# 990 **990**

Department of the Treasury Internal Revenue Service

## **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.

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

OMB No. 1545-0047

Open to Public Inspection

Α	For	r the	2023 calend	lar year, or t	tax year begin	ning		, 2023, a	and endi	ng		, 20			
В	Che	ck if ap	oplicable:	C Name of or	ganization <b>Ch</b>	esapeake Chu	rch				D Empl	loyer identification number			
П		ress ch		Doing busing							•	52-1378847			
Ħ		ne chai	-	·		v if mail is not delivered t	a atract address)		Boom/oui	to	E Tolon	hone number			
H			•	Number and street (or P.O. box if mail is not delivered to street address)  Room/suite						le	E leieb				
H		al returi	-							(410) 257-0700					
H			n/terminated	•		country, and ZIP or forei	gn postal code					s receipts			
H		ended r			ingtown, M						\$	4,847,399			
Ш	Appl	lication	pending	F Name and	address of principal	I officer:						for subordinates? Yes No			
						Г				H(b) Are all s		<del>-</del> -			
<u></u>	Tax-	exemp	ot status:	501(c)(3)	501(c) (	) (insert no.)	4947(a)(1) or !	527		If "No," a	attach a lis	st. See instructions			
J	Web	site:			eakechurch	org				H(c) Group e	xemption	number			
K			_	Corporation	Trust Ass	ociation Other	I	L Year of formati	on: 198	5 M S	tate of leg	gal domicile: MD			
Pa	art		Summar	<del>,</del>											
		1	Briefly descr	ibe the orga	nization's missi	ion or most significa	ant activities: <u>To r</u>	each the	unch	urched a	and h	elp them become			
ě			fully de	voted fo	ollowers o	complish	ed by	providi	ng re	eligious					
& Governance			activiti	es and s	<u>ervices t</u>	o individual	s who voluntar	ily asso	ciate	themsel	hemselves together for				
ern			<u>divine w</u>	orship a	and godly	living agree	able to holy s	cripture	•						
ò					-		rations or disposed of					1			
∞ ∞		3	Number of v	oting membe	ers of the gove	rning body (Part VI,	, line 1a)				3	9			
es		4	Number of ir	ndependent v	voting member	s of the governing I	body (Part VI, line 1b)				4	9			
Ϋ́Ε		5	Total numbe	r of individua	als employed in	ı calendar year 202	3 (Part V, line 2a)				5	39			
Activities		6	Total numbe	r of voluntee	ers (estimate if i	necessary)					6	3,282			
4		7a	Total unrelat	ed business	revenue from	Part VIII, column (C	c), line 12				7a	0			
		b	Net unrelate	d business ta	axable income	from Form 990-T, F	Part I, line 11 • • • •				7b	0			
										Prior Year		Current Year			
		8	Contribution	s and grants	(Part VIII, line	1h)				3,388	,866	3,925,220			
ne		9	Program ser	vice revenue	e (Part VIII, line	e 2g)				169	,200	243,517			
Revenue	•	10	Investment i	ncome (Part	VIII, column (A	A), lines 3, 4, and 70	d)					94,419			
Re	•	11	Other revenu	ue (Part VIII,	, column (A), lir	nes 5, 6d, 8c, 9c, 10	oc, and 11e)			87	,532	121,548			
		12	Total revenu	e - add lines	8 through 11 (	must equal Part VII	I, column (A), line 12)			3,645	,598	4,384,704			
	Τ.	13	Grants and s	similar amou	nts paid (Part I	X, column (A), lines	s 1-3)					0			
	-	14	4 Benefits paid to or for members (Part IX, column (A), line 4)									0			
	.  -	15	The state of the s							1,802	,324	1,713,386			
Expenses	.	16a	Professional	fundraising	fees (Part IX, o	column (A), line 11e	e)			,		0			
en		b	Total fundrai	sing expense	es (Part IX, col	umn (D), line 25)		0							
ă	·   ·	17	Other expen	ses (Part IX,	, column (A), lir	nes 11a-11d, 11f-24	e)			2,432	, 938	2,337,767			
	.						mn (A), line 25)			4,235		4,051,153			
	.										,664)				
	es			•					Begir	nning of Curre		End of Year			
ets	lanc	20	Total assets	(Part X, line	16)					6,054		5,505,294			
Asse	Ba		Total liabilitie	•	,					2,450		1,567,976			
Net	ובו			•	,	ne 21 from line 20				3,603		3,937,318			
	art	_		re Block					-		/	0,00.,020			
						ırn, including accompany	ing schedules and statemen	ts, and to the bes	st of my kno	wledge and be	elief, it is				
true	e, cor	rect, a	nd complete. De	claration of prep	oarer (other than off	ficer) is based on all infor	mation of which preparer ha	s any knowledge			1				
			Larr	y Patin											
Sig	gn	T	Signature of office								Da	ite			
He	re		T.arr	y Patin,	Executive	e Pastor									
	-	t	Type or print nar		EXECUCIV	e rascor									
			Print/Type pre			Preparer's signature		Date		Check	Пі	PTIN			
Pa	id		John Mu		ļ	John Mullins	08-22-2024				_	P01429307			
		arer	Firm's name	*******	Mulline	•		νυ-22 <b>-</b> 20		self-emp	noyeu	FU14233U/			
	•	Only			Mullins,					Phone no.					
-5		- · · · y	riiii s addres	99		consin Avenu	<del>-</del>			202-770-6371					
May	/ the	ı IRS	discuss this	return with t		. MD 20814 nown above? See in	structions				202-	X Yes No			

