			
	7	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			
_	and organization maintained a close and commission many relationship man and capported organization (o).	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			
Sec	supported organizations played in this regard. Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
' a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below</i> .			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruc	ctions	3)	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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			
	and the state of the significant	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	The second details in	la		
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.	Bb		

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on I	Nov. 20, 1970 ( explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		·	•
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7_	Other expenses (see instructions)	7		
8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3_	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6_	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting orga	nization (see

Schedule A (Form 990) 2023

instructions).

Schedule A (Form 990) 2023

#### **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 Inspection

Name of the organization

BERNIE'S BOOK BANK

**Employer identification number** 27-0914453

Pai			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at and of year	(a) Bonor advised funds	(b) i dilas ana otner accounts
2	Total number at end of 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 advi	sed funds
_	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included on line 2c acqu		
_	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	e organization during the tax
	year	and the land of	
4	Number of states where property subject to conservation eas	•	
5	Does the organization have a written policy regarding the per violations, and enforcement of the conservation easements in		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
Ū	ctan and relations made develop to memoring, inspecting,	Thanking or violations, and officioning con-	oor valien eacomonic daring the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year
	3, 1, 3,	3	3
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(l	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense	e statement and
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statem	ents that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in f	urtherance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these iter	ns.
b	If the organization elected, as permitted under FASB ASC 95	•	
	art, historical treasures, or other similar assets held for public	e exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under FASB A		•
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	5 IUI FUIII 99U.	Schedule D (Form 990) 2023

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

Par	rt III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or	Other	Simila	r Assets	(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other records	, check any of the f	ollowing that	make si	gnificant i	use of its		-	
	collection items (check all that apply).									
а	Public exhibition	d	Loan or excl	hange progra	m					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further th	e organizatio	n's exem	npt purpo	se in Part	XIII.		
5	During the year, did the organization solicit of	r receive donations of	art, historical treas	sures, or othe	r similar	assets		_		_
	to be sold to raise funds rather than to be ma							Yes		No
Par	rt IV Escrow and Custodial Arran		e if the organization	answered "Y	es" on F	orm 990	, Part IV, li	ne 9, or		
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custodi	,	•					7	_	7
	on Form 990, Part X?							<b>」Yes</b>		No
b	If "Yes," explain the arrangement in Part XIII	and complete the follo	owing table:					A		
								Amount		
	Beginning balance									
	Additions during the year									
е	Distributions during the year									
f	Ending balance					1f		7	_	1
	Did the organization include an amount on F					ty?	L	Yes	H	∐ No
	If "Yes," explain the arrangement in Part XIII.  rt V Endowment Funds Complete if									
Гаі	rt V   Endowment Funds Complete if	(a) Current year					years back	(e) Four	voore	hack
		<b></b>	(b) Prior year	(c) Two year	S Dack	(u) Tillee	years back	(e) Four	year s	Dack
	Beginning of year balance	513,556.	E00 000							
	Contributions	1,008,582.	500,000.							
	Net investment earnings, gains, and losses	75,125.	13,556.							
	Grants or scholarships									
е	Other expenditures for facilities	02.056								
_	and programs	92,056.								
	Administrative expenses	1,505,207.	E12 EE6							
g			513,556.	\						
2	Provide the estimated percentage of the curr	• 0 0 0 0		) neid as:						
_	Board designated or quasi-endowment  Permanent endowment 100		_%							
b		% %								
С		•								
2-	The percentages on lines 2a, 2b, and 2c sho	•	ion that are hald an	d administary	ad far th	_				
Sa	Are there endowment funds not in the posse	ssion of the organizat	ion triat are rieid an	ia administere	ed for the	3		Г	Yes	No
	organization by:								103	X
	(i) Unrelated organizations?  (ii) Related organizations?							3a(i)		X
<b>h</b>	If "Yes" on line 3a(ii), are the related organiza	tions listed as require						3a(ii) 3b		
	Describe in Part XIII the intended uses of the							Sb		
4 Par	rt VI Land, Buildings, and Equipm		ment iunus.							
	Complete if the organization answere		Part IV. line 11a. S	ee Form 990.	Part X. I	ine 10.				
	Description of property	(a) Cost or other				cumulate	od	(d) Book	valu	
	Description of property	basis (investm		<b>I</b>		reciation		(u) BOOK	valui	5
10	Land	`		(= 3.1.5.)	401					
	Land Ruildings									
	Buildings		1 82	7,787.	1 6	29,6	76.	198	1.1	11.
	Equipment			4,174.		58,9				26.
				1,686.		69,4			2,2	
	Other			<u>-,550.</u>		. U J , I		275	•	12

