

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2020

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning **01/01/2020** and ending **12/31/2020**

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PILGRIMS OF IBILLIN		D Employer identification number 38-3243253
	Doing business as		E Telephone number 224-577-8291
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	PO BOX 337 100 NORTH MAIN ST		G Gross receipts \$ 553,853
City or town, state or province, country, and ZIP or foreign postal code DAVIDSON, NC, 28036			
F Name and address of principal officer: ESSREA CHERIN		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
PO BOX 337 100 NORTH MAIN ST, DAVIDSON, NC 28036		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		If "No," attach a list. See instructions	
J Website: ▶ https://www.pilgrimsofibilin.org/		H(c) Group exemption number ▶	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1995	M State of legal domicile: WI

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>Promote peaceful co-existence through education among diverse cultural and religious groups in Israel and Palestine.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	15
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	15
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	3
	6 Total number of volunteers (estimate if necessary)	6	3
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 271,031	Current Year 552,650
	9 Program service revenue (Part VIII, line 2g)	63,267	1,150
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	462	53
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	334,760	553,853
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	144,204	526,745
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	57,418	60,040
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 15,540		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	148,848	47,142
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	350,470	633,927
19 Revenue less expenses. Subtract line 18 from line 12	-15,710	-80,074	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 318,823	End of Year 227,257
	21 Total liabilities (Part X, line 26)	17,368	7,355
	22 Net assets or fund balances. Subtract line 21 from line 20	301,455	219,902

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	<i>Essrea Cherin</i>	10/20/2021
	Signature of officer	Date
	ESSREA CHERIN, EXECUTIVE DIRECTOR	
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name JEREMY CORK	Preparer's signature <i>Jeremy Cork</i>	Date 10/20/2021	Check <input type="checkbox"/> if self-employed	PTIN P01544850
	Firm's name ▶ EASY OFFICE DBA JITASA	Firm's EIN ▶ 26-2176601		Phone no. 208-287-4777	
	Firm's address ▶ 1750 W FRONT STREET SUITE 200, BOISE, ID 83702				

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