3) <u>Chesapeake Church</u>
Checklist of Required Schedules Part IV

			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	х	
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		Х
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		Х
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		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>			
_	complete Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	١		
	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, Part VI			
	·	11a	X	
b		445		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more	44.		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	444		
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e		х
f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	TIE		Х
•	the organization's separate of consolidated infancial statements for the tax year include a footbote that addresses  the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		v
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>			Х
12a	Schedule D, Parts XI and XII	12a		v
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	124		Х
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional • • • • • • •	12b		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			Α_
•	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		х
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		х
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		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

3) Chesapeake Church Checklist of Required Schedules (continued) Form 990 (2023) 52-1378847 Page 4 Part IV

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			ĺ
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			l
	organization's current and former officers, directors, trustees, key employees, and highest compensated			l
	employees? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			l
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			l
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			l
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	054		
00	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			l
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	20		
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
21	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			l
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			l
	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			A
	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? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
С	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			l
	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			l
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			_
05-	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	25h		l
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	35b		
30	related organization? If "Yes," complete Schedule R, Part V, line 2	36		v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			X
٠.	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? <b>Note</b> : All Form 990 filers are required to complete Schedule O····································	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1 a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	х	<u> </u>

Part VI

3) Chesapeake Church 52-1378847 Page 6
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. 

Se	Cuon A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		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?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
•	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
_			Yes	No
0a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	401		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40-		
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u> </u>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	420		
•	describe on Schedule O how this was done	12c	х	
3		13	х	
4	Did the organization have a written document retention and destruction policy?	14	Х	
5	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?			
•	The organization's CEO, Executive Director, or top management official	150	v	
a h	Other officers or key employees of the organization	15a 15b	X	
b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	130	Х	
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
oa	with a taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	iou		Λ
~	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	.00		
7	List the states with which a copy of this Form 990 is required to be filed			
8	Section 6104 requires an organization to make its Forms 1023 (1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Wat Upon request Other (explain on Schedule O)			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
-	The Character (410) 257 (270) 6201 Colorest Trained Read Training to the All 2005 Colorest Training to the Character (410) 257 (270) 6201			

Form	990	(2023)

Chesapeake Church

52-1378847

Page 7

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - · List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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

				(	(C)					
(A)	(B)	Position				(D)	(E)	(F)		
Name and title	Average	١,				han one s both a		Reportable	Reportable	Estimated amount
	hours					/trustee		compensation from the	compensation from related	of other compensation
	per week (list any							organization (W-2/	organizations (W-2/	from the
	hours for	Individual trustee or director	Institutional trustee	Officer	Key	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	related	idual	ution	еŗ	Key employee	est c loyee	ner	1099-1420)	1099-NEC)	related organizations
	organizations below	trus	al tru		oyee	omp				
	dotted line)	tee	ıstee			ensa				
						ted				
(1)Seth_Randleman	8.00									
Elder		х						0	0	0
(2)Nathan Fair	8.00									
Elder		Х						0	0	0
(3)Chris Murphy	8.00									
Elder		Х						0	0	0
_(4)William_Walsh	8 .00									
Elder		Х	_					0	0	0
_(5)Jonathan_Miller	8.00									
Elder		Х						0	0	0_
(6)William Collette	8 .00							_	_	_
Elder		Х						0	0	0
(7)Marlin Ruhl	8 .00	l .								
Elder	0.00	Х	-					0	0	0
(8)Chet Taylor	8 .00							_		•
Elder	0.00	Х						0	0	0
_(9)Steve_BertolacciniElder	8 .00	x						0	0	0
	8.00							0	0	
(10)Larry Patin  Executive Pastor				х				0	0	0
(11)										
12										
(12)										
<u>(13)</u>										
<u>(14)</u>										