Schedule D (Form 990) 2023

Schedule D	) (Form 990) 2023 BERNIE'S BOO	OK BANK	2	7-0914453 Page <b>3</b>
	Investments - Other Securities			· · · · · · · · · · · · · · · · · · ·
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Descrip	otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financi	al derivatives			
(2) Closely	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
<u>(H)</u>				
	b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes" of			
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Part IX	b) must equal Form 990, Part X, line 13, col. (B))  Other Assets			
raitix	Complete if the organization answered "Yes"	on Form 000 Part IV line	11d Soo Form 990 Part V line 15	
		Description	Tru. See Form 990, Part A, line 15.	(b) Book value
(4) DT	GHT OF USE ASSETS-OPERAT	<u> </u>		1,941,870.
	GIII OF USE ASSETS-OFERA	LING		1,941,070.
(2)				
(3)				
(5)				
(6)				
(7)				
(8)				
(9)				
	ımn (b) must equal Form 990, Part X, line 15, col	(B))		1,941,870.
Part X	Other Liabilities	. (2)		, ,
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	25.
1.	(a) Description of liability			(b) Book value
	deral income taxes			
	PERATING LEASE LIABILITIE	ES		2,020,156.
	NANCE LEASE LIABILITIES			48,609.
(4)				·
(5)				
(6)				
(7)				
(8)				

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

2,068,765.

(9)

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

Pai	rt XI	Reconciliation of Rev			nts With R	evenue per Re	turn	
		Complete if the organization						6 150 006
1		revenue, gains, and other sup	• •				1	6,178,936.
2		nts included on line 1 but not			1 1	- 4 0 6 -		
а		nrealized gains (losses) on inv				54,067. 91,538.		
b		ed services and use of facilities				91,538.		
С		veries of prior year grants						
d								145 605
е		•					2e	145,605.
3		act line 2e from line 1					3	6,033,331.
4		nts included on Form 990, Pa	, ,		1 1			
а		ment expenses not included	, ,					
b		(Describe in Part XIII.)			4b			0
С							4c	0.
5 Do:	Total	revenue. Add lines 3 and 4c. Reconciliation of Exp	(This must equal Form 990	). Part I, line 12.)	nto With I	Evnonoso nor E	5	6,033,331.
Pai	IL VII	,				expenses per F	eturr	
		Complete if the organization						F 000 070
1		expenses and losses per aud					1	5,988,278.
2		nts included on line 1 but not	· · · · · · · · · · · · · · · · · · ·		11	01 520		
а		ed services and use of faciliti				91,538.		
b		year adjustments						
С		losses						
d		(Describe in Part XIII.)			•		_	01 520
							2e	91,538. 5,896,740.
3		act line 2e from line 1					3	5,890,740.
4		nts included on Form 990, Pa			1.1			
a		ment expenses not included						
b		(Describe in Part XIII.)			4b			0
							4c	0. 5,896,740.
Pai	rt XIII	expenses. Add lines 3 and 40 Supplemental Inform	ા (This must equal Form 99 ation	90. Part I. line 18.)			5	3,030,740.
				U. Para da and 4. Bart	N / 12 d l	I Ol D I V - I' 4	D = + 1/	· Para O. Davit VII
		descriptions required for Part					; Рап х	, line 2; Part XI,
iines	2d and	l 4b; and Part XII, lines 2d and	a 4b. Also complete this pa	art to provide any addi	tional informa	ation.		
DΔI	om ₹7	, LINE 4:						
LVI	XI V	, DINE 4.						
тиг	r FN	DOWMENT ASSETS	ARE COVERNED	RV & CDENINT	אכ דיי	דרע המשה כ	מעע	י ייר
1111	7 1714	DOMERII ABBEID	AKE GOVERNED	DI A SERIOI	NG FOL	ICI IIIAI B	٢١٤٢٤	, 10
חד מ	T GTC	BUTE A SPECIFIO	י סמע∩וות סמת ד	OF THE ENDO	יייות ביאותי	אפד ייר פוו	DDOE	ית הים
DI	JIKI	DOIE A SPECIFIC	, PAIOUI RAIL	OF THE ENDO	, MATATATA T	DASE TO SU	FFOI	XI IIIE
ORC	דאגב	ZATION'S PROGRA	ΔMG					
OICC	77111 1	ZHIION D INOGRE	11D •					

# SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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	<u> </u>					Employer ide	ntification number
BERNIE'S BOOK BANK						27-0914453	
<b>Part I</b> Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.							
<ul> <li>1 Indicate whether the organization rais</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, P</li> <li>b If "Yes," list the 10 highest paid individed compensated at least \$5,000 by the</li> </ul>	e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with previduals or entities (fundraisers) pursua	ion of ion of fundra (includ	non-g gover aising of ding of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribi	ustody itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total							
List all states in which the organization or licensing.			utions	or has been notified	it is	exempt from re	gistration

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

Schedule G (Form 990) 2023

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990-	·EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			BIRDIES &			(add col. (a) through
			BOOKS	BERNIE'S CUP	4	
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue						
e e	1	Gross receipts	519,640.	154,969.	229,200.	903,809.
اعّ		1	•	,	•	
	2	Less: Contributions	393,941.	89,265.	222,200.	705,406.
			, ,	,	,	, , , , , , , , , , , , , , , , , , , ,
	3	Gross income (line 1 minus line 2)	125,699.	65,704.	7,000.	198,403.
			,	, .	,	<b>,</b>
	4	Cash prizes				
	•					
	5	Noncash prizes				
တ္ထ	Ŭ	Trondadir prizod				
anse.	6	Rent/facility costs	117,565.	69,301.	8,728.	195,594.
ğ	Ü	Tiend lability debte	227,73331	03/3020	0,7,201	23373320
Direct Expenses	7	Food and beverages	46,452.	28,612.	23,901.	98,965.
<u>i</u>	'	1 ood and beverages	10,1321	20,0121	23/3011	3073031
의	Ω	Entertainment		4,304.	3,926.	8,230.
		Other direct expenses	39,548.	10,284.	41,575.	91,407.
	10	Direct expense summary. Add lines 4 through			•	394,196.
		Net income summary. Subtract line 10 from lin				-195,793.
Pa	rt I	II Gaming. Complete if the organization a				13371331
		\$15,000 on Form 990-EZ, line 6a.				
		,		(b) Pull tabs/instant		(d) Total gaming (add
e l			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
ᆲ	1	Gross revenue				
	2	Cash prizes				
Ses						
bel	3	Noncash prizes				
Direct Expenses						
ect G	4	Rent/facility costs				
盲						
	5	Other direct expenses				
		,	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
		. , ,	. ,			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	Ent	ter the state(s) in which the organization condu	cts gaming activities:			
		he organization licensed to conduct gaming ac				Yes No
		No," explain:				
	_					
10a	We	ere any of the organization's gaming licenses re	voked, suspended, or te	rminated during the tax y	ear?	Yes No
b		Yes," explain:				
b		Yes," explain:				

