

Return of Organization Exempt From Income Tax

2023

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/Form990EZ for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2023 calendar year, or tax year beginning, 2023, and ending, 20

B Check if applicable: [] Address change [] Name change [] Initial return [] Final return/terminated [] Amended return [] Application pending
C Name of organization: Transforming Jail Ministries
D Employer identification number: 26-0727601
E Telephone number: 5137949999
F Group Exemption Number

G Accounting Method: [X] Cash [] Accrual Other (specify):
H Check [] if the organization is not required to attach Schedule B (Form 990).

I Website: www.tjmi.org

J Tax-exempt status (check only one) - [X] 501(c)(3) [] 501(c) () (insert no.) [] 4947(a)(1) or [] 527

K Form of organization: [X] Corporation [] Trust [] Association [] Other:

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 139,092.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I [X]

Table with 3 columns: Line number, Description, and Amount. Rows include Revenue (1-9), Expenses (10-17), and Net Assets (18-21). Total revenue is 139,092.

For Paperwork Reduction Act Notice, see the separate instructions.

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	54,091.	22 96,643.
23 Land and buildings		23
24 Other assets (describe in Schedule O)	300.	24 435.
25 Total assets	54,391.	25 97,078.
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	54,391.	27 97,078.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? To take God's message of hope to those in jail.

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28 Adult Jail Chaplaincy training is used to evaluate, train, and select future chaplains for volunteer service. In 2023, Transforming Jail Ministries trained two new chaplains. (Grants \$ 0.) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	4,820.
29 TJM facilitates access to the Hamilton Co. Justice Center for Chaplains (28) & 30 worship teams who provide "God's message of hope to those in Jail." TJM staff ensures that these volunteers are credentialed and knowledgeable based on HCJC rules. (Grants \$ 0.) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	81,944.
30 TJM services on-demand requests from the Sheriff, his staff & those incarcerated for face-to-face, in-jail visits i.e. family member death notifications, crisis intervention, and individual requests. (Grants \$ 0.) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	7,712.
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	94,476.

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Shawn Wuske Executive Director	40.00	50,000.	5,000.	0.
Rev. Stuart Warren Board Member	5.00	0.	0.	0.
Mr. Tom Vinegar Board Secretary/Chaplain	5.00	0.	0.	0.
Mr. David Pommert Board Treasurer	5.00	0.	0.	0.
Mr. Brad Weber Board Chair & Chaplain	5.00	0.	0.	0.
Mr. Tyler Schmidt Board Member Emeritus	5.00	0.	0.	0.