(A)  Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both a officer and a director/trustee						(D)  Reportable compensation from the organization (W-2/	(E)  Reportable  compensation  from related  organizations (W-2/	Esti	(F) mated am of other ompensal from the	nount
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-MEC)	1 "	anization ed organiz	
<u>(15)</u>												
<u>(16)</u>												
<u>(17)</u>												
<u>(18)</u>												
<u>(19)</u>												
<u>(20)</u>												
<u>(21)</u>												
(22)												
(23)												
(24)												
(25)												
1b Subtotal	ction A .		 					0 received more t	0 han \$100,000 c	f		0
reportable compensation from the organiza											Yes	No
<ul> <li>Did the organization list any former officer, direct employee on line 1a? <i>If "Yes," complete Schedule</i></li> <li>For any individual listed on line 1a, is the sum of organization and related organizations greater that individual</li> </ul>	e <i>J for such ii</i> reportable co an \$150,000?	ndividu mpens ? If "Ye	ial satio	 n an	 d otl	· · · her co	 mpe	ensation from the		3		x
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	e compensati	on fror	n an							5		x
Section B. Independent Contractors										<u>'</u>		
Complete this table for your five highest co- compensation from the organization. Repo	-	-									's tax	year.
(A)  Name and business address							(B) Description of service	ces	(C Compe			
Total number of independent contractors (i received more than \$100,000 of compensations)						ose I	iste	d above) who				

52-1378847

Form 990 (2023) Chesapeake Church
Part VIII Statement of Revenue

		Check if Schedule O contains a respon-	se or note to any	line in this Part \	/III		[
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
rants	1a b c	Federated campaigns					
is, Giffs, G milar Amo	d e f	Related organizations	+				
Contributions, Gifts, Grants and Other Similar Amounts	g	and similar amounts not included above  Noncash contributions included in  lines 1a-1f	3,925,220 \$1,143,272				
	h	Total. Add lines 1a-1f	Business Code	3,925,220			
ervice Ie	2a b	Ministry	900099	243,517	243,517		
Program Service Revenue	d e						
		All other program service revenue		243,517			
	3	Investment income (including dividends, interest other similar amounts)		114			114
	5	Royalties	(ii) Personal				
	b	Gross rents         6a         57,875           Less: rental expenses         6b           Rental income or (loss)         6c         57,875					
		Net rental income or (loss)	(ii) Other	57,875	57,875		
	b	other than inventory 7a Less: cost or other basis	557,000				
Other Revenue		and sales expenses 7b  Gain or (loss) 7c	462,695 94,305	04.005			24.225
Other R		Net gain or (loss)		94,305			94,305
		1c). See Part IV, line 18	+				
	9a	Gross income from gaming activities. See Part IV, line 19 9a Less: direct expenses	1				
		Net income or (loss) from gaming activities  Gross sales of inventory, less returns and allowances	a				
		Less: cost of goods sold	b				
Miscellanous Revenue	11a b	Other	Business Code 900099	63,673	63,673		
Miscel Reve		All other revenue		63,673			
	12	Total revenue See instructions		4 204 704	265 065	0	04 410

	1 990 (2023) Chesapeake Church			52-13788	3 <b>47</b> Page <b>10</b>
	rt IX Statement of Functional Expenses				(4)
Sec	tion 501(c)(3) and 501(c)(4) organizations must compl Check if Schedule O contains a response or			•	
D = #	•	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 7b,	Total expenses	Program service	Management and	Fundraising
	0b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,358,378	1,222,540	135,838	
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	204,077	183,669	20,408	
10	Payroll taxes	150,931	135,838	15,093	
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
40	(A), amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13					
14 15	Information technology				
15 16	Royalties	F0 402	45 444	F 040	
16 17	Travel	50,493	45,444	5,049	
1 <i>1</i> 18	Payments of travel or entertainment expenses				
10	·				
19	for any federal, state, or local public officials Conferences, conventions, and meetings				
19 20	Interest	EC 144	E0 E30	E 614	
20 21	Payments to affiliates	56,144	50,530	5,614	
22	Depreciation, depletion, and amortization	327,218	204 406	32,722	
23	Insurance	327,210	294,496	32,122	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	Worship, Pantry and Care	1,609,277	1,609,277		
b	Management and Finance	294,635	265,171	29,464	
c	Management and Finance	234,033	203,171	23,404	
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,051,153	3,806,965	244,188	0
26	Joint costs. Complete this line only if the	, ,	, , ,	,	
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here  if				
	following SOP 98-2 (ASC 958-720)				