Schedule G (Form 990) 2023

332082 09-13-23

Schedule G (Form 990) 2023 BERNIE S BOOK BANK	17-0914455 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	<b>13a</b>   %
<b>b</b> An outside facility	I I
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
Name	
Address	
	Yes No
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	I les NO
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization \$ and the amou	ınt
of gaming revenue retained by the third party \$	
c If "Yes," enter name and address of the third party:	
Name	
Address	
16 Gaming manager information:	
Name	
Gaming manager compensation \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
<b>a</b> Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	TIE
organization's own exempt activities during the tax year \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and (v) are the explanations required by Part I, line 2b, columns (iii) and (v); are the explanations required by Part I, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part II, line 2b, columns (iii) and (v); are the explanations required by Part III and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by Part II and (v); are the explanations required by	ad Dort III. lines 0. Ob. 10b
	nd Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	

Schedule G	G (Form 990)	BERNIE'S BOOK	BANK	27-0914453	Page 4
Part IV	G (Form 990)  Supplemental Infor	mation (continued)			
		(continued)			

#### SCHEDULE J (Form 990)

**Compensation Information** 

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

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

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

BERNIE'S BOOK BANK

**Questions Regarding Compensation** 

Employer identification number 27-0914453

			Yes	No			
<b>1</b> a	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.						
	First-class or charter travel Housing allowance or residence for personal use						
	Travel for companions Payments for business use of personal residence						
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees						
	Discretionary spending account 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	1b					
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?	2					
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.						
	Compensation committee Written employment contract						
	Independent compensation consultant Compensation survey or study						
	Form 990 of other organizations  X 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:						
а	Receive a severance payment or change-of-control payment?	4a		Х			
b	Participate in or receive payment from a supplemental nonqualified retirement plan?						
	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:						
а	The organization?	5a		X			
b	Any related organization?	5b		X			
	If "Yes" on line 5a or 5b, describe in Part III.						
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the net earnings of:						
а	The organization?	6a		X			
b	Any related organization?	6b		X			
	If "Yes" on line 6a or 6b, describe in Part III.						
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments						
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X				
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the						
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X			
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in						
	Regulations section 53.4958-6(c)?	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.

		<b>(B)</b> Breakdown of W	V-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) BRIAN FLORIANI	(i)	108,905.	66,833.	0.	1,608.	1,095.	178,441.	0.
FOUNDER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DARRIN UTYNEK	(i)	171,133.	0.	0.	2,514.	0.	173,647.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							_
	(i)							_
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
COMPENSATION FOR THE CEO WAS DETERMINED BY THE BOARD OF DIRECTORS WHEN
HIRED USING A COMPENSATION STUDY TO DETERMINE A SALARY RANGE. THE
EXECUTIVE COMMITTEE REVIEWS, DETERMINES AND APPROVES COMPENSATION CHANGES
ANNUALLY.
PART I, LINE 7:
SCHEDULE J, PART II, COLUMN (B)(II) REPORTS DISSCRETIONARY INCENTIVE
AMOUNTS THAT WERE APPROVED BY THE BOARD BASED UPON PERFORMANCE.

# SCHEDULE M (Form 990)

## **Noncash Contributions**

2022

**2023** 

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Inspection
Employer identification number

	BERNIE'S BOO	27-0	27-0914453					
Pa	rt 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 de noncash contribu	etermin	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests	X						
4				2,127,084.	EST VALUE \$	1/B	OOK	
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	17	1,163,203.	SELLING PRI	CE		
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 organiz	zation during	the tax year for c	ontributions				
	for which the organization completed Form 82						0	
		, ,	0				Yes	No
30a	During the year, did the organization receive by	v contributio	n any property rep	orted in Part I, lines 1 throu	gh 28, that it			
	must hold for at least 3 years from the date of		* * * * *					
	exempt purposes for the entire holding period?					30a		Х
b	b If "Yes," describe the arrangement in Part II.							
31								Х
	Does the organization hire or use third parties					31		
	contributions?		•			32a		х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is che	cked,			
	describe in Part II.	. ,			•			