25

26

# Form 990 (2023) CP Part X Balance Sheet

	_	Check if Schedule O contains a response or note to any line in this Part X			П
		·	(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	334,813	1	459,829
	2	Savings and temporary cash investments	7,938	2	39,388
	3	Pledges and grants receivable, net	,	3	<u>,                                      </u>
	4	Accounts receivable, net	30,357	4	
	5	Loans and other receivables from any current or former officer, director,	,		
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
<b>,</b>	7	Notes and loans receivable, net	75,105	7	100,358
Assets	8	Inventories for sale or use	5,679	8	9,353
Ass	9	Prepaid expenses and deferred charges	965	9	
•	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 9,065,157			
	b	Less: accumulated depreciation	5,588,065	10c	4,896,366
	11	Investments - publicly traded securities	5,555,555	11	-,,
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	11,121	15	
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 33)	6,054,043	16	5,505,294
	17	Accounts payable and accrued expenses	107,070	17	158,423
	18	Grants payable	==:,,:::	18	
	19	Deferred revenue		19	975
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ś	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties	2,265,773	23	1,408,578
	24	Unsecured notes and loans payable to unrelated third parties	75,000	24	2/100/070
	25	Other liabilities (including federal income tax, payables to related third	.5,000		
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	2,228	25	
	26	Total liabilities. Add lines 17 through 25	2,450,071	26	1,567,976
		Organizations that follow FASB ASC 958, check here			=//
es		and complete lines 27, 28, 32, and 33.			
Š	27	Net assets without donor restrictions	3,545,999	27	3,886,467
3ale	28	Net assets with donor restrictions	57,973	28	50,851
B		Organizations that do not follow FASB ASC 958, check here	,		53,33=
Fu		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	3,603,972	32	3,937,318
ž	33	Total liabilities and net assets/fund balances	6,054,043	33	5,505,294
EEA			-,,		Form <b>990</b> (2023)

	n 990 (2023) Chesapeake Church	52-137	78847		Pa	ıge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		4,3	84,	704
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		4,0	51,	153
3	Revenue less expenses. Subtract line 2 from line 1	. 3		3	33,	551
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4		3,6	03,	972
5	Net unrealized gains (losses) on investments	. 5			(	205)
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		3,9	37,	318
Pai	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990:   Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			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.					
	X Separate basis					
b	Were the organization's financial statements audited by an independent accountant?		[ :	2b		х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
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					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		;	3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		1.	2h		

EEA

## **SCHEDULE A** (Form 990)

## **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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

		eake Church	-: Ot-t (Al	II	.4	-4- 4l-:- ·	52-137884				
Par		Reason for Public Cha	<u> </u>				bart.) See instructi	ons.			
The o	<u> </u>	nization is not a private foundation be	`	<b>o</b> ,	,	,					
1	X	A church, convention of churches, of				)(1)(A)(i).					
2	Ļ	A school described in <b>section 170</b> (	<b>b)(1)(A)(ii).</b> (Attach	Schedule E (Form 990)	.)						
3	$\sqsubseteq$	A hospital or a cooperative hospital	service organization	on described in <b>section</b> '	170(b)(1)( <i>l</i>	4)(iii).					
4		A medical research organization op	erated in conjunction	on with a hospital describ	oed in <b>sect</b>	ion 170(b)	(1)(A)(iii). Enter the				
	_	hospital's name, city, and state:									
5		An organization operated for the be	nefit of a college o	r university owned or ope	erated by a	a governme	ental unit described in				
	_	section 170(b)(1)(A)(iv). (Complete	e Part II.)								
6	$\sqsubseteq$	A federal, state, or local governmen	nt or governmental	unit described in <b>sectior</b>	170(b)(1)	(A)(v).					
7	Ш	An organization that normally receive	ves a substantial pa	art of its support from a g	governmen	tal unit or t	from the general public				
	described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8	Ļ	A community trust described in <b>sec</b>	tion 170(b)(1)(A)(v	<b>/i).</b> (Complete Part II.)							
9		An agricultural research organization	on described in <b>sec</b>	tion 170(b)(1)(A)(ix) ope	erated in co	onjunction	with a land-grant colleg	je			
		or university or a non-land-grant co	llege of agriculture	(see instructions). Enter	the name	city, and s	state of the college or				
		university:									
10	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)										
11	닏	An organization organized and oper	•			. , , ,					
12	L	An organization organized and ope	•	•							
		one or more publicly supported orga		. , , ,			` , ` ,	Check			
_		the box on lines 12a through 12d th	•				-				
а		Type I. A supporting organization (a) the supported organization		· · · · · · · · · · · · · · · · · · ·			. ,	ig			
		the supported organization(s) the supporting organization.			only of the	directors	or trustees of the				
h		supporting organization. <b>You m Type II.</b> A supporting organization	•		ith ite cun	ported orac	anization(s) by baying				
b		control or management of the s	•			_	.,	ad			
					persons in	at control (	or manage the support	<del>c</del> u			
_		organization(s). You must con	· .		nnootion	ith and fu	nationally intograted wit	th			
С		its supported organization(s) (s		•				ш,			
d		Type III non-functionally integ						n(e)			
u		that is not functionally integrate						. ,			
		requirement (see instructions).	•			•		,,,,			
е		Check this box if the organization					I Type II Type III				
•		functionally integrated, or Type				,,	., .,p=, .,p=				
f	F	inter the number of supported organi	· · · · · · · · · · · · · · · · · · ·			· 					
g		Provide the following information about		ganization(s).							
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the c	rganization	(v) Amount of monetary	(vi)	Amount of		
		11 3	, ,	(described on lines 1-10	listed in you	ır governing	support (see	othe	r support (see		
				above (see instructions))	docum	nent?	instructions)	ir	nstructions)		
					Yes	No	1				
(A)											
(B)											
(C)											
(D)											
(D)											
(E)											
Total											

% % 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this 16a box and stop here. The organization qualifies as a publicly supported organization.................. 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18 

52-1378847

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	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						
С	Add lines 7a and 7b						<del></del>
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support		•	•	•		
Calen	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6					, ,	. ,
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the or	•	rst, second, th	ird, fourth, or fi	fth tax year as	a section 501	(c)(3)
<u>~</u>	organization, check this box and stop her						
	on C. Computation of Public Suppo			(5)		1 1	
15	Public support percentage for 2023 (line 8		•			15	%
16	Public support percentage from 2022 Sch		•			16	%
	on D. Computation of Investment In			huling 40!	ump (f\)	147	
17	Investment income percentage for 2023 (		. ,	•		17	<u>%</u>
18	· · · · · · · · · · · · · · · · · · ·	m <b>2022</b> Schedule A, Part III, line 17					
19a	• • • • • • • • • • • • • • • • • • • •						
h	17 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization						
b	33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						
20							
20	Private foundation. If the organization di	u not check a	DUX UN IME 14	, 19a, OF 19D, C	THECK THIS DOX	anu see instru	อแบบร 📋

Schedule A (Form 990) 2023 Chesapeake Church 52-1378847 Page 4

### 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**

Jecu	on A. An Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by	_		
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	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.	3a		
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.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
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.	4b		
С	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 <b>Part VI</b> 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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes,"</i>			
	answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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			
L	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	<b>5</b> h		
_	designated in the organization's organizing document?	5b 5c		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	50		
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			
		e		
7	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	6		
7	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? <i>If</i> "Yes," <i>complete Part I of Schedule L (Form 990).</i>	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			
Ü	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	0		
Ja	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 <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which	Ju		
~	the supporting organization had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit			
-	from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI</i> .	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section	30		
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer line 10b below.	10a		
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 husiness holdings )	10h		