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

Schedule M (Form 990) 2023

332142 09-11-23 Schedule M (Form 990) 2023

#### 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.

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

BERNIE'S BOOK BANK

Employer identification number 27-0914453

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

BOOKS FOR CHILDREN, AGES BIRTH THROUGH SIXTH GRADE, TO BUILD PERSONAL

LIBRARIES. BERNIE'S BOOK BANK SOURCES, PROCESSES, AND DISTRIBUTES EIGHT

BOOKS ANNUALLY TO CHILDREN AT TITLE 1 SCHOOLS AND EARLY CHILDHOOD

PROGRAMS. SINCE 2009 BERNIE'S BOOK BANK HAS DISTRIBUTED OVER 27 MILLION

FREE CHILDREN'S BOOKS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
DONATIONS OF QUALITY BOOKS.

- (2) WE PROCESS BOOKS IN OUR PROCESSING CENTER WITH THE HELP OF A LARGE

  POOL OF VOLUNTEERS (INDIVIDUALS, COMMUNITY SERVICE & CORPORATE GROUPS).

  EACH BOOK IS REVIEWED FOR QUALITY, SORTED INTO AGE-APPROPRIATE READING

  LEVELS, "FINGERPRINTED" WITH THE BERNIE'S BOOK BANK STICKER, AND PLACED

  INTO A DISTRIBUTION-READY BAG OF EIGHT BOOKS.
- (3) BERNIE'S BOOK BANK DISTRIBUTES BAGS OF BOOKS TO LARGE POPULATIONS

  OF UNDER-SERVED CHILDREN PRIMARILY THROUGH IDENTIFIED SCHOOLS (BASED ON

  FREE AND REDUCED LUNCH PERCENTAGES) AND WIC (WOMEN INFANT CHILDREN)

  PROGRAMS. EACH CHILD SERVED RECEIVES A MINIMUM OF 8 BOOKS PER YEAR,

  EVERY YEAR, UNTIL THE CHILD COMPLETES 6TH GRADE; CREATING A CONTINUUM

  OF DISTRIBUTION FROM BIRTH THROUGH 6TH GRADE.

CURRENTLY, BERNIE'S BOOK BANK SERVES MORE THAN 315,000 UNDER SERVED

CHICAGOLAND CHILDREN FROM BIRTH THROUGH 6TH GRADE WITH 8 QUALITY BOOKS

EVERY YEAR.

DURING 2023, BERNIE'S BOOK BANK PROCURED, PROCESSED, AND DISTRIBUTED

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

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2** 

Name of the organization
BERNIE'S BOOK BANK
Employer identification number 27-0914453

2.5 MILLION BOOKS. THIS RESULTED IN NEARLY 30,000 VOLUNTEER HOURS AND ALLOWED US TO CELEBRATE DISTRIBUTING OUR 25TH MILLIONTH BOOK SINCE OUR FOUNDING IN 2009!

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

COPIES OF THE FORM 990 ARE DISTRIBUTED TO THE FINANCE COMMITTEE FOR REVIEW PRIOR TO THE RETURN BEING FILED.

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

THE OFFICERS AND DIRECTORS ANNUALLY SIGN A CONFLICT OF INTEREST DISCLOSURE.

IF A CONFLICT EXISTS THEN THAT PERSON IS REMOVED FROM THE BOARD.

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

COMPENSATION FOR THE CEO WAS DETERMINED BY THE BOARD OF DIRECTORS WHEN

HIRED USING A COMPENSATION STUDY TO DETERMINE A SALARY RANGE. THE

EXECUTIVE COMMITTEE REVIEWS, DETERMINES AND APPROVES COMPENSATION CHANGES

ANNUALLY. COMPENSATION FOR OTHER KEY EMPLOYEES IS DETERMINED BY THE CEO AND

APPROVED BY THE BOARD OF DIRECTORS ANNUALLY.

FORM 990, PART VI, SECTION C, LINE 19:

INTERESTED PERSONS CAN CONTACT THE ORGANIZATION TO OBTAIN COPIES OF FORM 990.

FORM 990, PART XII, LINE 2C

THERE WERE NO CHANGES TO THE AUDIT SELECTION PROCESS FROM THE PRIOR YEAR.