	- Company Control of the control of		Vaa	NI.
44			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?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
04	provide detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations			
_			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
	how the organization maintained a close and continuous working relationship with the supported organization(s)	. 2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (se	e ins	tructi	ons).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	ns).		
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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part	31 3 3 4 7 7 11 3						
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See						
	instructions. All other Type III non-functionally integrated supporting organ	izat	ions must complete Sect	ions A through E.			
Sect	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year			
	Not about form again	1		(optional)			
1	Net short-term capital gain	2					
<b>2</b> 3	Recoveries of prior-year distributions	3					
4	Other gross income (see instructions)  Add lines 1 through 3.	4					
		5					
5	Depreciation and depletion  Portion of operating expenses paid or incurred for production or collection	Э					
6							
	of gross income or for management, conservation, or maintenance of	6					
	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		(D) O + )/			
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
a	Average monthly value of securities	1a					
	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in <b>Part VI</b> ):						
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	on 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-functional	ally i	ntegrated Type III suppo	rting organization			
	(see instructions).	,	3 71 11	J J			

EEA Schedule A (Form 990) 2023

10	Line 8 amount divided by line 9 amount		10	<u>i</u>
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			<u> </u>
2	Underdistributions, if any, for years prior to 2023			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2023			
а	From 2018			
b	From 2019			
С	From 2020			
d	From 2021			
е	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

Schedule A (Form 990) 2023 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

### SCHEDULE 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.

Open to Public Inspection

Name of the organization Employer identification number 52-1378847 Chesapeake Church Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . . . Aggregate value of grants from (during year) .... 3 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included on line 2a Number of conservation easements included on line 2c. acquired after July 25, 2006, and not Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: 

Par	t III   Organizations Maintaining	Collections	of Art, H	<u>istorical</u>	Treasures	, or O	ther Similar As	sets (c	ontin	iued <sub>,</sub>
3	Using the organization's acquisition, access	ion, and other r	ecords, chec	k any of the	following that	make si	gnificant use of its			
	collection items (check all that apply):									
а	Public exhibition		d	Loan	or exchange p	rogram				
b	Scholarly research		е	Other		_				
С	Preservation for future generations			_	-					
4	Provide a description of the organization's c	ollections and e	explain how th	nev further t	he organizatio	n's exer	not purpose in Part			
-	XIII.			,	o. ga <u>_</u> a					
5	During the year, did the organization solicit of	or receive dona	tions of art h	istorical tres	asures or othe	ar eimilai	r			
J	assets to be sold to raise funds rather than t							. Tyes	. $\sqcap$	No
Par	t IV Escrow and Custodial Arra		u as part or ti	ie organiza	tion's collection	11:			, L	NO
i ai	Complete if the organization		Vac" on Ec	rm 000	Dart IV line	0 or	reported an am	ount on	For	m
	990, Part X, line 21.	answered	103 01110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	i aitiv, iiic	, 0, 01	reported arrain	ount on	1 011	"
		P		4 . 9 42						
1a	Is the organization an agent, trustee, custod		-					□ <b>v</b>		١
	,							.   Yes	· L	No
b	If "Yes," explain the arrangement in Part XIII	and complete	the following	table.			1 .			
						_		ount		
С	Beginning balance									
d	Additions during the year						1			
е	Distributions during the year					. 16				
f	Ending balance					. 1f				
2a	Did the organization include an amount on F						-		_	No
b	If "Yes," explain the arrangement in Part XIII	I. Check here if	the explanati	on has bee	n provided on	Part XII				
Par										
	Complete if the organization	answered "	Yes" on Fo	rm 990,	Part IV, line	10.	•			
		(a) Current year	r <b>(b)</b>	Prior year	(c) Two years	back	(d) Three years back	(e) Four	years b	ack
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses							1		
g	End of year balance							1		
2	Provide the estimated percentage of the cur	rent vear end b	alance (line 1	a. column	(a)) held as:		l			
а	Board designated or quasi-endowment	-	`	3,	· //					
b	Permanent endowment %									
c	Term endowment %									
·	The percentages on lines 2a, 2b, and 2c sho	ould equal 100°	6							
3a	Are there endowment funds not in the posses			at are held s	and administer	ed for th	10			
Ju	organization by:	2331011 01 1110 01	garnzauon un	it are ricia t	and administer	cu ioi ti		1	Yes	No
	(i) Unrelated organizations?							. 3a(i)	163	140
	(ii) Related organizations?							<del>'''</del>		
								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiz							. 3b		
Dor	Describe in Part XIII the intended uses of the		endowment	tunas.						
Par	Land, Buildings, and Equip Complete if the organization		Vaa" on Fa	rm 000	Dort IV line	110	Saa Farm 000	Dort V	lina ,	10
							1			10.
	Description of property	1 ' '	or other basis	(b) Cost	or other basis		Accumulated	(d) Book	value	
		· '	vestment)		(other)	d	epreciation			
1a	Land	• •								
b	Buildings	• •								
С	Leasehold improvements	• •								
d	Equipment									
<u>e</u>	Other				,065,157		4,168,791	4,8	96,3	366
Total	Add lines 1a through 1a (Column (d) must ex	aual Form 000	Dart V line 1	Oc column	(D)			4 0	06	266

rait VII	Complete if the organization answered	d "Yes" on For	m 990, Part IV, l	line 11b. See Foi	rm 990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book value	, ,	Method of valuation: end-of-year market value
(1) Financial	derivatives				
` '	eld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	(b) must equal Form 990, Part X, line 12, col.(B))				
Part VIII	Investments - Program Related Complete if the organization answered	d "Yes" on For	m 990, Part IV, I	line 11c. See For	m 990, Part X, line 13.
	(a) Description of investment		(b) Book value		Method of valuation: end-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, line 13, col. (B))				
Part IX	Other Assets				
	Complete if the organization answered	d "Yes" on For	m 990, Part IV, I	line 11d. See Foi	rm 990, Part X, line 15.
	<b>(a)</b> De	escription			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column	n (b) must equal Form 990, Part X, line 15 col. (B))				
Part X	Other Liabilities				
	Complete if the organization answered	d "Yes" on For	m 990, Part IV, I	line 11e or 11f. S	ee Form 990, Part X,
	line 25.				
1.	(a) Description of liability	(b) Book	/alue		
	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	b) must equal Form 990, Part X, line 25 col. (B))				
-	uncertain tax positions. In Part XIII, provide the tex		-		_
organization's	liability for uncertain tax positions under FASB ASC	740. Check here	if the text of the foot	tnote has been provid	led in Part XIII 📙

Part	· ·	<sup>r</sup> Return
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	<u> </u>
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains (losses) on investments	4
b	Donated services and use of facilities	
С	Recoveries of prior year grants	4
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	4
b	Other (Describe in Part XIII.)	
С	Add lines <b>4a</b> and <b>4b</b>	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)-	5
Part	· · · · · · · · · · · · · · · · · · ·	ber Return
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities	
b	Prior year adjustments	4
С	Other losses	4
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a	4
b	Other (Describe in Part XIII.)	
С	Add lines <b>4a</b> and <b>4b</b>	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
Part		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4;	Part X, line
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	

Schedule D (Form 990) 2023

#### SCHEDULE M (Form 990)

### Noncash Contributions

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number

Name of the organization Chesapeake Church 52-1378847 Types of Property Part I (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g 1 2 Art - Historical treasures 3 Art - Fractional interests Books and publications . . . . . . 4 5 Clothing and household goods . . . . . . . . . . . . . . . 6 Cars and other vehicles 7 8 9 Securities - Publicly traded . . . . . . 10 Securities - Closely held stock . . . . Securities - Partnership, LLC, 11 or trust interests . . . . . . 12 Securities - Miscellaneous Qualified conservation 13 contribution - Historic structures ....... 14 Qualified conservation contribution - Other . . . . . . . . 15 Real estate - Residential . . . . . . 16 Real estate - Commercial . . . . . . 17 18 19 Х 129 1,143,272 20 Drugs and medical supplies . . . . . 21 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ( 26 Other ( 27 Other ( 28 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? х If "Yes," describe the arrangement in Part II. b 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? Х If "Yes," describe in Part II. b

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

describe in Part II.

# SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 52-1378847 Chesapeake Church 01. Form 990 governing body review (Part VI, line 11) The 990 is reviewed in detail with the preparer, an independent CPA. The 990 is also reviewed by the leadership team and the full board prior to its filing. 02. Conflict of interest policy compliance (Part VI, line 12c) Potential conflicts are brought to the attention of the Board Chair and President. Individuals with potential conflicts are excluded from deliberation and voting on the potential conflict. 03. CEO, executive director, top management comp (Part VI, line 15a) Compensation for the President and key employees are determined and approved by the board and compensation committee. 04. Other officer or key employee compensation (Part VI, line 15b Compensation for other employees are approved by the board through the annual budgeting process. 05. Governing documents, etc, available to public (Part VI, line 19) Governing documents are available upon request.